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# Results of Request Submission Portal User Consultation

# Document Management

## Revision History

Version	Date	Summary of Changes
0.1	21 <sup>st</sup> May 2015	First draft for comment
1.0	10 August 2015	Approved following CTS review

## Reviewers

This document must be reviewed by the following people:

Reviewer name	Title / Responsibility	Date	Version
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This document must be approved by the following people:

Name	Signature	Title	Date	Version
CTS Management Team	Meeting agenda		11/08/15	1.0

## Glossary of Terms

Term / Abbreviation	What it stands for
HSCIC	Health and Social Care Information Centre
NICIP	National Interim Clinical Imaging Procedures
SNOMED CT	Systematized Nomenclature of Medicine Clinical Terms
IHTSDO	International Health Terminology Standards Development Organisation
UKTC	UK Terminology Centre

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# 1 Purpose of document

The purpose of this document is to describe the results of the Request Submission Portal consultation, to assess the usability of the tool and evaluate the effectiveness of the underpinning process. A set of recommendations to support future service improvements has been identified and these are set out at section 8 of this report.

## 2 Audience

This document is written for all stakeholders who use or are interested in the continued development and improvement of the Request Submission Portal tool and underpinning process.

## 3 Scope

This consultation was focused upon the functionality and usability of the Request Submission Portal in support of the ongoing development of SNOMED CT, Read, NICIP and OPCS and was designed to

- Assess the level of satisfaction or dissatisfaction expressed by customers
- Feed into service improvement plans for the Clinical Terminology Service
- Identify areas where more user support information is required regarding submission process

It is the intention of the Clinical Terminology Service that the results of this consultation should influence the technical development and process of the Request Submission Portal and improve the service which we provide in general.

## 4 Background

Prior to the development of the portal, requests for changes to the terminology were submitted through a variety of mechanisms, for example our Helpdesk, personal emails, MyCodeplace (Read on N3 network only) or the previous SNOMED CT request portal.

The request submission portal was developed as a single unified site with supporting process for change requests from customers for SNOMED CT, Read, NICIP and OPCS.

## 5 Methodology

An on-line consultation questionnaire was hosted on Citizen Space from the 9<sup>th</sup> February 2015 to the 16<sup>th</sup> March 2015, all registered users of the Request Submission Portal were notified about the consultation by email and a link was placed on the Request Submission Portal during the consultation period.

The questions were developed within the HSCIC functions responsible for the maintenance of the Request Submission Portal and were based upon areas highlighted in previous feedback.

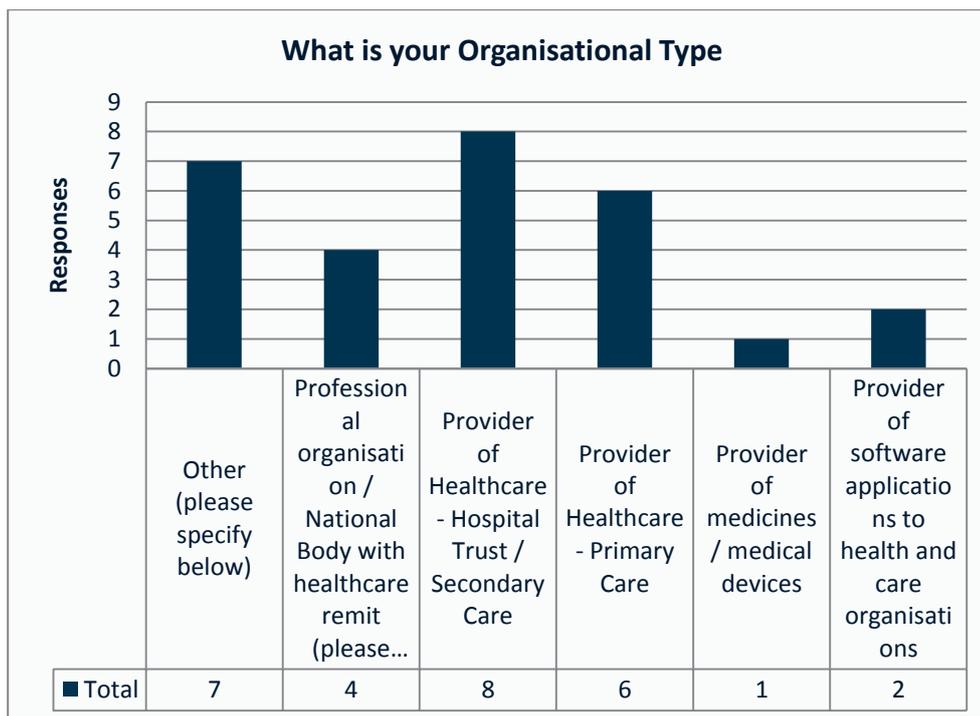
The consultation was also reviewed by HSCIC communications experts to ensure it conformed to HSCIC guidelines.

## 6 Results

There were 28 respondents to the consultation in total though not all questions were answered by every respondent. Respondents were given the opportunity to provide contact details if they wished to receive further communications on the consultation outcomes. The questions were as follows:

### 6.1 Question - What is your Organisation Type?

A total of 50% of respondents confirmed they were from either Primary or Secondary Care. The remaining respondents identified themselves as working for clinical commissioning groups, clinical support units or community services department (foundation trust).



The full list of organisations is as follows:

*Arden GEM CSU, Birmingham Children's Hospital NHS Foundation Trust, Boston Scientific, Central Manchester University Hospitals NHS Foundation Trust, Central Southern CSU Clinical commissioning Group, Community Services, part of Heart of England Foundation NHS Trust, Cumbria Partnership NHS Foundation Trust (CCG), EMIS, Epsom & St Helier University Hospitals NHS Trust, FOUNDATION TRUST, Gloucestershire Care Services NHS Trust, GP, OOH in Gwent and NWIS, Great Ormond Street Hospital NHS Foundation Trust, Herts Valleys CCG, HSCIC, Leeds Addiction Unit, Midlands & Lancashire Commissioning Support Unit, Midlands & Lancashire CSU, NELFT NHS, NHS Medway CCG, Pendyffryn Medical Group, SECSU, St Helens & Knowsley Teaching Hospitals NHS Trust, West Hertfordshire Hospitals NHS Trust, Westside Medical Centre, Whitehall surgery, Yorkshire & Humber Commissioning Support.*

### 6.2 Question - What is your job role?

Respondents came from a wide range of roles including IT professional roles, audit and service improvement facilitators to Clinical, Nursing, associated support roles and Allied health profession.

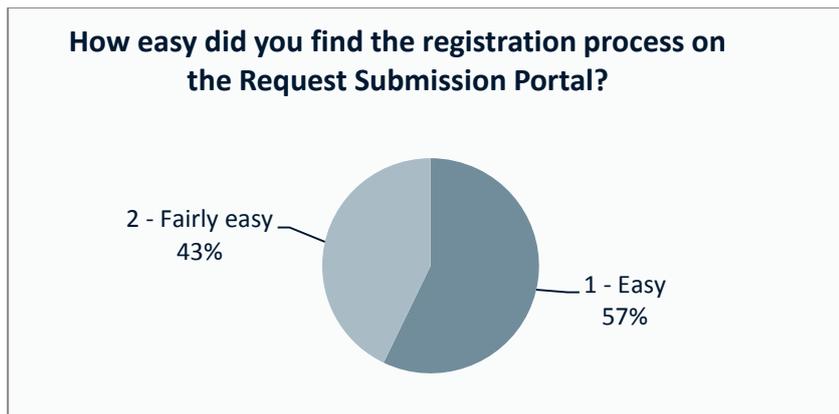
**The full list of roles is:**

*Advanced Information Analyst, Chief Clinical Officer, Clinical Applications Support, Clinical Data Standards Specialist, Clinical System Manager, Clinical Systems and Business Change Manager, Clinical Systems*

Support, Clinical Systems Team Manager, Consultant Addiction Psychiatrist, Data Quality Facilitator, EPR Development & Training Officer, GP, GP and Medical Informatician, GP partner, Head of Health Economics ICE administrator, IT Facilitator, Named GP for Safeguarding children, NHS Trainer – SystemOne, PACS & RIS Manager, PACS/RIS Manager, Pathology IT manager, PHARMACIST, Primary Care Data Quality Specialist, Primary Care Informatics Facilitator, Primary Care I.T Support Facilitator, Senior System Support Analyst

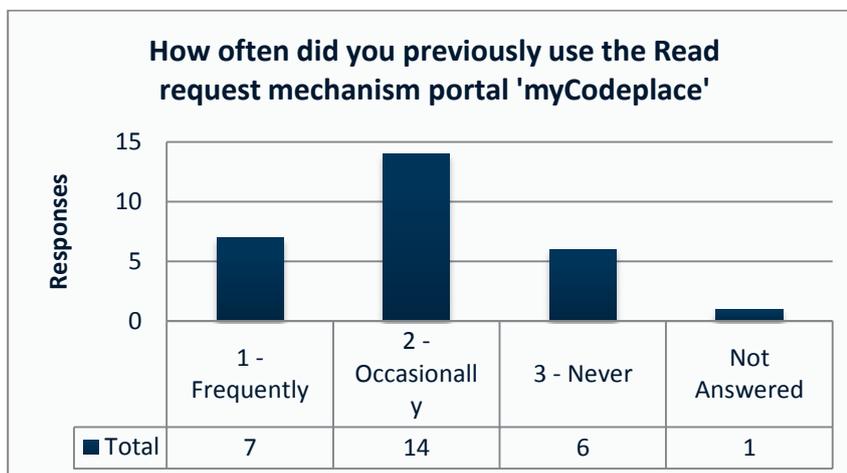
### 6.3 Question - How easy did you find the registration process on the Request Submission Portal?

The respondents felt the registration process was easy (57%) or fairly easy (43%). No other categories were selected, indicating that respondents had no issues.



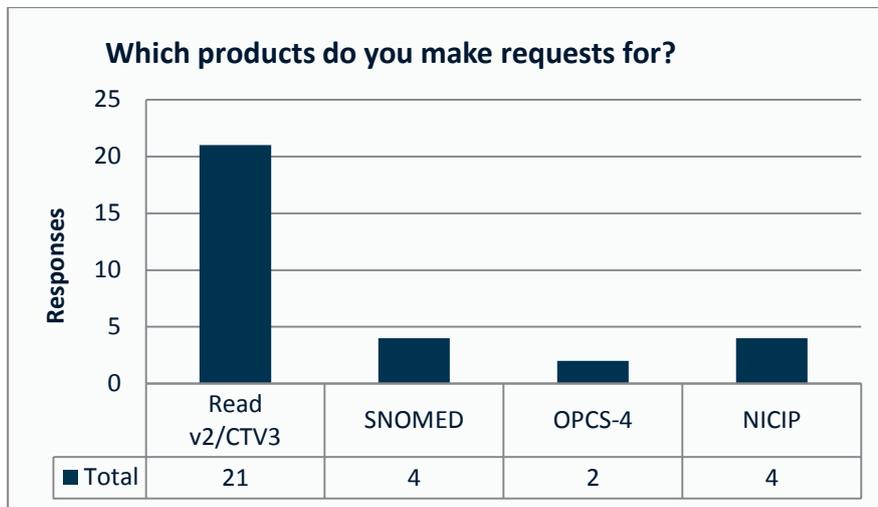
### 6.4 Question - How often did you previously use the Read request mechanism portal 'myCodeplace'?

Of the 27 respondents to this question, 78% had used “myCodeplace”. 22% respondents had not used “myCodeplace”.



## 6.5 Question - Which products do you make requests for?

27 respondents replied to this question and the most common product selected was Read v2/CTV3. To a lesser degree, respondents indicated they placed requests for all other products. Please note it was possible to pick more than one product.



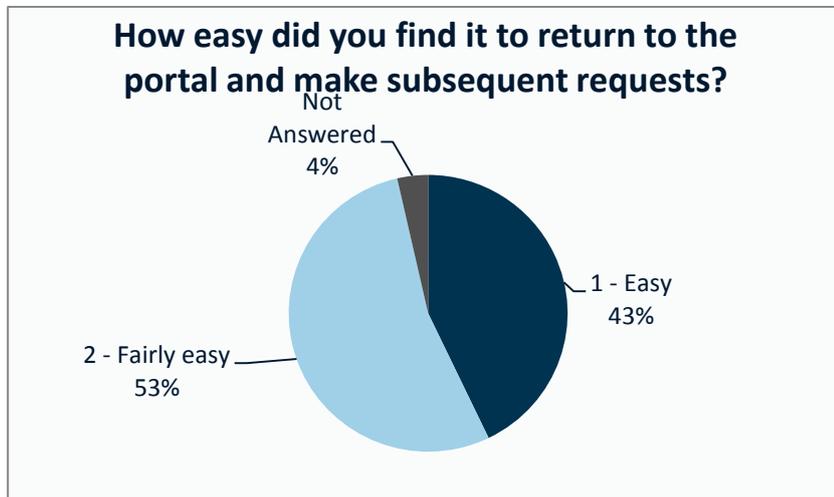
## 6.6 Question - How easy did you find it to make your first request after registration?

A total of 46% of respondents felt it was easy to make their first request and the remaining 54 % of respondents felt it was fairly easy.



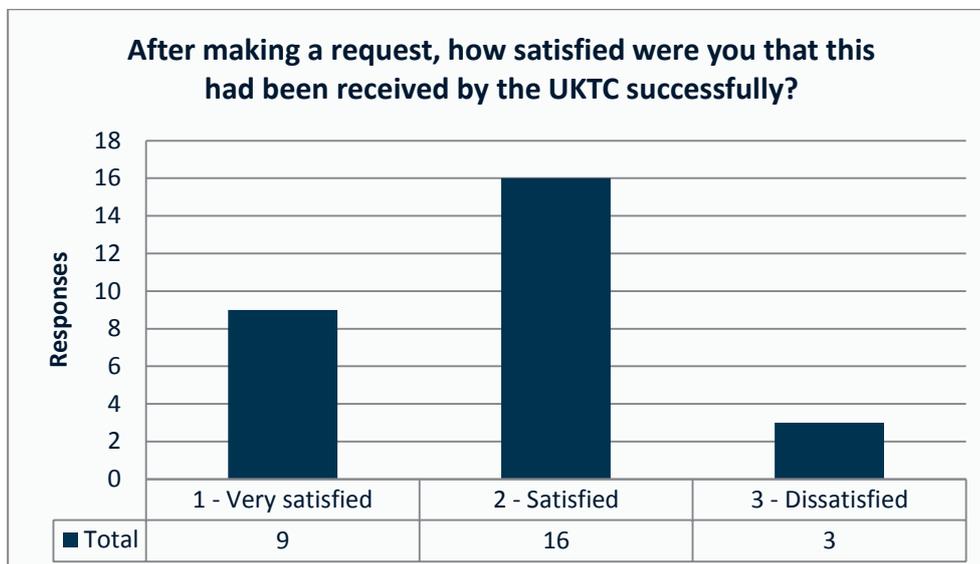
## 6.7 Question - How easy did you find it to return to the portal and make subsequent requests?

There were 27 responses to this question, 43% respondents felt it was easy and 53% felt it was fairly easy to return and make subsequent requests



## 6.8 Question – After making a request, how satisfied were you that this had been received by the UKTC successfully?

89% responders were satisfied or very satisfied however 11% responders were dissatisfied.

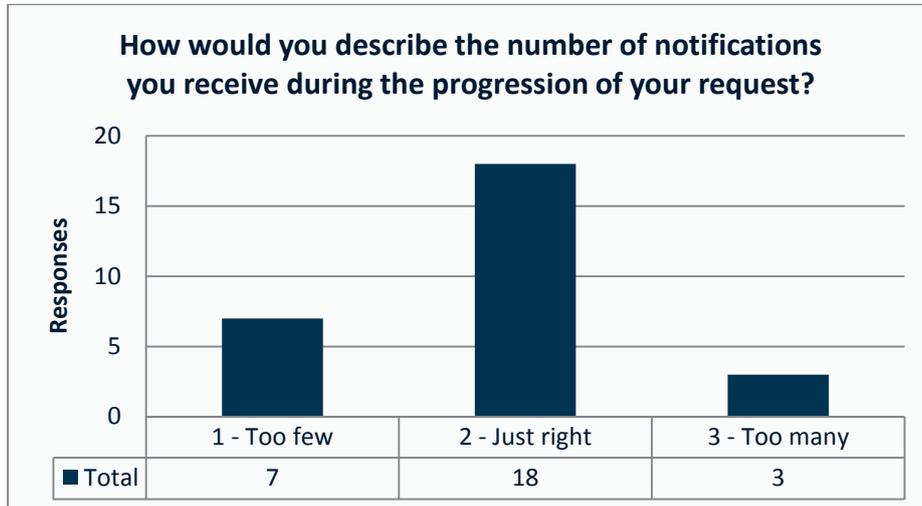


Some respondents took the opportunity to add comments as follows:

- *“Lack of feedback on the code request process”*
- *“The request was turned down but no reason given. I appealed but months later I am awaiting contact other than an acknowledgement.”*
- *“Very variable time frame before communication was received, apart from the “we have logged your request” confirmation.”*

## 6.9 Question - How would you describe the number of notifications you receive during the progression of your request?

There were 28 responses to this question. The majority of responders (64%) felt the number of notifications was just right. However, some responders (25%) felt they had too few and 11% felt there were too many (3).

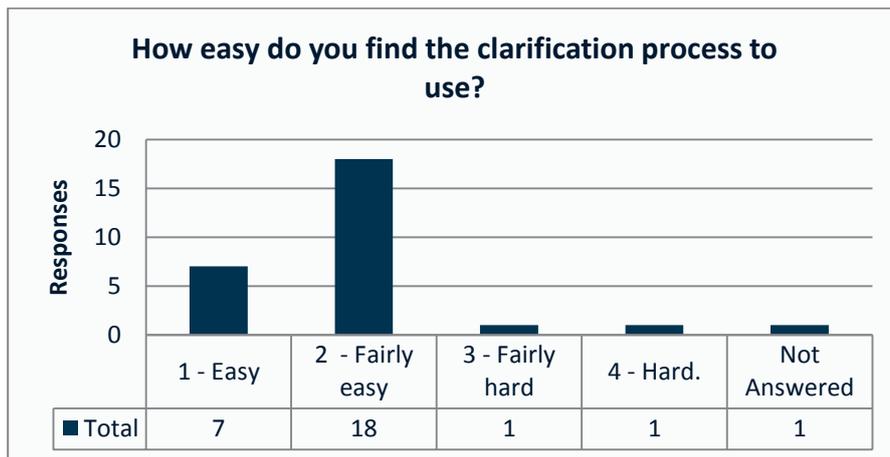


Some respondents took the opportunity to add comments as follows:

- *“Fairly good but being picky, not giving me as much information as I would like”*
- *“Seemed like a long drawn out process, although I appreciate that you're not going to issue new codes without verifying their need first of all.”*
- *“Sometimes I get a few, sometimes none, depends on the understanding of the request”*
- *“Status changes for individual requests within bulk were challenging, much improved now”*
- *“There is very limited follow-up after any application is submitted to the portal, beyond the initial notification that the request has been received. We would recommend that there is a notification sent as the request goes through the (internal) UKTC decision-making process and goes through any milestones and – importantly - when a decision is made.”*

## 6.10 Question - How easy do you find the clarification process to use?

There were 27 responses to this question. 93% of responders felt the clarification process was easy or fairly easy whilst 7% felt this process was either hard or fairly hard.

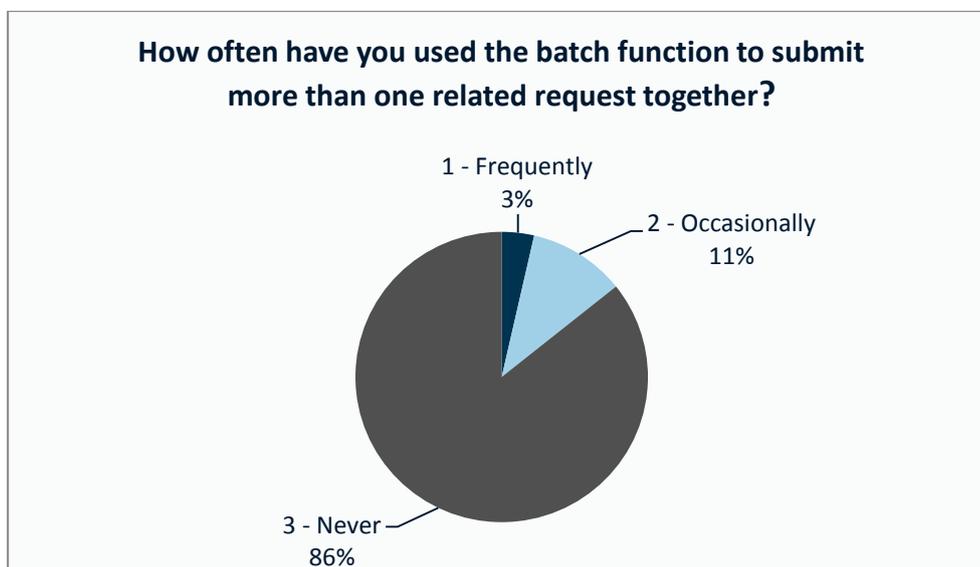


Several respondents provided further comments to this question as follows:

- *“Takes a bit of getting used to, in terms of the logic applied to codes and the logic applied to NICE recommendations not always being the same.”*
- *“I missed this process”*
- *“Need to be able to reply to email and see the thread in the email so understand the context of the clarification”*

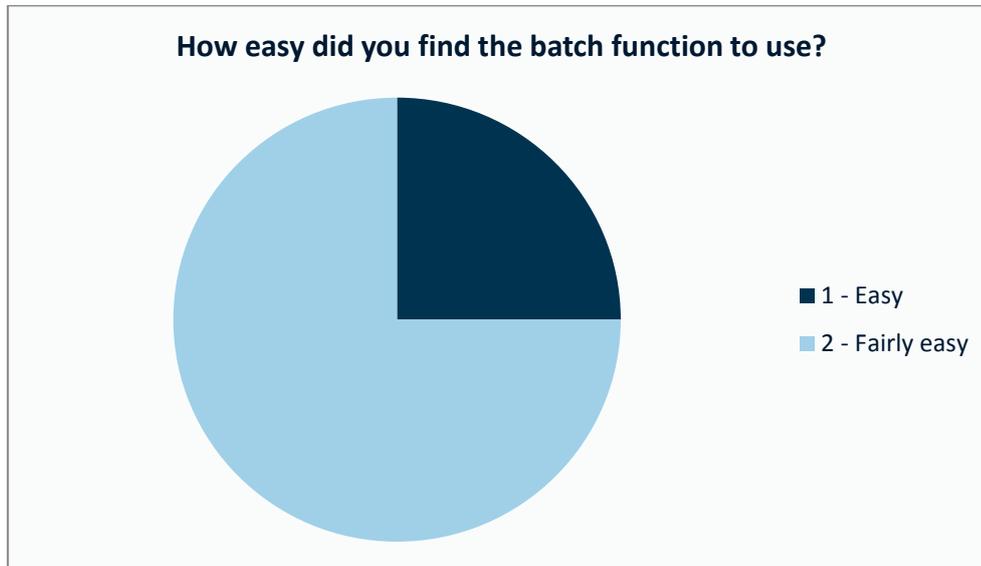
## 6.11 Question - Batch functionality allows you to make more than one request together. How often have you used the batch function to submit more than one related request together?

Of the 28 responses, only 14% had submitted their requests via batch.



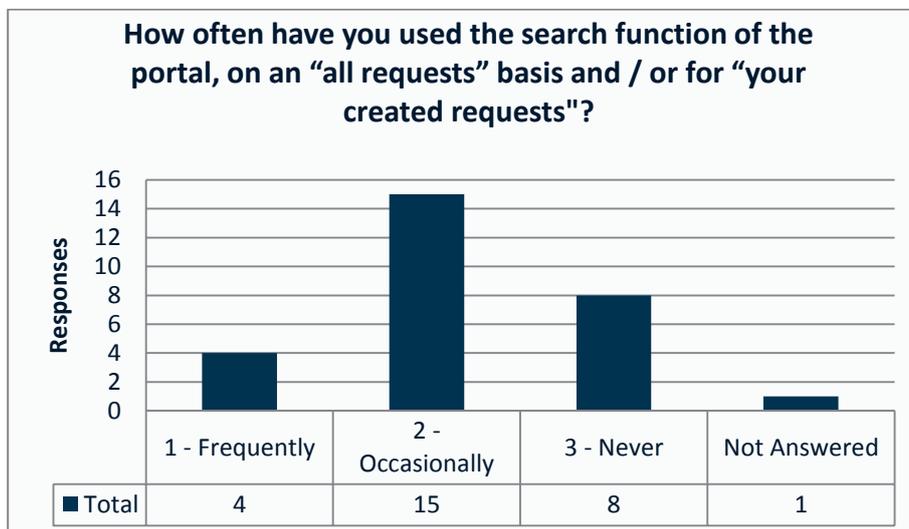
## 6.12 How easy did you find the batch function to use?

Of the 4 responders who had used batch functionality, 75% found it fairly easy to use and 25% found it easy to use.



## 6.13 Question – How often have you used the search function of the portal, on an “all requests” basis and / or for “your created requests”?

Of the 27 respondents to this question, only eight have never used the search function. Of those who had used the search function, 79% used it only occasionally.



## 6.14 Question – How easy did you find the Search function to use?

There were 19 responses to this question. 89% of responders felt the search function was easy or fairly easy to use, while 11% felt it was hard or fairly hard.

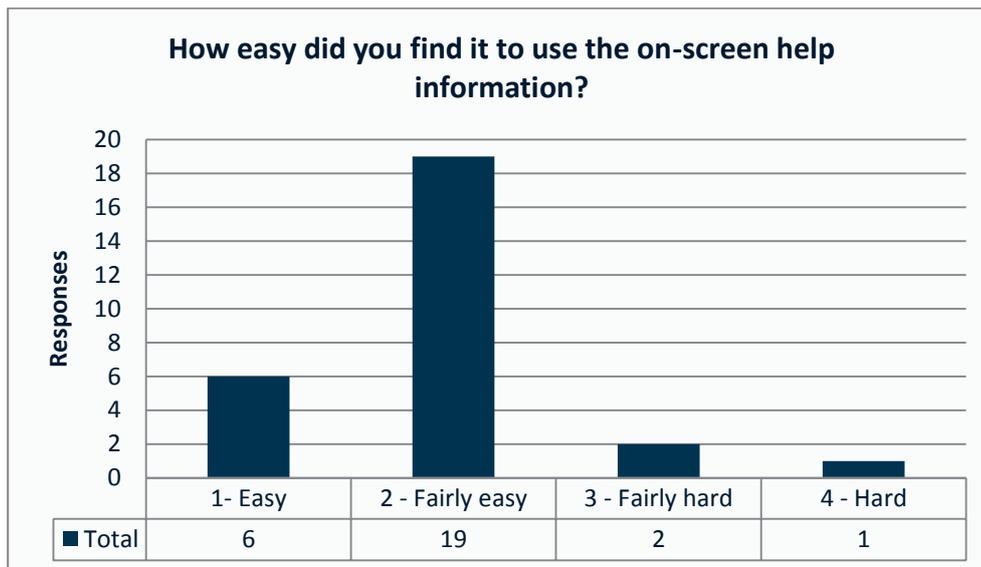


Several respondents provided further comments to this question as follows:

- *“A couple of my former requests did not carry over to the new portal When the site was switched I can no longer see codes requested through mycodes which would be really useful.”*
- *“It would be easier to have the results returned as a PDF document rather than an Excel spreadsheet – solely as they would be much easier to read. It would be beneficial to add some information on the status of the request as well as a contact person/email to contact for any questions or clarification.”*
- *“I tested it on something I knew I had requested but it did not find it on the general search before I logged in. So in the end I just logged in and browsed my requests.”*

## 6.15 Question – How easy did you find it to use the on-screen help information?

There were 28 responses to this question. 89% felt the on screen help information was easy to use while the remaining 11% of respondents felt it was hard or fairly hard to use



Two respondents provided further comments to this question, as follows:

- “Do not remember using onscreen help”
- “Uncertain what this refers to. If it is referring to the tool tip? icon, the information in there is very basic.”

## 6.16 Question - If there are any features in the Request Submission Portal you feel are missing or can be improved, please provide details: - features in the Request Submission Portal

The comments provided in response to this question were:

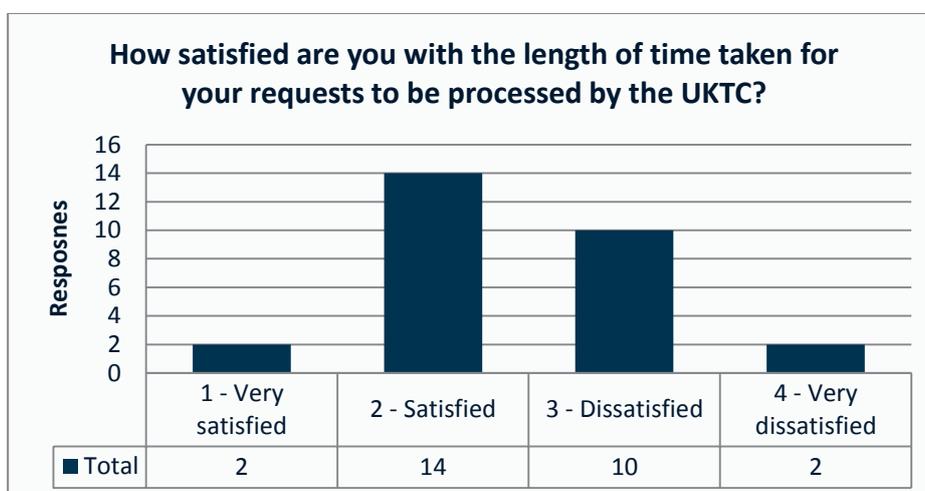
- "1) Search results in mycodeplace displayed the full term whereas the display is 'cut off' in the new portal. In the new portal, each individual request has to be opened to look at the full term (particularly if it is a longer term). The summary and description is displayed, however it would be more useful for the ""Suggested name, term or description"" to be displayed in full instead/in addition."
- 2) When looking at a particular request, the summary of request field/box does not enable the user to scroll down if the text is longer than 2 lines.
- 3) In some cases, particularly declined requests, no explanation or clarification is provided.
- 4) In addition to being able to sort the 'Status' when browsing requests, it would be useful to filter out certain statuses instead."
- “Does it search for key words?”
- “no seems ok”
- "Thank you very much for the opportunity. We believe that there are several features which could be added to improve the submission process and ensure a better integration with other 'users' of the Classifications:
  - Original submission: The submission form itself can be quite lengthy to fill in without really giving indication of the most important information.
  - Dialogue and consultation: There is a critical need for a dialogue between the organisation submitting the request and the UKTC. Currently there is no interim step between the original submission and the final decision. Considering that the catalogue is now updated only every 3 years, there is an opportunity for a constructive dialogue between organisations suggesting new codes and the UKCT/NHSIC. This will ensure

that the right information is provided and that there is an opportunity to improve the submission after the initial recommendation is made. We would recommend that a contact name or email address is added to the portal specifically to ensure that there is a more regular dialogue between UKTC and any organisation submitting the requests. We would recommend that more frequent notifications are provided – including an early indication/decision on whether a new code can be created or whether combinations codes will be suggested. We would recommend that the organisation submitting the request is allowed to respond to the initial decision or indication so that all of the relevant information can be provided to UKTC.

- *Feedback: in addition for an opportunity for a dialogue, we would recommend that feedback is provided on the submissions and rationale for declining a new code. This would help submitting organisations ensure that they provide the most relevant information for UKTC to make decisions and do not burden UKTC with repeated submissions.*
- *Links with the code ‘users’ – mainly NICE and the NHSIC casemix teams. As we focus our response here on OPCS codes, we would suggest that UKTC decisions are communicated as early as possible to the casemix team who can ensure that any new code or new combination of codes is mapped to an appropriate HRG – so that the new procedure is appropriately described and funded.*
- *Clinical input: Requests for new OPCS codes are primarily made by NHSIC expert working groups which ensure a very high clinical input in the Classifications. However very few clinicians outside of these groups have any input or even knowledge of this process and we recommend the portal be advertised more widely to the NHS and professional associations"*
- *“The Read coding system seems quite a mess. It really needs a more strategic approach and more cohesive sets of data and particularly more values (numbers) to be added. What to do when there is no suitable code.”*
- *“Validation of requests as submitted like with SIRS and the ability for authors to export direct into SIRS where requests relate to the international edition”*

## 6.17 Question – how satisfied are you with the length of time taken for your requests to be processed by the UKTC?

Of the 24 responses to this question, 57% were very satisfied or satisfied and 43% were very dissatisfied or dissatisfied with regards to the length of time taken to process requests.

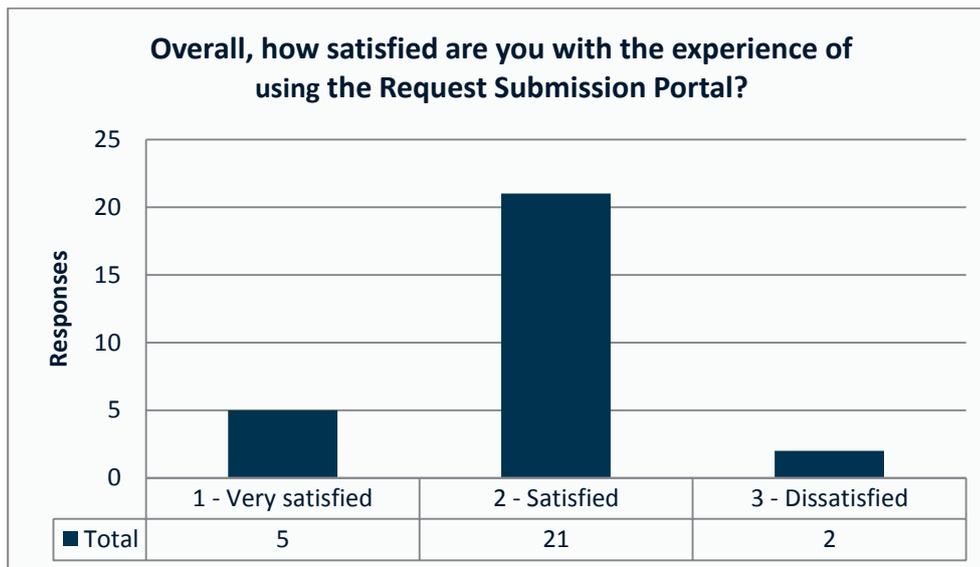


Several respondents provided further comments to this question as follows:

- *“As previously stated, it seems a long drawn out process, although I appreciate the checks you need to make before issuing any new codes.”*
- *“I don't know yet as I only recently submitted a request (just a few weeks ago) so I haven't heard anything yet.”*
- *“If this means from request to publication 6 months is too long. These codes are requested to facilitate patient care”*
- *“It takes a very long time for a representative to come back and inform whether a request has been successful or not (sometimes months). This makes for difficult planning. Would be good if this could be speeded up, especially when a service needs to report on a specific item.”*
- *“It's too slow releases should be made more frequently. If a new code aids provision of better patient care why should there be a delay?”*
- *“There are both an issue with time and transparency. As the OPCS catalogue is now updated only every 3 years, if a submission is made in Year 0, it is quite possible that the response will be notified 2,5-3 years later. Moreover based on previous experience, when the decision is made it is not always communicated timely to the organisation submitting and there is no time to have a constructive dialogue or provide additional information. We would suggest that there is more of an iterative process with 'check-points' over the 3 years.”*
- *“Too long. Had to use EMIS codes in the meantime”*
- *“Took too long - it is important to be able to code accurately a patient's problem in a timely manner”*
- *“Usually when we make a request it's because Commissioning/CCG's are requesting data from the community services. As with most requests they want it yesterday. But we cannot give these stats without the appropriate codes being available. The time it takes to get responses to agree the term and implement it is far too long (6 months) and we have to work around using inappropriate codes to get out the statistics that are required. Also the cut off date is too early we should be able to submit up till the last day of the previous month of implementation.”*
- *“Whilst the release of requests is currently constrained to twice a year (currently), the evaluations of requests and acceptance or clarification should be within a similar SLA to other contacts e.g. through helpdesk.”*

## **6.18 Question - how satisfied are you with the experience of using the Request Submission Portal?**

There were 28 responses to this question. 93% of respondents said they were very satisfied or satisfied with regards to their experience of using the portal whilst 7% stated they were dissatisfied.



Several respondents provided further comments to this question as follows:

- *"As highlighted in the previous questions, the portal is a useful tool to make requests for new codes however it would be beneficial to very valuable to:*
  - *Get the summary/results of submissions in a PDF rather than an excel spreadsheet.*
  - *Get a named contact or email address with whom submissions can be discussed.*
  - *Get more frequent notifications as the request is going through the UKTC internal approval process.*
  - *Allow the organisation submitting the request to respond to the initial decision or indication so that all of the relevant information can be provided to UKTC*
  - *Provide feedback if a submission is rejected*
  - *Create links with users of the OPCS classification so that appropriate mapping decisions can be made as early as possible*
  - *Further clinical input into the classifications"*
- *"Dissatisfied with the time it take to get a read code in place but satisfied with the questions and clarifications sent by the team which is usually quite appropriate in the circumstances"*
- *"The RSP provides a largely acceptable mechanism for submitting requests but the process and mechanism for managing internally and delivering requests onwards to IHTSDO. Use of the email thread URL to the RSP should authenticate the user if responding in the portal."*

## 6.19 Question – Please provide any further comments you may have: - further comments:

- *"Happy with the process for requesting, but wished it did not take as long for the request that have been accepted to be put in to the version."*
- *"I am just getting used to using the tool. It would be nice to see the field "Suggested Name etc" when I browse the Read codes I have requested as well as the Summary of Request."*
- *"I cannot reiterate enough that the time it takes to obtain a valid code is far too long. Community services and GP's are constantly under pressure to produce stats for Commissioners but are never given the time to actually input the data correctly using the correct terminology in patient records. Workarounds using temporary*

*inappropriate codes could lead to clinical risks.”*

- *“Largely functional, some usability aspects could be optimised.”*
- *“Need a minimum of quarterly publications”*
- *“Not specifically the portal, but recent releases of the PBCL have comments on deleted tests which say 'use test abcde' when abcde doesn't exist as a rubric, please can comments use the specific details of any replacement code.”*
- *“Please see feedback in Q16.”*
- *“Reasonably satisfied with the procedure but it would be good if the process could be speeded up. It would be very beneficial if there could be more than two releases a year, as if you just miss one there is a very long time to wait for the next release”*
- *“Thank you for including medical device manufacturers as organisations submitting request. We would highly value the opportunity to meet to discuss key points of this response.”*

## 7 Conclusion

### 7.1 The Request Submission tool

The Request Submission Portal is a tool that supports service requests and provides our customers with a single mechanism to request changes for SNOMED, Read, NICIP and OPCS.

#### 7.1.1 Access

The respondents indicated that registering to access the Request Submission Portal and subsequently returning to the portal was a straight forward process with little need for significant development

#### 7.1.2 Batch Functionality

Responses from those who had used the batch functionality indicated that the tool was fit for purpose. It must be noted that the vast majority (86%) of responders to the consultation had not used the batch request mechanism which indicates that either they had no need for this tool or they were not aware of it.

#### 7.1.3 Search Functionality

A majority of requestors (54%) had used the search functionality and, of those who had, 89% responded that they found it easy or fairly easy to use. It was noted that the use of the search feature was infrequent.

92% of responders found the on screen help information useful, while those who didn't were either unaware of it or found that the information provided basic content.

### 7.2 The Request Submission Process

#### 7.2.1 Clarification Process

93% of responders found the clarification process easy to use while those who didn't use this process commented on the lack of knowledge or visibility that this process was in place.

## 7.2.2 Notifications

The majority of responders (64%) indicated that the number of notifications communicated was at the right level to keep them informed with a small number believing there were too few or too many notifications

## 7.2.3 Timescales

The largest area of dissatisfaction with the request process is the time taken to process requests. 43% of respondents indicated that they were dissatisfied with the length of time taken to process requests from when it is recorded to being made available

# 8 Recommendations

## 8.1 Development Requirements

Our analysis of responses on the use of the tool and its usability identified no significant issues that would require new requirements for future tool development.

Existing methods will continue to be used to develop the Request Submission Portal to ensure it continues to meet the needs of the customer

**Action: None**

## 8.2 Knowledge of the end to end process

Respondents indicated a lack of knowledge of the end to end process, including when the terminology is ready to be used by the healthcare provider system.

Any work that can be done to improve the transparency of this process will ultimately lead to an increase in customer satisfaction

**Action: Determine what can be done to improve customer knowledge around the management of a request (link to Website with useful documentation supplemented by a one page guidance document)**

## 8.3 Single point of contact

There was a view that it will be useful to have a point of contact outside of the Request Submission Portal to discuss requests. This is not a preferred method of engagement with the request process as it can lead to requests not being logged and performance monitored. The existing mechanised system ensures that all approaches are logged and that consequently appropriate follow-up action is taken

**Action: Currently there is a “Contact” section which provides details of the HSCIC Information Standards Service Desk which provides customers with a single point of contact.**

**Terminologists will contact users directly if required via the clarification process using the portal to maintain an audit trail.**

## 8.4 Conduct annual consultations

To ensure the recommendations implemented are achieving the desired effect of increasing customer satisfaction, annual RSP Consultations should be conducted.

**Action: The procedure implemented to conduct this consultation should be documented and used for future consultations.**

## **8.5 Customer Email Notifications**

Respondents indicated a lack of clarity in email notifications when logging new requests or the status of an existing request changes. This is a mechanism used to indicate the next steps in the progression of the request.

**Action: The requirements were add to the development process and improvements to email notifications introduced as part of the Release 3.9 of the Request Submission Portal (RSP)**

## 9 Appendix 1 – questionnaire

### Page 1

#### 1 What is your email address?

This is optional, but if you enter your email address then you will be able to return to edit your consultation at any time until you submit it. You will also receive an acknowledgement email when you complete the consultation.

#### 2 What is your organisation?

#### 3 What is your organisation type?

- Provider of Healthcare - Primary Care
- Provider of Healthcare - Hospital Trust / Secondary Care
- Provider of software applications to health and care organisations
- Provider of medicines / medical devices
- Professional organisation / National Body with healthcare remit (please specify below)
- Other (please specify below)

#### 4 What is your job role?

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### Page 2

#### 5 How easy did you find the registration process on the Request Submission Portal?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

If you answered 3 or 4, please explain the issues you had:

#### 6 How often did you previously use the Read request mechanism portal 'myCodeplace'?

- 1 - Frequently
- 2 - Occasionally
- 3 - Never

**7** Which products do you make requests for? (Please select all that apply)

- Read v2/CTV3
- SNOMED CT
- NICIP
- OPCS-4

**8** How easy did you find it to make your first request after registration?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

If you answered 3 or 4, please explain the issues you had:

**9** How easy did you find it to return to the portal and make subsequent requests?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

If you answered 3 or 4, please explain the issues you had:

**10** After making a request, how satisfied were you that this had been received by the UKTC successfully?

- 1 - Very satisfied
- 2 - Satisfied
- 3 - Dissatisfied
- 4 - Very dissatisfied

If you answered 3 or 4, please explain:

**11** How would you describe the number of notifications you receive during the progression of your request?

- 1 - Too few
- 2 - Just right
- 3 - Too many

Please use the box below to provide any comments:

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## Page 3

**12** How easy do you find the clarification process to use?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard.

If you answered 3 or 4, please explain the issues you had :

**13** Batch functionality allows you to make more than one request together. How often have you used the batch function to submit more than one related request together?

- 1 - Frequently
- 2 - Occasionally
- 3 - Never

If you answered 1 or 2, how easy did you find it to use the batch submission function?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

**14** How often have you used the search function of the portal, on an "all requests" basis and / or for "your created requests"?

- 1 - Frequently
- 2 - Occasionally
- 3 - Never

If you answered 1 or 2, how easy did you find the search function to use?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard.

Did the search return the results you expected?

- Yes
- No

If you answered "No", please provide details in the box below:

**15** How easy did you find it to use the on-screen help information?

- 1- Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

If you answered 3 or 4 to the above, please provide details in the box below:

**16** If there are any features in the Request Submission Portal you feel are missing or can be improved, please provide details:

**17** Overall, how satisfied are you with the length of time taken for your requests to be processed by the UKTC?

- 1 - Very satisfied
- 2 - Satisfied
- 3 - Dissatisfied
- 4 - Very dissatisfied

If you answered 3 or 4, please explain why you weren't satisfied:

**18** Overall, how satisfied are you with the experience of using the Request Submission Portal?

- 1 - Very satisfied
- 2 - Satisfied
- 3 - Dissatisfied
- 4 - Very dissatisfied

If you answered 3 or 4, please indicate aspects that need addressing

**19** Please provide any further comments you may have:

You have now reached the end of our questions. Please press Next to move to the submit page.

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## Page 4

**12** How easy do you find the clarification process to use?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard.

If you answered 3 or 4, please explain the issues you had :

**13** Batch functionality allows you to make more than one request together. How often have you used the batch function to submit more than one related request together?

- 1 - Frequently
- 2 - Occasionally
- 3 - Never

If you answered 1 or 2, how easy did you find it to use the batch submission function?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

**14** How often have you used the search function of the portal, on an "all requests" basis and / or for "your created requests"?

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If you answered 1 or 2, how easy did you find the search function to use?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard.

Did the search return the results you expected?

- Yes
- No

If you answered "No", please provide details in the box below:

**15** How easy did you find it to use the on-screen help information?

- 1 - Easy
- 2 - Fairly easy
- 3 - Fairly hard
- 4 - Hard

If you answered 3 or 4 to the above, please provide details in the box below:

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**19** Please provide any further comments you may have:

You have now reached the end of our questions. Please press Next to move to the submit page.

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