



designated  
medical

# STAY CONNECTED

DECEMBER 2020



**Welcome to the last edition of Stay Connected for 2020** and we are sure that many of you will agree that the last month of 2020 couldn't come too quickly. With just a couple of weeks before the festive season and the slight easing of lockdown, we anticipate a busy period and we are fully committed to working with you to maximise this opportunity.

We want to say a huge **thank you to all of you**, our clients for your support and loyalty this year. It's an absolute pleasure to work with you and your patients, and to play our part in delivering your patients a positive patient experience.

We wish you all a wonderful Christmas. We hope that you and your "bubble" have a fabulous, but safe time celebrating and we look forward to working with you again in 2021.

**Seasons greetings,**

*Designated Medical Team*

## IN THIS ISSUE

**CLIENT SPOTLIGHT:  
SHAMEER MEHTA**

**USING FEEDBACK TO  
IMPROVE CARE**

**PRIVATE PRACTICE  
ON THE FRONT LINE**

**MEET THE TEAM:  
HANNAH SMITH**

**CHRISTMAS  
CLOSING DETAILS**

# CLIENT SPOTLIGHT: SHAMEER MEHTA



Shameer is a Consultant Gastroenterologist at University College London Hospital and Honorary Associate Professor at University College London. He sees private patients at The London Digestive Centre at 41 Welbeck Street and at The Princess Grace Hospital. He has a special interest in intestinal failure, clinical nutrition, inflammatory bowel disease and pelvic radiation disease. **Shameer trained at Guy's and St Thomas' Hospitals in London before undergoing higher specialist training in North East London.** He then undertook a combined fellowship in medical education and basic science research at Queen Mary University of London and the Blizard Institute.

During this time, he became a fellow of the Higher Education Academy in recognition of his postgraduate teaching work. Shameer's principle clinical role is within the Intestinal Failure Service at UCLH, one of the largest and fastest growing in the UK.

**Shameer is a Consultant Gastroenterologist at University College London Hospital & Honorary Associate Professor at University College London.**

University College London Hospitals  
NHS Foundation Trust

He is also actively involved in teaching and education. He chairs a module on the UCL MSc in Clinical Nutrition and Public Health, sits on the organising committee of the UCLp Clinical Nutrition Course and is involved in the preparation and delivery of teaching courses aimed at clinical nurse specialists, dieticians and pharmacists.

**Please feel free to contact Shameer to discuss his practice in more detail.** He would welcome the opportunity to work with other consultants in the Designated Medical community and to support your patients when appropriate.



[drmehtapa@gidocitors.co.uk](mailto:drmehtapa@gidocitors.co.uk)



[Connect with me on LinkedIn](#)



Want to appear here?

**Contact us:** [michelle@designatedgroup.com](mailto:michelle@designatedgroup.com)

# USING PATIENT FEEDBACK TO IMPROVE YOUR CARE.

***You can't manage what you can't measure - Peter Drucker***

This well-known quote by management thinker and 'the founder of modern management', Peter Drucker, is a great way to set the scene for this month's article in our series on **patient experience**. You cannot know whether you are successful unless success is defined and tracked. To improve patient experience, we need to measure.

## **What are you measuring?**

To measure anything requires clear criteria to measure against. Earlier in the series, as part of defining the patient experience strategy, we discussed the importance of setting your vision, which describes what you want your practice/clinic/hospital to be and also your objectives to ensure you achieve your vision.

These will be important, as they will now become the basis for your measurement criteria.

As you set out your measurement criteria, it is useful to think ahead about how the findings will be used. It is important to measure the right things that will allow you to track improvements.

In the US, there are a set of trademarked surveys called CAHPS surveys, which stands for Consumer Assessment of Healthcare Providers and Systems.



These have been created by the US Agency for Healthcare Research and Quality and are designed to report on the aspects of patient experience that are important. They are free to use and may well serve a useful purpose within the UK market too. The measurement criteria you choose will obviously depend on your own vision and objectives, but looking at the questions asked in the CAHPS survey is helpful for Inspiration.

## **How will you capture the information?**

Having defined your measurement criteria. The next step is to decide how you will survey your patients and capture their responses. Will you ask every patient or a subset of your patients? We all know that responding to surveys can be tedious, so your challenge is to ensure patients are surveyed in a manner that encourages participation.

One important factor is to ensure patients are aware why. If they understand the impact their feedback will have, they will be more likely to take part. It is also important to use several different means of engaging with patients, as some ways will appeal to some groups more than others.

**Technology solutions:** Email, SMS messages and the use of a computer tablet within the hospital or clinic environment.

**Patient interviews:** You could also consider more descriptive patient engagement such as patient interviews and focus groups.

## **How will you analyse the data and present it?**

READ MORE





# PRIVATE PRACTICE ON THE FRONT LINE

The world of private practice is ever evolving, and this year has been more transforming than ever before. It's best described as a rollercoaster ride with more fear than thrills. From the perspective of the patient, the impact of Covid has been enormously significant in their ability to utilise the services you offer and many potential patients will be suffering in silence, too anxious to go out into the world to address the symptoms they are experiencing. Only time will reveal the true extent of this.

Many patients who were receiving, or due to receive, treatment in the early part of 2020 have suffered delays in treatment and this is going to be an ongoing problem for some time to come as we struggle to catch up.

**Rise of telehealth** The rapid increase in telehealth during lockdown was initially a challenge for many consultants, private GPs and patients, but has been a success in many respects and looks set to continue into the longer term.

We recently discussed this with

**Mr Nick Panay**, consultant gynaecologist in reproductive and postreproductive medicine and director of **Hormone Health**, which has clinics in Harley Street and Nottingham. He told me: *'We kept our Hormone Health service going by offering virtual consultations over lockdown and now at least half our consultations are still by phone or video, as this suits our patients' requirements. We have also continued to provide helpful information to our women on health-related issues through social media, webinars and podcasts*

*It has been a challenge being able to fit in the cancelled or postponed consultations and we have seen a particular growth in our requests for new consultations. The pandemic has shown us how important it is for quality of life, hormonal and general health to be maintained during this difficult time. Optimising lifestyle and diet underpins any hormonal interventions.'*

**Nigel Denby**, a registered dietitian who is part of the team of consultants within Hormone Health at 92 Harley Street, supports Nick's view. He reflects: *'I found so many women are more relaxed and able to focus on the advice during video consultation. No travelling or stress trying to find the clinic or get there on time means they are calm, receptive and ready to get on with the job in hand - it's a win, win.'*

I have spoken to many other consultants, who like Nick and Nigel, plan to make virtual consultations part of their ongoing service.





# TEAM SPOTLIGHT: HANNAH SMITH

The last few months have been a rollercoaster of highs and lows when it comes to our clients. In **October we smashed a Designated record** with over 19 leads across Group and Medical. This was due to several factors including our marketing efforts across social media and also a positivity in the marketplace to keep business moving.

Sadly, the brakes were squeezed on 31st October with the announcement of lockdown #2 which has meant that things have quietened. On a positive note 2021 is where it's at, as businesses start to refocus, I anticipate that our leads will increase, and we will have some positive growth by the spring.



**The festive season will soon be upon us..... Love it or loathe, planning for your practice over this period is essential!**

### ***Here's our top tips:***

- Decide when your last clinic will be and when you will re-open.
- Tell your patients so they know well in advance.
- Make sure that all voicemails and email accounts have appropriate out of office messages on.

**Designated Medical will provide full admin and phone cover over the holiday period.**

