

**LONDON RHEUMATIC & MUSCULOSKELETAL DISORDERS  
COMMISSIONING NETWORK (LRCN)**

Feedback form  
24/48 delegate responses

**1. How relevant did you find the event content in relation to your role?**

High Relevance	67%
Average Relevance	29%
Little Relevance	
Did Not Answer	4%

**Comments:**

As a charity/patient representative some of the clinical and medications discussion was beyond my remit but all interesting and illuminating nonetheless. I was glad to have the opportunity to attend - thanks!

This is a learning experience for me as I'm 4 weeks onto my MarComs role at NRAS

**2. How would you rate the quality of the speakers?**

Excellent	67%
Good	29%
Average	4%
Poor	
Did Not Answer	

**Comments on specific speakers:**

Patient access were excellent

Valuable to hear from patient experience. Dr Henry very engaging and amusing but also hammered the point home

**3. To what extent did the meeting match your expectations?**

Exceeded Expectations	38%
Matched Expectations	58%
Didn't Match Expectations	4%
Did Not Answer	

**Comments:**

**4. Would you recommend joining the LRCN to other colleagues who didn't attend?**

Yes	83%
No	
Did Not Answer	17%

**If you answered Yes, for whom would you recommend?**

**Please list named individuals and their role plus contact details if possible:**

R Sathananthan  
Natalie Horwood  
Sarah Levy  
Please invite my commissioners! Waltham Forest CCG  
Commissioners in NWL  
Jatinder Garcha  
Jonathan Simpson  
Our Director of Commissioning + Policy + Public Affairs Man!  
Dr Maxine Hogarth - Rheumatologist - Ealing Hospital  
Resmy Suresh - Consultant  
Helen Linklater - Consultant

**5. What topics you would like to see addressed at future LRCN events?**

Shared care (DMARDs)  
Patient engagement and education, how to improve GP knowledge, self management  
Share clinical pathway development as an example of best practice as well as bad experience  
More on commissioning especially with presentations from commissioners  
A national pathway for CNS education  
What the rheumatology team should look like  
One to one sessions with commissioners at the end - to book in advance

**6. Would you be prepared to speak at future LRCN events?**

**If 'Yes', please leave your name and special interest/topic for contribution:**

Yes - Maria Leandro  
Yes - Tim Jones, National Osteoporosis Society - the business case for secondary fracture prevention  
Not yet

**7. How would you rate the quality of event organisation and facilitation?**

Excellent	50%
Good	38%
Average	
Poor	
Did Not Answer	12%

**Comments:**

**Do you have any other comments about how future LRCN meetings could be improved?**

Good round table discussions, please continue this  
Do either a morning or afternoon so people can work the other "PA" and do a full clinic  
As a lay person, representing patients experience, I valued the information and it helps to see the other side - staff and all the pressures upon them. It always helps to take back to patients in the community information that brings greater understanding  
This meeting was excellent, I thought

***Thank you for your comments***

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