# **Enter and View Report**

The New Surgery, 8th September 2021



A report by Healthwatch Hammersmith & Fulham



"Once we get out of the pandemic and things return to a more normal way of living and working, we don't want to see general practice become a totally, or even mostly, remote service.

So while the expanded use of video, online and telephone consultations can be maintained where patients find benefit from them, this should be done alongside a clear offer of appointments in person."

Chair, Royal College of GPs



## Contents

| 1.  | Visit Background              | 4    |
|-----|-------------------------------|------|
| 2.  | About this Visit              | 6    |
| 3.  | Executive Summary of Findings | 8    |
| 4.  | General Observations          | . 11 |
| 5.  | Patient Feedback              | . 14 |
| 6.  | Staff Feedback                | . 21 |
| 7.  | Recommendations               | . 37 |
| 8.  | Review of Website             | . 41 |
| 9.  | Glossary of Terms             | . 45 |
| 10. | Distribution and Comment      | . 45 |



| Visit Details              |  |
|----------------------------|--|
| Service Visited            | The New Surgery, 143A Uxbridge Road, London, W12 9RD |
| Manager                    | Zeaul Karim  |
| Date & Time of Visit       | 8 <sup>th</sup> September 2021, 10.00am - 12.15pm    |
| Status of Visit            | Announced  |
| Authorised Representatives | Mari Tiitinen, Darren Morgan                         |
| Lead Representative        | Mari Tiitinen  |

## 1. Visit Background

#### 1.1 What is Enter and View?

Part of the local Healthwatch programme is to undertake 'Enter and View' visits.

Mandated by the Health and Social Care Act 2012, the visits enable trained Healthwatch staff and volunteers (Authorised Representatives) to visit health and care services - such as hospitals, care homes, GP practices, dental surgeries, and pharmacies.

Enter and View visits can happen if people tell us there is a problem with a service, but equally they can occur when services have a good reputation.

During the visits we observe service delivery and talk with service users, their families, and carers. We also engage with management and staff. The aim is to get an impartial view of how the service is operated and being experienced.



Following the visits, our official 'Enter and View Report', shared with the service provider, local commissioners and regulators outlines what has worked well, and gives recommendations on what could have worked better. All reports are available to view on our website.

Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with safeguarding policies. If at any time an Authorised Representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

## 1.2 Disclaimer

Please note that this report relates to findings observed on the specific date(s) set out. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

## 1.3 Acknowledgements

Healthwatch Hammersmith & Fulham would like to thank the service provider, service users and staff for their contribution and hospitality in enabling this Enter and View visit to take place. We would also like to thank our Authorised Representatives, who assisted us in conducting the visit and putting together this report.

On this occasion, two Enter and View Authorised Representatives attended the visit. The Authorised Representatives spoke to patients and staff. Suggestions have been made on how to improve the service and good practice has been highlighted.



## 2. About this Visit

## 2.1 The New Surgery

On 8th September 2021 we visited The New Surgery, a GP practice in Shepherds Bush.

The practice has a caseload of around 5,700 patients and is in the Northern Primary Care Network. It has two full-time GPs (one remote working due to health reasons), one part-time GP, a full-time nurse and a health care assistant. Clinical staff are supported by receptionists and a Practice Manager.

## 2.2 CQC Rating - 'Good'

The CQC are the independent regulator of health and adult social care in England. They make sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve.

The New Surgery was last inspected by the CQC on 23<sup>rd</sup> February 2016. Their inspection <u>report</u> gave a rating of 'Good' - in all areas.

## 2.3 Online Feedback

The NHS review page comprises largely of five-star ratings.

#### 2.4 Focus of the Visit

On 13<sup>th</sup> May 2021, NHS England issued a written <u>letter</u> to all GPs stating that GP practices must ensure patients' preferences in terms of consultation mode are sought and listened to, and face-to-face appointments are offered unless there is a good clinical reason not to. It further advised that patients should be treated consistently



whether it is face-to-face or remotely, and that practice receptions should be open to patients with social distancing in place, and posters informing patients of coronavirus symptoms and advising them not to attend the practice in person if presenting any of these symptoms should be displayed.

The letter also contained a statement from the Chair of the Royal College of GPs noting that as things return to normal and while the remote appointment options can be maintained, GP practices should not become a remote service.

In March 2021, Healthwatch England reported on GP Access during the Coronavirus pandemic. The <u>report</u> concluded that people were confused about how to get in touch with their GP, whether they could make an appointment, and what to expect if they attended the surgery in person. It also stated that by autumn 2020, people had started reporting long waiting times over the telephone lines, and problems with booking appointments because of triage systems and not being sure when their GP or other healthcare professional will call them back.

The report also highlighted how the remote appointments have not met everyone's needs with some patients being worried that health issues will not be accurately diagnosed remotely, and disabled people, people without access to the internet and people whose first language is not English finding access to remote appointments particularly problematic.

People also reported struggling to get appointments for regular health check-ups, treatments and medication reviews and as a result, were unable to get the medication and treatment needed to manage their condition.

Our questions to patients and practice staff were designed to address both the NHS England guidance, and Healthwatch England observations, in full.



## 3. Executive Summary of Findings

Our analysis is based on the feedback of 7 patients and 4 staff members.

This is a summary of key findings - see sections 4 - 6 for findings in full.

## **Appointment Accessibility**

#### **Notes**

 Patients are not initially offered a choice of consultation method - this is purely for clinical and safety reasons (those with fever like symptoms should not attend).

#### What has worked well?

- All patients that we spoke to were aware of the booking procedure, and none had experienced a particular difficulty when booking.
- The staff members informed us that anyone expressing a preference, including for face-to-face appointments will be accommodated.

#### What could be improved?

Preferences are not likely to be discussed.

## **Consultations**

#### **Notes**

- We observed around 4 patients an hour in attendance, therefore the broad majority of consultations are likely to have been remote.
- While remote appointments have gone well, the patients we spoke with prefer inperson diagnosis.



#### What has worked well?

- The patients we spoke with had been able to fit appointments around working commitments and flexibility was cited. Evening and weekend hours are offered by partner practices.
- All patients received their consultation preference.
- We were told that routine appointments are usually facilitated within a week.
- If remote calls are missed, we were informed that there is an effort to call back later or leave a message.
- Those with additional needs, such as in shielding, have been supported and the system flags any requirements.
- Remote monitoring boxes, enabling remote consultations have been utilised.

### What could be improved?

Appointments running marginally behind time.

#### **Environment**

### **Notes**

- No more than 4 patients are admitted at any one time.
- The practice would ideally like more clinical rooms, a lift to the basement, automatic door and the carpeted floor replaced with a more clinically suitable laminate.

#### What has worked well?

- The practice is well signposted, generally accessible, clean, and safe.
- The reception area is well considered, with good general layout and attention to detail. The small waiting room feels surprisingly spacious.
- Waiting patients are spaced approximately two metres apart.
- Although there are many posters and leaflets, the room does not feel cluttered.
- A COVID-19 'isolation room' is available for patients showing symptoms



### What could be improved?

- While Covid-19 procedures on-site are clear, we did not see the official poster referenced by NHS England (to deter access to those showing symptoms) on the way in.
- There was also a patient in reception without a face covering though we are unsure if medical reasons apply.
- The practice is clean, well presented and functional; however some new décor could improve the overall environment.
- As the practice is small, with rooms and stations close together, it may be possible to overhear personal conversations.

## Access to Treatment, Tests and Medication

#### **Notes**

No delays are reported.

## **Engagement and Feedback**

#### **Notes**

 Patients may communicate through phone, email, online form, in writing and inperson.

## What has worked well?

- Some patients have been encouraged to give feedback with differing methods (paper form or website) offered. A feedback box is at the reception desk.
- A voice-mail facility also exists and according to staff members messages are responded to 'promptly'.
- 70% of practice staff speak a second language and this has practical benefits.



## What could be improved?

• Patients are not aware of the Patient Participation Group (PPG) or complaints policy.

## **Staffing**

#### **Notes**

 Staff appeared to have a good rapport as a team, and to be mutually supportive and well co-ordinated.

### What has worked well?

- All staff members are observed to have been responsive and supportive patients' needs, and as the GP says, 'sensitive to needs'.
- Many patients comment on receiving a 'personal touch'.

## What could be improved?

• There are no formal practice-wide staff meetings. While 'huddles over a coffee' have sufficed, and worked well, there will be no official minutes or documented oversight.

Based on findings, we have made several recommendations (see section 7).

## 4. General Observations

During the visit, the Authorised Representatives made the following general observations:

## Location and Signage

#### **Observations**



- The practice is located just off the main road, with the entrance around the corner.
- It is clearly signposted.

## **Accessibility**

#### **Observations**

- There is a ramp outside so accessible for wheelchair users.
- You have to ring a doorbell, but we were let in straightaway.
- There is a note on the front door advising patients to wear a face mask and that only four patients are allowed in at a time.
- There is also a repeat prescription box outside.
- To leave the building a door handle must be turned this is possibly situated too high for wheelchair users.

#### **Facilities**

#### **Observations**

- 2 GP rooms and 1 nurse's room upstairs.
- In the basement, there are two more consultation rooms, two rooms used for administrative work, one staff kitchen, a practice manager's office, and toilets.

## **General Environment**

## **Observations**

- There is a hand gel dispenser at the reception.
- It is a small practice and we initially thought that it was only on one floor but later found out there are more rooms in the basement.
- The reception area is small and has carpeted floors and plastic chairs.
- Seating has been arranged so that patients are approximately 2 metres apart.
- It is tidy, but the décor is a bit old and worn out which the staff members also pointed out.



- The basement is very dark and cool which was nice on a hot day but could be a problem during cold weather?
- There are no visible obstructions that could cause a hazard.

## Reception/Waiting Area

#### **Observations**

- There is a television screen that displays information such as a video introducing the staff members.
- One of the consultation rooms is right next to the waiting area and you could hear the
  conversation when a patient was speaking loudly. However, it wasn't clear what they
  were saying.

#### Noticeboard

#### **Observations**

- There are lots of leaflets and posters that have information on health and mental health conditions and who to contact for help. While there are many it has been well thought out and does not appear cluttered.
- We didn't see information about the Patient Participation Group (PPG) and how to join.
- Local events posters are a nice touch it demonstrates the practice is part of the wider community, and the wider community is part of the practice.

## **Additional Observations**

## Observations

- There is a sign saying nearest first aid box is in reception.
- A chaperone notice is posted clearly near the nurse's room.
- Defibrillator on the wall.



- There is a good rapport between staff and patients we heard laughter from both the nurse's and doctor's rooms, and patients were greeted by reception on entry and exit.
- Staff members were wearing face masks whenever they were moving around the building, but when the reception staff were in their reception room behind a plexiglass they did not wear masks. One patient did not wear a mask.
- CCTV in operation 24 hours.
- The clock kept good time.
- While clean, the practice could benefit from redecoration.
- Appointments were running 5-10 minutes behind time

## 5. Patient Feedback

During the visit of Wednesday 8<sup>th</sup> September 2021, we engaged with 3 patients in total. A further 4 completed a survey following the visit.

This report is based on their collective feedback.

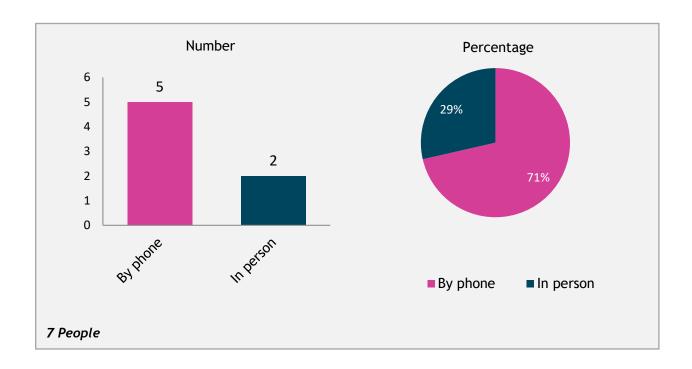
We asked questions around the booking process and appointment accessibility, the experience of remote consultations and triage, the environment including Covid-19 protocols, engagement, and complaints.

## 5.1 Booking Process and Appointment Accessibility

We asked patients how the day's appointment had been booked, and whether they knew what to do, were given options and felt respected. We also asked if working or parenting commitments have caused any issues - either when booking or attending appointments.

## 5.1.1 Booking Method





The majority of patients (71%) phoned the practice, while 29% had booked in person. Nobody mentioned online systems.

All patients are aware of the booking procedure.

The phone system is generally felt to work well - with no significant delays reported, and a numbering system in place while queueing.

While some are offered a choice of consultation method (phone, video, in-person), for well-known patients this may be assumed - based on known needs and preferences. Patients generally feel they were listened to, and respected, and that preferred options would be met, if expressed.

Working patients, and those with school aged children say they are accommodated.

In summarising their booking experience, patients comment on a 'personal touch' and examples of flexibility and choice are given.

**Selected Comments** 



## **Booking the Appointment**

"Yes I know how to book. Have noticed no queuing as I phone at exactly 8am. If in a queue, there is a numbering system. If I don't get through on the phone, then I come in. The practice texts me the appointment date and time."

"There's a two minute wait on the phone - usually no more than that. Got an in-person appointment for today - which is usually the case."

"Sometimes you have to wait on the phone line, maybe 10 minutes."

## **Choice of Consultation**

"They didn't have to ask as they know me quite well - and know my preference for faceto-face. If I asked for a different method I'm absolutely sure they would respect that. I always feel respected and dignified."

"Yes, face-to-face as I don't know how to use technology. I have always been able to see the doctor face-to-face."

"If I request face-to-face appointments I usually get it as I have skin issues."

## **Working and Parenting**

"I work and start at 2pm so I book appointments for morning time."

"I work shift patterns and appointments are slotted into my days off. No problem."

"I request a time for the doctor to call me back."

"Yes I have both. Reception staff have always helped me with all bookings to get convenient appointments."



### **Any Other Comments**

"The receptionists know their patients, there's an informal atmosphere. I would not change anything about the process, or people."

"Flexible in booking - 'twiddled' blood test appointment times."

"There are no drawbacks to the booking system."

"All good, reception staff are nice."

## 5.2 Experience of Remote Appointments/Triage

For those experiencing remote appointments, we asked about punctuality, whether they felt the consultation was effective, and if any particular needs (such as disabilities, conditions, internet access and languages) were accommodated.

On appointment punctuality, one person experienced a 'smooth process' while another notes minor delays. We hear that for medication reviews, remote consultations have worked well, however for diagnostics patients would generally prefer a face-to-face examination.

One patient, who was shielding and visibly frail, was given additional support to be seen.

### **Selected Comments**

## **Punctuality/Timing**

"Yes, the doctor phones the same day, on time. It tends to go smoothly."

"Call-backs - occasionally the doctor is 15 minutes late."



## **Meeting Needs/Effectiveness**

"The doctor asked me questions over the phone and then said he would like to examine me."

"I had a medication review on Teams and yes it went really well. For other things though I prefer face-to-face as you can better see each other's reactions."

"I like telephone triage. I usually get my prescription sent to the pharmacy."

## **Support for Additional Needs**

"Yes I was shielding and they made special provision to see me safely."

## **Any Other Comments**

"I don't really like telephone consultations."

"I think the surgery has handled everything amazingly throughout the pandemic, they have never stopped."

## 5.3 Environment

We asked patients whether they knew about the Covid-19 procedures, and if they felt safe.

All patients knew about Covid-19 procedures and felt safe. Controlled entry (having to first press the buzzer), designated seats and mask wearing are among the measures cited.



While reception staff have challenged those without masks in the past, one of the patients was not wearing a face covering (this may be for medical reasons, we are unsure).

## **Selected Comments**

## Covid-19 Awareness and Safety

"Yes I know about the measures, and I always wear a mask. I feel safe - not worried in the slightest."

"Reception staff will challenge people without a face covering. I saw it once and it was quite scary!"

"Stickers on the seat for social distancing. You also have to wait and ring the bell before they open the door. Patients wear a mask."

## **Any Other Comments**

"The surgery is very dated."

## 5.4 Access to Regular Treatment and Medication

We asked patients about any delays they may have experienced in accessing medication, treatment, or tests.

No difficulties or delays were reported.

#### **Selected Comments**

**Treatment/Medication Delays** 



"I have got all of my medication when needed, in fact much sooner."

"There have been no delays in treatment or care. I get my medication from the hospital - again no delays."

## 5.5 Engagement and Feedback

We asked patients if they have been encouraged to give feedback, know about the Patient Participation Group (PPG) and the complaints policy.

One patient has been encouraged to feed back, though has not yet done this.

Awareness of the PPG, or complaints process is at a low level.

## **Selected Comments**

## **Encouragement to Give Feedback**

"No, but I have not needed to give feedback."

"I have been encouraged to give feedback, but haven't gotten to it."

"I have seen a box on reception but haven't given feedback for a while."

### **PPG Awareness**

"Not heard of it."

## **Complaints Policy Awareness**

"I don't know as I haven't needed to complain. I'd probably ask reception about it."



"Yes, email the surgery and manager."

## 5.6 Any Other Comments

Finally, we asked for any other comments.

Patients commented on receiving the 'personal touch' and an 'old bedside manner' and cited a good rapport with all staff members.

## Selected Comments

## **Any Other Comments**

"The practice is local and friendly - been with them for a couple of years. I have a good rapport with all the doctors, the nurse, and the receptionists are lovely."

"My doctor is very good, the nurse is also very good."

"Praise, praise, praise. 20 years with the surgery and I can't praise them enough. Works well for me. Staff and doctors give the personal touch - old bedside manner and you're not just a face."

"Overall this surgery is fantastic. I would never leave, the staff are amazing."

## 6. Staff Feedback

During the visit we interviewed a GP, the practice nurse and a reception staff member. Following the visit, we also received feedback from the Practice Manager.

### 6.1 GP Interview



The GP has worked at the practice since 2009.

## **Appointment Booking**

On booking appointments, do patients get a choice of method (for example can they phone, walk-in or complete an online form)?

No, 'not off the bat' because of safety and clinical reasons - people should not attend appointments, including children, if unwell with fever symptoms. This constitutes a large proportion of callers. The messaging regarding children showing Covid-19 symptoms is unclear and people do show up with symptoms - in which case they are treated in the 'isolation room', which has a separate (side) entrance.

Is there any special provision in place for people known to have difficulties (such as disabled people, those without computers/phones, or foreign language speakers)?

Staff are long serving and sensitive to needs - they know the patients 'really well'. As an example, we know all our blind patients and any needs are flagged by the system. If an issue is identified a same day appointment will be booked.

Most staff (around 70%) speak a second language, such as Italian or Arabic and this is considered important. For example, the practice has a clinic for victims of domestic violence and the ability to converse freely makes the sessions much more welcoming, and productive - the more familiar the setting, the better. Language Line is also utilised generally. Phone lines are open and go straight to reception.

## What do you feel works well about the booking system?

We have a 'wide open door' policy and patients can make appointments by any mode possible (in person, phone, email or eConsult form (which pops up on the website). Patients can also leave messages through voicemail - which are responded to timely. Anyone who comes will be allowed in. Phone lines are open. The email address is on our website and the emails go to all the staff members and we are responsive. No patient goes unassessed - remote monitoring boxes are sent to patients who need them - enabling remote video consultations to take place.



## What do you feel could be improved?

We need more doctors, we give a time range for telephone calls which means patients might sometimes miss our calls. Core hours favour those who do not work, however extended hours are available at partner practices within the Northern Primary Care Network.

### Consultations

NHS England's guidelines urge practices to provide face-to-face appointments where required, or desired. What do you think are the main challenges you face - as a practice, around this?

If preference for a face-to-face appointment is expressed, it will be respected. Navigating the pandemic presents certain difficulties, such as maintaining social distancing, but a time can usually be negotiated - with appointments allocated based on clinical urgency. Older patients in particular prefer face-to-face appointments and if requested will be given - even for routine appointments such as medication reviews. The practice will 'make it happen' and 'nobody will be let down'.

Again, is there any special provision in place for people known to have difficulties?

The practice has a 'safe, clinical feel' and this gives reception staff the confidence to offer good levels of support. A lot can be done over the phone, and in some ways, it is both efficient and effective.

Is there also any flexibility for people who work, or look after school-aged children (either when booking or attending appointments)?

Yes, there is flexibility and everyone is accommodated.

Do you know if remote appointments are generally on time, and is there any procedure if running late?

Yes, even when we give a time frame for our calls we will try to accommodate a patient's request on what time they would prefer us to call. If patients do not pick up, we will try



to call them again, and personally I make an effort to get in touch with patients even if they miss my call.

What do you feel works well about the consultation system?

Telephone consultations work very well and you can get a good idea of the patient's needs/condition over the phone.

#### **Environment**

Can you tell me about the Covid-19 procedures in place?

There is the isolation room for patients with symptoms, or anyone we have concerns about.

Are staff aware of what to expect and do?

Yes.

Is there anything that works well, or could work better about the general environment?

We would like slightly larger premises, more clinical rooms, a lift as there are rooms in the basement, change the carpeted floor to laminate (which is more clinically suitable), automatic door.

## Regular Treatment and Medication

Some of the recent reports (mentioned earlier) highlight delays with regular health checks, treatment and medication. Is this the case at this practice - if so, are there any measures in place to address this?

The practice is alert to systemic, global shortages, and there are no backlogs currently. GPs will do what they can for patients, until 'someone says they can't'



## **Engagement and Feedback**

Are patients encouraged to give general feedback (such as compliments or concerns)? If so, how?

Yes, both good and bad and we 'depend on feedback'. We promote the Friends & Family Test (FFT) and a patient feedback box (very noticeable, in blue) is at the reception window.

Is there a clear complaints process in place? Is the complaints policy on display in the waiting area?

The policy is displayed left of the reception and on our website. We are always looking to improve and complaints are welcome.

## Staffing

Do you feel that management are supportive towards staff generally?

The working environment is comfortable, the mood is good, and staff are encouraged to challenge and actively engage with the GPs - all opinions are valued and respected. Reception is the 'front door' and it's extremely important that everyone is happy. Team meetings used to take place, now it's an unofficial huddle or chat, over a coffee.

On your work and working conditions, do you feel that anything could be improved?

People are generally happy, we have a good practice manager.

Can you tell me what you enjoy most about your job?

Meeting people and growing up with the community - helping new mums, then seeing the new-borns grow and go to school. In a way, a GP is part of an extended family - you share the highs and lows, and it's been nice to help them through the pandemic.

And what do you find most difficult?



The 'administrative grind', things that should be simple take time - for example asking a hospital consultant for things to happen. There needs to be a more clever and seamless way of working. It would be nice to have more GPs - there is rationing due to limited resources.

#### 6.2 Nurse Interview

The nurse has worked at the practice since 2014.

### **Appointment Booking**

On booking appointments, do patients get a choice of method (for example can they phone, walk-in or complete an online form)?

Patients often book their appointments on the way out at reception - they also phone. I quite often book on the patient's behalf - to save them having to wait.

Is there any special provision in place for people known to have difficulties (such as disabled people, those without computers/phones, or foreign language speakers)?

Special needs or requirements are flagged on the home page of the patient record and often more time is allocated (double appointments - an additional five minutes on average). If there are any concerns I will talk to the doctor about it.

## Consultations

NHS England's guidelines urge practices to provide face-to-face appointments where required, or desired. What do you think are the main challenges you face - as a practice, around this?

Younger people are generally happy with telephone appointments but the older ones are 'not getting it' and say 'when will my appointment happen'?



If preferences are expressed, is this taken into consideration?

Yes, all wishes are respected and it's fine.

Is there also any flexibility for people who work, or look after school-aged children (either when booking or attending appointments)?

Ideally we need more afternoon appointments.

Do you know if remote appointments are generally on time, and is there any procedure if running late?

Appointments usually happen within 5 minutes of the stated time.

#### **Environment**

Can you tell me about the Covid-19 procedures in place?

Patients feel safe - people who are visibly unwell are seen in the isolation room. No more than 4 or 5 patients are in the waiting room at any one time.

Are staff aware of what to expect and do?

Yes we are all fully aware.

Is there anything that works well, or could work better about the general environment?

I'd like more space, a new bed and equipment, painting and repairs (points to a dent in the wall).

Regular Treatment and Medication



Some of the recent reports (mentioned earlier) highlight delays with regular health checks, treatment and medication. Is this the case at this practice - if so, are there any measures in place to address this?

There is no backlog and patients have been seen throughout the pandemic. At the very beginning we did stop booking some appointments - but then decided 'let's just do it as safely as we can'. We can't do Asthma reviews properly and are awaiting authorisation from the CCG.

## **Engagement and Feedback**

Are patients encouraged to give general feedback (such as compliments or concerns)? If so, how? (Interviewer referred to the patient feedback box at the reception).

Patients are encouraged to feed back and are aware of the facility on both websites (practice and NHS Choices).

## **Staffing**

When you started here, do you recall receiving an induction?

Induction - yes, different manager but very informative.

Have you received any training, including recently?

Training has been different - now doing it virtually.

Do you feel that management are supportive towards staff generally?

Management are supportive and listen to any concerns - especially about patients, they always listen.

On your work and working conditions, do you feel that anything could be improved?



It's a good, nice environment all staff members have a good and co-operative working relationship.

## Can you tell me what you enjoy most about your job?

Seeing patients leave with a smile, being able to deal with and solve their medical issues. Patients are nice - 'so sweet'. I talk too much - it's nice to be nice to people and give them hope, even if I can't solve a problem, I listen.

### And what do you find most difficult?

When I can't do things - when there isn't enough time. I don't like it when patients are overly unhappy - because I've not been able to do things, despite giving it 'my all'. When they then lodge a complaint, it's not nice.

## 6.3 Practice Manager Interview

The Practice Manager has worked at the practice since 2018.

## **Appointment Booking**

On booking appointments, do patients get a choice of method (for example can they phone, walk-in or complete an online form)?

Yes, we do telephone, online consultations, face-to-face offer triage, face-to-face health checks/review with nurse.

Is there any special provision in place for people known to have difficulties (such as disabled people, those without computers/phones, or foreign language speakers)?

Yes, we usually offer face-to-face straight away for vulnerable or disabled patients. We have telephone interpreters available.

What do you feel works well about the booking system?



Giving patients the option to have telephone triage first before they come in. Most cases are suitable over the phone.

What do you feel could be improved?

Hospital waiting times, health visitors/other services. GP workload increases because patients keep coming back to us because they are unhappy about the long wait.

## Consultations

NHS England's guidelines urge practices to provide face-to-face appointments where required, or desired. What do you think are the main challenges you face - as a practice, around this?

Small reception area. Patients are still oblivious to Covid-19 and walk around with symptoms or un-tested. Patients don't understand that the risk is still here, then there is the flu and winter pressures.

Are patients asked if they have any preferences about the consultation method (such as in-person, telephone or video)?

Yes.

If preferences are expressed, is this taken into consideration?

Yes, face-to-face only after telephone triage or vulnerable or disabled, or too complex to deal with over the phone, or e-consult.

Again, is there any special provision in place for people known to have difficulties?

Yes.

Is there also any flexibility for people who work, or look after school-aged children (either when booking or attending appointments)?



Yes, we offer late appointments.

Do you know if remote appointments are generally on time, and is there any procedure if running late?

Generally they are on time but can usually run late. We offer more than one call to patients. We also call late in the afternoon if someone missed the AM telephone call.

What do you feel works well about the consultation system?

Reliable GPs that understand their patients. Good triage system. Appointments available with 5 working days. Well trained reception staff that understand red flags. Good communication and team work.

What do you feel could be improved?

Better government communication. Collaborative working with hospitals.

#### **Environment**

Can you tell me about the Covid-19 procedures in place?

We have a 'hot' room. Social distancing at reception/buzzer system. Regular testing. Sign and poster. PPE. Regular cleaning.

Are patients aware of what to expect and do?

Most of the time.

Are staff aware of what to expect and do?

Yes.

Is there anything that works well, or could work better about the general environment?



Better door. New fittings and desks.

## Regular Treatment and Medication

Some of the recent reports (mentioned earlier) highlight delays with regular health checks, treatment and medication. Is this the case at this practice - if so, are there any measures in place to address this?

We had delayed routine health checks initially but then opened up when it was safe to do so. Such as diabetes reviews, asthma reviews. However we maintained medication and bloods. Some general checks were done over the phone.

## **Engagement and Feedback**

Are patients encouraged to give general feedback (such as compliments or concerns)? If so, how? (Interviewer referred to the patient feedback box at the reception).

Yes, via email. Patient voice. Friends and family.

Is there a clear complaints process in place? Is the complaints policy on display in the waiting area?

Yes.

## **Staffing**

When you started here, do you recall receiving an induction?

Yes.

Have you received any training, including recently?

Yes.

Can you tell me what you enjoy most about your job?



Everything.

And what do you find most difficult?

Late communication from NHS England. Lack of engagement from neighbouring PCN (Primary Care Network) surgeries.

## 6.4 Reception Staff Member Interview

The reception staff member has worked at the practice since 2019.

## **Appointment Booking**

On booking appointments, do patients get a choice of method (for example can they phone, walk-in or complete an online form)?

Yes, they can choose between telephone, eConsult, or they can come in. We also offer emergency appointments at 8am.

Is there any special provision in place for people known to have difficulties (such as disabled people, those without computers/phones, or foreign language speakers)?

We are made aware from the beginning if patients have access issues, and these patients and their needs are flagged up in our system. For example, deaf people can email us instead of telephoning. We always try to accommodate any access difficulties. There is a women's domestic abuse charity nearby, and the women do not generally speak English so the staff members contact us on their behalf and help with translations.

What do you feel works well about the booking system?

Same day appointments which are available at 8am for patients to book. If there are no appointments left, we will triage them, and doctors sometimes extend their hours to see



patients who really need to be seen. We prioritise babies, children and the elderly. Currently there is a 7 day waiting time for non-emergency appointments.

What do you feel could be improved?

Time of calls - we would like to be able to give patients a specific time for when the doctor will call them, but at the moment we cannot do that and have to give a two-hour window. It would cause too many issues if doctors would have to call at a specific time.

### **Consultations**

NHS England's guidelines urge practices to provide face-to-face appointments where required, or desired. What do you think are the main challenges you face - as a practice, around this?

No issues, we haven't stopped seeing patients face-to-face and we provide home visits as well. Elderly people prefer face-to-face appointments and they usually get given these straightaway.

Are patients asked if they have any preferences about the consultation method (such as in-person, telephone or video)?

Yes.

If preferences are expressed, is this taken into consideration?

Yes.

Is there also any flexibility for people who work, or look after school-aged children (either when booking or attending appointments)?

Yes, we will try to meet everyone's needs. Weekend appointments are available in Park View.

Do you know if remote appointments are generally on time, and is there any procedure if running late?



Generally yes, and we try to inform patients and offer alternatives if we are running late.

#### **Environment**

### Can you tell me about the Covid-19 procedures in place?

Social distancing - 4 patients allowed in at a time, hand sanitiser, reception staff disinfect door handles and chairs every hour. There is a Covid isolation room downstairs

## Are staff aware of what to expect and do?

Yes, at the beginning there was no training, but management kept us up-to-date with things, and we had to learn on the go.

Is there anything that works well, or could work better about the general environment?

Re-decorating the reception area, change the carpet floor and chairs.

## Regular Treatment and Medication

Some of the recent reports (mentioned earlier) highlight delays with regular health checks, treatment and medication. Is this the case at this practice - if so, are there any measures in place to address this?

The nurse has not stopped, some regular checks were put on hold like smear tests, blood tests would be done if needed, staff tried very hard to make sure patients get what they needed, even urgent medication.

#### **Engagement and Feedback**

Are patients encouraged to give general feedback (such as compliments or concerns)? If so, how? (Interviewer referred to the patient feedback box at the reception).



Before the pandemic yes, but with Covid safety measures this has not been done as much - as we have tried to limit patients touching things.

Is there a clear complaints process in place? Is the complaints policy on display in the waiting area?

It is visible, the manager takes care of complaints, patients can send a complaint in an email and the manager will deal with it.

## **Staffing**

When you started here, do you recall receiving an induction?

Yes.

Have you received any training, including recently?

No ongoing training at the moment. For reception, the manager trains staff members as he has the knowledge of the systems. There was also training on vaccine administration - with a vaccination clinic held.

Do you feel that management are supportive towards staff generally?

Yes, for example, if we are dealing with abusive patients the manager will take over.

On your work and working conditions, do you feel that anything could be improved?

We are a good team, which is why we work well together. Everyone knows their roles and we feel comfortable talking to everyone here including the GPs. We can always 'knock on the GPs door'.

Can you tell me what you enjoy most about your job?

No day is the same, it is rewarding when you deal with different emergencies and being able to help people.



## And what do you find most difficult?

Abusive patients that call you things and swear at you. But I understand that they might be going through things so we always try to help them as well, and then after they have got the help they needed, we raise the issue with them and tell them they can't treat the staff members like that.

## 7. Recommendations

Based on the analysis of all feedback obtained, Healthwatch Hammersmith & Fulham would like to make the following recommendations. Below each recommendation we have included the response from The New Surgery.

We make 3 recommendations on the environment.

## **Environment and Accessibility**

In its letter to practices, NHS England said "Posters providing information about the symptoms of Coronavirus and to direct patients that have symptoms or a positive test result in the last 10 days not to enter the building should be displayed." We did not see this poster on the way in, however, we did notice the poster on the way out.

**Recommendation 1**: We would suggest that this poster is relocated closer to the front entrance where it is more likely to be noticed by patients coming to the surgery and prevent anyone with symptoms from entering the building and causing potential risk of infection to staff members and other patients.

**Response**: "We initially had posters laminated and put outside on the front door, but it usually gets blown away or comes off after a while. I have relaminated a few more and will stick them outside as well in the front entrance area."



The small size of the practice and proximity of clinical rooms/staffing stations presents a problem when discussing confidential matters. It is relatively easy for patients to overhear dates of birth or NHS numbers while waiting.

**Recommendation 2**: We understand that this would require changes to be made to the layout of the surgery and therefore would require significant resources. However, we would recommend that the practice reviews its confidentiality protocols, to minimise the risks of personal data breach and uses the clinical rooms which are further away from the waiting area where possible and in particular when having private conversations.

**Response:** "We usually play sounded health promotion adverts on our reception call-in system to mitigate this. We also have a small room upstairs (room 4) where we can take patients to discuss any private issue."

When leaving the practice, we noticed the door latch - which had to be turned manually, may be too high for wheelchair users.

**Recommendation 3:** We would recommend that this is assessed by the practice staff and if the assessment finds that the manual door latch may cause some issues to wheelchair users or people with other accessibility issues, the practice should install an automated door system that is accessible to everyone.

Response: "Pre-pandemic we would not have the door latch on, so patients can pull or push the door in or out freely, however, we note that this has become an issue due to Covid. We have lowered the buzzer outside so patients on wheelchair can buzz and ask staff for assistance when coming in, and staff are aware to help the patients out as well. An automated door would be ideal and we would explore all the funding avenues, more so, should you be aware of such funding please keep us in mind."



The New Surgery also responded to our general observations regarding the décor of the practice:

"Soon after your visit we had some work done at the surgery. We ripped out the old carpet flooring to install new infection control compliant liner in both patient waiting and admin area. We also installed new work tops and fittings in reception room. The work is still not completed as there are few shelves, signs, and notice boards to be mounted."









We make 3 recommendations on engagement.

## **Engagement**

It is acknowledged that feedback, both good and bad is important, and that patients should be encouraged, and supported to complain. However, patients



were generally unaware of the complaints policy, and online posts (on the NHS website) have not been responded to.

**Recommendation 4**: While the complaints policy is situated near the reception window, the document itself is un-striking and very easy to miss. Simply enlarging the title may help patients to notice it.

Response: "This will be re-done."

**Recommendation 5**: Posts on the NHS website, and other well-known platforms such as Google reviews should ideally receive an acknowledgement. This gives a sense of assurance that the practice is actively monitoring its patients' views.

Response: "This will be done"

We did not see a reference to the Patient Participation Group (PPG) in the waiting area, and patients who were interviewed on the day were unaware of its meaning or existence.

**Recommendation 6:** Information regarding the PPG (what it is and how patients can join), should be made available in the reception so that it is visible to all patients who come to the practice. A PPG poster, and/or flyers would certainly help to raise awareness.

**Response**: "We would really appreciate a new, fresh poster. Healthwatch may have something really catchy, please forward if you can. This would really help us raise awareness."

Healthwatch to forward a general PPG poster for the practice to display in the reception area.



We make 1 recommendation on staffing.

## **Staffing**

The practice appears to be well managed, with long standing, enthusiastic staff members. While this is the case, a lack of formal practice-wide staff meetings and associated documentation will make it difficult for those from the outside, or new in post, to fully understand the working environment, its needs and challenges.

Recommendation 7: We would recommend that the practice staff resume their formal, monthly meetings with a set agenda circulated ahead of each meeting and minutes of the meetings to be taken and shared with staff members, including those not present in the meeting. This would enable feedback and concerns to be raised regularly in an effective and transparent way and written record to be kept of this.

**Response:** "We usually have practice/staff meetings every other Tuesday, but Covid has disrupted continuity which we are now getting a re-grip on."

## 8. Review of Website

In addition to the visit, we have reviewed the <u>practice website</u>, to assess its overall accessibility and effectiveness.

## 8.1 Accessibility and General Information

We start by looking at accessibility - is the website easy to navigate (colours, font, logic), compatible with mobile devices and able to translate? Is basic information - such as contact details, opening times (including out of hours) and the CQC (Care Quality Commission) rating clearly displayed? Is there a list of practice staff, and a full list of services on offer?



We use a RAG (Red, Amber, Green) traffic light system to highlight findings.

| Attribute  | RAG Rating |
|--|------------|
| Is the website easy to navigate?                             |            |
| Is it mobile compliant?                                      |            |
| Is translation available?                                    |            |
| Is the CQC rating displayed?                                 |            |
| Are the contact details and opening hours clearly displayed? |            |
| Is there information on out-of-hours help?                   |            |
| Is there information on extended hours?                      |            |
| Is there information on the catchment area?                  |            |
| Are you able to register online?                             |            |
| Is there a full list of practice staff?                      |            |
| Is there a full list of services provided?                   |            |

For accessibility and general information, we consider the website to be 95% compliant. The layout is concise, well presented and proportioned, and all items were



found easily - except for catchment area, which contains a <u>broken menu link</u>, however the document itself is live.

## 8.2 Service Access and Support

In this section we examine the ability to book appointments, assessing levels of information and choice, and whether there is a clear process and route in accessing the variety of online services (appointments, prescriptions, test results and referrals). We also consider general information on self-help, community support, and awareness of Primary Care Networks (PCNs) and the evolving primary care roles.

| Attribute  | RAG Rating |
|--|------------|
| Is the route to booking clear?                             |            |
| Is there a choice when booking?                            |            |
| Is the online pathway clear?                               |            |
| Is there background information on the online pathway?     |            |
| Is there an eConsult pop-up?                               |            |
| Is there background information on PCNs?                   |            |
| Are there self-help resources?                             |            |
| Is there information on local including community support? |            |



| Are information sources clear and reliable? |  |
|---|--|
|   |  |
|   |  |

For service access and support, we consider the website to be 78% compliant. While online pathways are live, there is a lack of clear background information. There is also no clear mention of the Primary Care Network and its role.

## 8.3 Engagement and Involvement

In this section we examine the visibility of the Patient Participation Group (PPG), complaints process and ability to give feedback, including access to the Friends and Family Test (FFT).

| Attribute   | RAG Rating |
|---|------------|
| Is the PPG clearly visible?                       |            |
| Is PPG content adequate and up-to-date?           |            |
| Are patients encouraged to give general feedback? |            |
| Is the complaints procedure visible?              |            |
| Is the Friends and Family Test visible?           |            |

On engagement and involvement, the website is 80% compliant. While the PPG is clearly referenced with a good level of detail offered, there is insufficient information on its status (for example, when/if meetings will be held).



## 9. Glossary of Terms

CQC Care Quality Commission

FFT Friends & Family Test

IPC Integrated Personal Commissioning

PCN Primary Care Network

PPE Personal Protective Equipment

RAG Red, Amber, Green

## 10. Distribution and Comment

This report is available to the general public and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

Healthwatch Hammersmith & Fulham, 141-143 King St, London, W6 9JG

Telephone: 020 3886 0386

Email: info@healthwatchhf.co.uk
Website: www.healthwatchhf.co.uk



"The nurse is friendly - an old fashioned feeling and the doctor has that 'family doctor' feel, doesn't rush you and will take time..."

**Patient** 

