Enter and View Report

Canberra Old Oak Surgery, 13th 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



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Visit Details	
Service Visited	Canberra Old Oak Surgery, 56 Bloemfontein Road, London W12 7FG
Manager	Reena Gonsai
Date & Time of Visit	13 th September 2021, 10.00am - 12.00pm
Status of Visit	Announced
Authorised Representatives	Carleen Duffy, Darren Morgan
Lead Representative	Carleen Duffy

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.

1.1.1 Safeguarding

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 Canberra Old Oak Surgery

On 13th September 2021 we visited Canberra Old Oak Surgery, a GP practice in Hammersmith.

The practice has a caseload of around 8,300 patients and is in the Northern Primary Care Network. It has 3 full-time locum GPs (2 on-site and 1 remote), a Practice Nurse who works 4 days a week (and sometimes does extra shifts), a full-time Health Care Assistant and a Receptionist/Health Care Assistant. The permanent salaried GP has recently resigned.

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.

Canberra Old Oak Surgery was last inspected by the CQC on 29th June 2017. Their inspection report gave a rating of 'Good' - in all areas.

2.3 Online Feedback

The NHS <u>review page</u> contains mixed feedback, with ratings given by patients ranging from 1 to 5 stars.



2.4 Focus of the Visit

On 13th 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 6 patients and 2 staff members.

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

Appointment Accessibility

Notes

- According to the practice the booking system is based on urgency rather than choice the aim is to see as many patients, as possible, safely - with those in need prioritised.
- The practice prefers patients to book remotely (by phone or online) with in-person booking discouraged.

What has worked well?

• While in-person booking is not encouraged, patients doing so are accommodated (this was observed during the visit).

What could be improved?

- Restriction to remote booking means the system is overloaded.
- Although patients may call at any time to book, phone lines are inevitably congested accounts of 40 minute waits are commonly reported.
- The online system (Dr IQ) is only available during 50% of core hours, and not at all over the weekend. This further incentivises use of the phone.
- All patients, regardless of preferences will receive an initial telephone consultation.

Consultations



Notes

- We observed around 6 patients an hour in attendance.
- While acknowledging its limitations and flaws, the practice feels that telephone triage is the most efficient method allowing 'more patients to be seen'.

What has worked well?

- Appointments observed to be running slightly ahead of time, with good patient flow.
- 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, or at clinical risk, have been prioritised and the system flags any requirements.

What could be improved?

• There is no level of choice - patients will only be seen in-person for clinical reasons.

Environment

Notes

• We observed no more than 3 patients in the reception queue, at any one time.

What has worked well?

- The building is accessible, spacious, with an attractive and welcoming waiting area.
- It is family friendly, with room for pushchairs and a play area provided.
- Strict Covid-19 measures are in place all visitors are temperature checked on entry, there is a one-way system, hand santiser is available, all adults on-site appeared to be wearing a mask, and good social distancing was observed.
- All areas appeared to be clean, with wall and floor surfaces clinically suitable.
- Security guards are on site.



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).
- We observed a lack of noticeboards, leaflets, flyers & general information. Therefore, while waiting, patients have limited opportunities for educating themselves on conditions, local services, support and initiatives.
- While the downstairs environment is well ventilated, the upstairs (staff offices) have little or no airflow windows do not open, and the air conditioning system is inadequate. Even on a cool day, staff were using plug-in fans.

Access to Treatment, Tests and Medication

Notes

 Due to a shortage of blood testing bottles, some appointments have had to be 'moved'.

Engagement and Feedback

Notes

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

What has worked well?

- Following consultations, patients are encouraged to feed back through Google Reviews.
- Posts are responded to, by a 'dedicated team'.
- The patients we spoke with are generally aware of the Patient Participation Group.



What could be improved?

There was little awareness of the complaints process.

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 towards patients.
- Staff are able to have personal, and team-based training.

What could be improved?

• All GPs are locums - there is currently no permanent, salaried GP at the practice.

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 within a modern, purpose-built health centre. There are 4 practices and other services within the building.
- Canberra Old Oak Practice was not mentioned on the service list situated just inside the main entrance. We had to clarify location with the security guard.

Accessibility

Observations

- Entrance there is a wide, automatic door and the floor is at street level. Wheelchair users, or those with limited mobility may pass through easily.
- Inside there is plenty of room for wheelchairs or pushchairs. There are no visible obstructions that could cause a hazard.

Covid-19 Protocols

Observations

- There was no poster or notice outside the building, on what to do, or expect.
- However, a security guard takes the temperature of all visitors on entry it's not
 possible to pass through, without being checked.
- Once inside, there is a one-way system with arrows clearly marked on the floor.
- Hand gel dispensers are available.
- Staff were wearing face masks.

Environment/Reception

Observations

- The building is spacious inside, with a lot of natural light and colour.
- The tiled flooring throughout appeared to be very clean and clinically appropriate.



• The GP reception counters (4 in total) are in a row, with no more than 3 patients queuing at a time.

Waiting Area

Observations

- The practices share a common waiting area, which is spacious, modern, bright and welcoming.
- A toddler's play area is located sensibly at the far corner.
- Waiting patients observed social distancing and all appeared to wear a mask.
- Appointments were observed to be running slightly ahead of time, with good patient flow.

Noticeboard/Information

Observations

- The internal environment is very controlled noticeboards are few, and lightly populated.
- There are also few posters and those on display are about the general rules (fire safety, zero tolerance etc).

Additional Observations

Observations

- Reception were unaware of the visit but they promptly consulted with the Assistant Practice Manager.
- We were offered tea/coffee.
- Staff and patients had a good rapport, the general environment was pleasant.



5. Patient Feedback

During the visit of Monday 13th September 2021, we engaged with 6 patients in total.

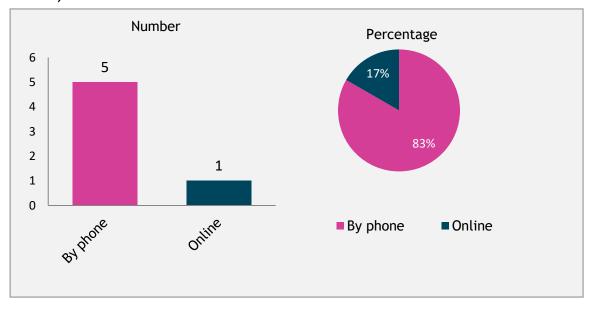
This report is based on their collective feedback.

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.

5.1.1 How did you book today's appointment (was it by phone, in-person or online)?





The vast majority of patients (83%) called to book their appointment, and all are aware of the process. Long phone queues are described, with waits of over an hour reported - this is an issue for those on pay-as-you-go mobile contracts. Some patients previously using the online system (Dr IQ) have uninstalled the app, due to reliability issues.

With the exception of one patient, nobody has been offered a choice of consultation method. If expressing preferences - most feel that their wishes would be respected, however a daughter told us she 'has to fight' to secure the in-person appointment needed for her mother.

Working patients, and those with school aged children say they are accommodated, while one person complains that a preference for a later appointment was not met - resulting in use of a taxi.

Reception staff are said to be 'friendly and polite' on the whole.

Selected Comments

Booking the Appointment

"It's not the best system really, to get this appointment I waited 40 minutes on the phone. Sometimes the wait is longer. They say if it's an emergency to call 999. Dr IQ is rubbish and doesn't work - they say they'll 'fix it' this week, but I've already deleted the app. So, there's no alternative to phoning."

"The waiting time for the phone is too long. Sometimes over 1 hour."

"Lots of times I have to wait a long time to get through on the phone. It uses up all my phone credit. During lockdown they kept trying to explain how to book online but I don't have the internet."

Choice of Consultation



"Yes I had a telephone call last week and today I have a face-to-face."

"No I was called and asked to come see the doctor."

"No I was called and asked to come see the nurse."

"No, they decide if it's an emergency and if someone will call you back and then when they don't you have to go to the hospital."

Working and Parenting

"It hasn't caused any problems."

Any Other Comments

"Since lockdown it's a fight to see a doctor - if my mother didn't have me to argue for her to be seen in person she would still be having only phone appointments and no medicine."

"I asked for a later appointment so I can use my freedom pass but they gave me early morning so I had to take a taxi here."

"It's quicker to use the app than sit and wait on the phone for an answer. Doctor IQ app had problems a few times. Not being able to see a doctor meant we had to go hospital and wait for hours."

"I book through the app which works well. However, I think if I didn't have the internet during lockdown I would have struggled."

"The people on reception are lovely. Very friendly and polite."

"The staff in reception are always standing around talking when I come here that's why the phone queues are so long."

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.

Those in receipt of remote consultations express general satisfaction. No detailed accounts are given.

Selected Comments

Punctuality/Timing

"The doctor calls on time."

Meeting Needs/Effectiveness

"I like telephone triage as long as I can speak to a GP. I also want them to see me in person when I don't think telephone is enough, which they do."

5.3 Environment

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

All patients feel safe, and are aware of Covid-19 protocols. The environment is said to be 'very clean'.

Selected Comments

Covid-19 Awareness and Safety

"Yes - fewer people in reception and GP wears a mask."



Any Other Comments

"It's very clean."

5.4 Access to Regular Treatment and Medication

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

Some delays with routine medication and prescriptions are reported.

Selected Comments

Treatment/Medication Delays

"There have been delays and difficulties, often have had to go to the hospital."

"I haven't been able to get my prescriptions on time."

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.

The majority of patients have been encouraged to give feedback, and most are familiar with the PPG.

Few know about the complaints process.



5.6 Any other Comments...

Finally, we asked for any other comments.

Patients take the opportunity to leave compliments, with staff of all categories said to be 'friendly and caring'.

Selected Comments

Any Other Comments

"The doctors are very friendly."

"The reception staff and medical staff are all lovely."

"All the staff are very friendly and caring."

6. Staff Feedback

During the visit we interviewed the Assistant Practice Manager, and a Receptionist who is also trained as a Health Care Assistant.

6.1 Assistant Practice Manager Interview

The Assistant Practice Manager has worked at the practice for 4 months.

Appointment Booking

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



The booking choice consists mainly of the phone and online (Dr IQ - an equivalent to eConsult). For safety reasons, patients are not encouraged to book in person.

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)?

Reception staff are trained to identify needs and place alerts on the system - which are then flagged on the home screen of the patient record. 'All kinds of things' may be alerted to, such as languages, sensory, physical and learning disabilities. Interpreters are available and BSL (British Sign Language) interpreters can be booked.

What do you feel works well about the booking system?

The booking system is designed around general 'Covid standards' and the aim is to see as many patients, as possible - safely. There is no reason for anybody not to have access.

What do you feel could be improved?

An emphasis on remote booking does lead to congestion on the phones, particularly at peak times (such as early morning) and managing this demand presents a challenge. Switching to a predominantly remote system is easier in some aspects, and harder in others, however it is the 'best possible' solution.

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?

It's about educating patients on what elicits a face-to-face appointment - they will be given a telephone consultation initially, regardless of preferences, and offered a face-to-face appointment if necessary - which often is the same day. Patients need to go through the system.



Eventually I envisage a hybrid model - a mix of face-to-face and remote appointments. Remote has its advantages - the fact that patients' queries can be dealt with on the phone is more efficient - quicker, and done without leaving the house. Pre-Covid, the notion of remote consultations was 'far fetched' and now it's commonplace, accounting for 80% of appointments.

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

Yes, those with special circumstances, such as a learning or sensory disability, or a mental health issue, will be seen face-to-face.

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

Patients can choose their own consultation times, if needed.

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

For telephone consultations, patients are given an AM/PM window. Lateness shouldn't really happen (however urgent cases must be prioritised) and patients aren't necessarily notified of late running. If the GP calls and there's no answer - they will call again 2 times, and/or leave a message.

What do you feel works well about the consultation system?

Patients are seen as quickly as possible.

Environment

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

There's a real 'doubling down' on Covid. Reception ask about symptoms when booking and anyone turning up with symptoms won't be let in the building. In the reception area, people without face coverings, or sitting too closely will be challenged.



Are staff aware of what to expect and do?

Yes. Staff have lateral flow tests twice a week and although not now compulsory - are encouraged to wear masks as often as possible.

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

This is a modern building and has 'all the facilities', such as a blood pressure machine that patients may access and get their BMI (Body Mass Index) score instantly. It's very secure - there are 2 security personnel on site who are always 'ready to go', the fire alarm works well, and at night it's locked up tight (fobs will not work after certain times). There's very little to fault, every nook and cranny has been thought about. The only thing I don't enjoy is having to do a lot of walking - just to get a coffee.

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've had to start moving some health checks recently - there's a national shortage of blood testing bottles so we need to focus on the more urgent cases.

We try to make sure all medication requests are dealt with in 48 hours.

Engagement and Feedback

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

Following consultations, patients are sent a link to our Google Reviews page and encouraged to give feedback.



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

The complaints charter is located 'deep within reception' (patients may not see it). The environment is very controlled and we can only put up 'high priority' notices - such as on Covid, fire safety and zero tolerance.

Staffing

Do you recall having received an induction?

I received an induction, as do all new staff members.

Do you feel that management are supportive towards staff generally?

I'm supportive of colleagues in my charge, and my managers are supportive of me.

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

Working conditions are all fine and I'm happy. Staff are well managed, there's a good sense of team spirit and we're quite 'close nit'.

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

Resolving patient's needs can be very rewarding.

And what do you find most difficult?

I don't enjoy complaints, or managing the 'vast changes' within the NHS - including keeping up with the various requirements.

6.2 Receptionist/Health Care Assistant Interview



The Receptionist/Health Care Assistant has worked at the practice for 12 years.

Appointment Booking

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

The practice does not encourage in-person booking, patients should either phone, or book through Dr IQ (the online system).

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, there are flags on the home page of the patient record. Needs are recorded.

What do you feel works well about the booking system?

Patients may phone at any time to book appointments. There's nothing substantially wrong with the appointments system, just the volume of calls.

What do you feel could be improved?

Dr IQ is now harder to access, previously it was available all the time (24 hours a day, 7 days a week) but now is live half days, and not at the weekend. Patients are not happy with this and can become frustrated - with telephone the only other option, lines are inevitably congested.

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?

For general appointments we're not allowed to book face-to-face consultations. The system is geared up towards clinical need - it's based on urgency, rather than choice.



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

There are certain flags and safeguards - if someone was referred from 111 notes will be available, also (let's say) if someone reports a new lump on their breast we'll get them in immediately. It depends on the situation and needs/requirements are flagged on the record.

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

Patients get an AM or PM window for a call.

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

If running late we will not contact them, as this will be confusing. If they call us, they will get a status update as soon as possible.

What do you feel works well about the consultation system?

Remote appointments can work well, there's a system to take photos which takes seconds, then if the doctor needs to clarify a face-to-face appointment can be offered.

Environment

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

Covid-19 - not everyone knows about the procedure, and not everyone complies. If we see patients without masks we will give them one, we'll also intervene if patients are sitting too close together. There shouldn't be more than 3 people in the queue at any one time. As queues move quickly, this shouldn't be a problem.

Are staff aware of what to expect and do?



All staff know the procedures.

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

We don't like the building, there's no fresh air - windows can't be opened and the air conditioning system is poor. In summer it was broken and somebody fainted. There are a lot of people suffering and 'it's rubbish', no filtered fresh air and artificial air is circulated - there's nothing healthy about it. Other than that, no complaints.

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 a shortage of equipment (blood testing bottles) but other than that, no backlogs.

Engagement and Feedback

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

Following consultations patients are sent the Google Reviews link and encouraged to feed back. There are dedicated staff to respond to posts.

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

Patients wanting to complain are booked in to see the manager. They are offered a choice - either a telephone or face-to-face conversation. Many complaints are often resolved quickly over the phone.



Staffing

Do you recall having received an induction?

New staff receive an induction - firstly with the assistant manager and then with the manager.

Have you received any training recently?

There is training throughout the year, and at the moment is delivered online. There are individual sessions, and also group sessions - which staff from two practices may attend.

Do you feel that management are supportive towards staff generally?

Management are supportive - we all work together and nobody is isolated. We all do our duty, if anyone is behind we will support them as all targets must be met. There is good teamwork between management and staff.

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

We work within regulations, we're not overloaded and staff get adequate breaks. There's a dedicated staff area for lunch, tea/coffee etc. Working hours - there's a good choice of shifts on offer (earlies/lates), and we can swap with other staff members so preferences are quite often met.

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

I enjoy everything about my job, if I didn't like it I wouldn't be here. It depends who you work with, and as I say we have a good team.

And what do you find most difficult?

Covid-19 protocols are very tough here. We used to see people face-to-face up front, but now everything is over the phone. I think both patients and staff/doctors are missing out.



7. Recommendations

Based on the analysis of all feedback obtained, Healthwatch Hammersmith & Fulham would like to make the following recommendations. Below the recommendations we have included a response from Canberra Old Oak Surgery.

We make 2 recommendations on the booking system.

7.1 Booking System

The practice prefers patients to book remotely (by phone or online) with in-person booking discouraged. While this is designed around safety considerations, the patients we spoke with suggest the system is generally overloaded.

Many complain of long waits on the phone - ranging from 30 minutes to an hour, and this is reflected in the online feedback.

The Dr IQ (online system) is also a source of frustration, as it's available for just 50% of core hours, not at all over the weekend, and booking slots are often unavailable. Some patients say they have uninstalled the app and will in future phone.

Recommendation 1: The practice has acknowledged that managing demand presents a challenge. While difficult, there may be solutions, such as an additional phone line during peak hours, extending access to Dr IQ and enabling in-person booking for those with a preference.

Recommendation 2: It might also be possible to examine demand across the Primary Care Network (PCN), to establish whether closer working could ease congestion, while at the same time enhancing levels of choice.

Response: "Patients are encouraged to log their requests through the DrIQ app which is the fastest way to get their requests seen by the duty doctor. When



patients come in person, it is still added to a list but will not be seen or triaged by the duty doctor as quickly as it would be via DrIQ. While these alternative methods are promoted, we never turn away patients who come to the screen, particularly those who may struggle to reach us by phone of through DrIQ.

DrIQ is available over the weekend and is actioned by a weekend team.

We have a new and improved triage system in place that now means we can offer same day access for all requests that come in before 3pm. This has meant patients no longer have to wait several days for their appointments."

We make 1 recommendation on consultations.

7.2 Consultations

Currently all patients, regardless of preferences will receive a telephone triage, with face-to-face appointments prioritised on clinical need.

Recommendation 3: NHS England and the Royal College of GPs have urged practices to discover and respect patients' preferences, and to see a greater proportion in-person. While not commenting on clinical or safety protocols, we would echo this advice and hope that those clearly preferring face-to-face appointments will be accommodated. It remains the case that for diagnosis, many patients prefer to be seen in-person, and would choose this if available.

Response: "This was at the time when Covid restrictions were much tighter than they are now. Patients are now allowed to request Face-to-face appointments and are more often granted the request as we have increased the amount of F2F appointments available."

We make 2 recommendations on the environment.



7.3 Environment

There is a lack of general information in the waiting area on conditions, local services, support, and initiatives.

Recommendation 4: This is a missed opportunity, as condition specific information - especially local, will have clear health benefits. While the overall environment is not controlled by the practice, it may be possible to work in partnership with the other practices, and building management, to increase volumes of information, particularly near the seated areas.

Staff in the upstairs offices complain of a lack of airflow - resulting in an uncomfortable working environment.

Recommendation 5: Again, while the practice does not control the building or maintenance, it may be possible to consult with the other practices, and management, to resolve this issue. A poor working environment does impact staff morale.

Response: "Due to restrictions within the building, we are not allowed to put up posters in the main waiting area. and all patient information posters are limited to the corridor where the clinical rooms are. We have two notice boards there.

At the time of the visit, there was an airflow issue that meant it was extremely cold upstairs. This issue has since been fixed by building management and there is good airflow of heating and cooling in the building."

We make 2 recommendations on engagement and feedback.

7.4 Engagement and Feedback



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.

Recommendation 6: We did not see a copy of the complaints policy on display - this is a legal and contractual requirement. We recommend that the policy is displayed so that patients can clearly see it.

We did not see a reference to the Patient Participation Group (PPG) in the waiting area.

Recommendation 7: 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: "There is a complaints poster and information up, however, again due to restrictions we cannot put them up in the waiting area. Our reception staff, however, do explain the complaints procedure in full to patients when enquired.

The PPG poster and information is located on the notice board in the corridor where the clinical rooms are."

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 86% compliant. We found no clear information on extended hours. The service list is not represented by a main menu link.

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.

RAG Rating



Are information sources clear and reliable?	

For service access and support, we consider the website to be 87% compliant. There is 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 70% compliant. While the PPG is clearly referenced with a good level of detail offered, the last meeting minutes are dated May 2020. There is no visible reference to the Friends and Family Test.



9. Glossary of Terms

BMI Body Mass Index

BSL British Sign Language

CQC Care Quality Commission

FFT Friends and Family Test

PCN Primary Care Network

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.

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"I like telephone triage as long as I can speak to a GP.

I also want them to see me in person when I don't think telephone is enough, which they do."

Patient

