# Enter and View Report

### Fulham Centre for Health, 6<sup>th</sup> October 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	Fulham Centre for Health, Charing Cross Hospital, Fulham Palace Road, London W6 8RF	
Manager	Yuleen Phillips	
Date & Time of Visit	6 <sup>th</sup> October 2021, 2.00am - 4.00pm	
Status of Visit	Announced	
Authorised Representatives	Nadia Taylor, Darren Morgan	
Lead Representative	Nadia Taylor	

### 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 Fulham Centre for Health

On 6<sup>th</sup> October 2021 we visited Fulham Centre for Health, a GP practice in Hammersmith, located within Charing Cross Hospital.

The practice, operated by Imperial College Healthcare NHS Trust has a sister site, Hammersmith Centre for Health, located at Hammersmith Hospital.

Staff work across both services - which share a caseload of around 9,900 patients. The combined service has 7 GPs (male and female), 1 clinical pharmacist, 2 nurses, 2 health care assistants (1 of which is on maternity leave) 1 practice manager, 1 deputy manager and 9 reception staff.

### 2.2 CQC Rating

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.

Fulham Centre for Health was last inspected by the CQC on the 8th and 9th July 2019. Their inspection <u>report</u> 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 2 stars (out of 5).

#### 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 6 patients and 12 staff members.

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

#### Appointment Accessibility

Notes

• The practice says that limiting the physical presence of patients minimises the spread of Covid-19 (important as the site is within a hospital) and frees up availability of nursing care, including for flu and other vaccines.

#### What has worked well?

- Patients may book through several methods phone, online (e-consult) or in person.
- The patients we spoke with are fully aware of booking processes.
- We received no specific complaints about either the phone or online systems.

#### What could be improved?

• Patients are not offered a choice of consultation method and will receive an initial telephone triage appointment. However, we are told that if patients do express a preference, this is relayed to the GP within the booking notes.



#### Consultations

#### Notes

• We observed around 5 patients an hour in attendance.

#### What has worked well?

- Appointments observed to be running on time, with good patient flow.
- If remote calls are missed, we are 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. Young children and the elderly are automatically prioritised.

#### What could be improved?

- There is no real level of choice in the majority of cases patients will only be seen inperson for clinical reasons.
- Some patients are visibly frustrated at the lack of in-person appointments.

#### Environment

#### Notes

• The current premises and location seem to cause issues, particularly in terms of physical access (getting in and out) and space (ability to maintain a safe distance).

#### What has worked well?

- The general environment is clean, and surfaces are clinically suitable.
- Hand gel and face masks are freely available.
- We were told there are managerial meetings with other departments (including A&E) and a risk register is kept. Physical access is a known issue.



#### What could be improved?

- Having to pass along an overcrowded corridor is a physical obstruction for all patients and may also present a hygiene risk.
- Signposting from main reception leads patients to a locked door.
- The waiting room is small and feels crowded with less than five visitors.
- The environment is uncomfortable, noisy and a little disorganised partly due to poor signage and demarcation.

#### Access to Treatment, Tests and Medication

#### Notes

• No delays to regular medication, treatment or tests are reported.

#### Engagement and Feedback

#### Notes

- Patients may communicate through phone, email, online form, in writing and inperson.
- The practice has an active Patient Participation Group (PPG).

#### What has worked well?

- The Patient Participation Group is mentioned on the registration form, with patients encouraged to join. There is also a dedicated noticeboard in the waiting area with up-to-date documents (including recent meetings minutes) displayed.
- A suggestions box is situated near the reception counter.

#### What could be improved?

- Despite clear efforts to publicise, patients tell us they are not aware of the PPG.
- Patients are also largely unaware of the complaints process.



- It was observed during our visit that the response to complaints is not always timely or robust.
- The NHS Choices webpage contains very few reviews.

#### Staffing

#### Notes

- Staff appeared to have a good rapport as a team, and to be mutually supportive and well co-ordinated.
- All staff members are observed to have been responsive and supportive towards patients.

#### What has worked well?

- Staff feel actively encouraged to give suggestions we hear that one receptionist has influenced the design of the registration form.
- There are weekly 'catch-ups' and monthly practice-wide meetings, which include discussions on areas for improvement.
- Reception staff tell us the practice manager is effective at disseminating information.
- Personal and team-based training is provided.

#### What could be improved?

• We have no observations on areas for improvement.

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 sited within Charing Cross Hospital. It is co-located with the emergency department and has two entrances. Because of its location within a hospital, the practice is not easy to find as looking up the address produces that of the hospital and thus easily causes confusion.
- If arriving from central Hammersmith (along Fulham Palace Road) the practice is well signposted at the side of the main building.
- The only hospital staff who were able to offer directions were the security staff at the entrance of the A&E department.
- On arrival, one representative followed the signs from main reception, and found the practice door to be locked. There is no indication that this entrance is unused.
- The Practice Manager acknowledged that sometimes patients get lost, and she informed us that the staff were understanding if patients were late due to not finding the practice easily.

#### Accessibility

#### Observations

- It was unclear whether there were patient toilets and if so where they were, or whether the practice relied on hospital facilities.
- The practice is close to the Urgent Care Centre (UCC) and to enter requires passing through a long, narrow corridor which is fully lined with chairs, all of which were occupied by waiting UCC patients when we visited. There were bags and jackets on the floor so difficult to navigate by foot. It would be extremely difficult for wheelchair or pushchair users to navigate; however, we were told that the unused entrance which is not obstructed, may be used for this purpose.

#### **Covid-19 Protocols**

#### Observations



- Hand sanitiser and face masks are freely available at both the emergency centre and main reception entrances.
- At the practice, an infection control poster is clearly displayed.
- The practice waiting room itself has 4 chairs, suitably distanced.
- Those waiting for the UCC (corridor lined with chairs) were clearly not socially distanced.

#### **Reception/Waiting Area**

#### Observations

- The two reception staff drew patients' attention to them as well as the Healthwatch visitors.
- Upon arriving, we saw that there had been an incident resulting in a considerable
  mess in front of one of the chairs, covered with a large pile of tissues, possibly caused
  by a spillage of some sort or a patient having been sick (evidenced by the presence of
  three sick bowls).
- The waiting area is very small it took a little time to realise that this was in fact it.
- The space feels crowded with less than five visitors.
- The waiting area contains just 4 chairs we were told this is to prevent UCC patients from sitting down (during the visit this did happen, however the patient was advised they may have to move).
- All surfaces are clinically suitable, and at the time of the visit clean.
- The general environment is noisy, and somewhat disorganised.

#### Noticeboard/Information

#### Observations

• There is a dedicated noticeboard for the Patient Participation Group (PPG), which includes up-to-date meeting minutes, a newsletter and other information.



- The waiting area is well-stocked with helpful leaflets, posters and notices advertising services and offering information on issues such as domestic abuse, bereavement support, anger management and many others. We do not recall if they were logically arranged.
- We did not see a complaints policy on display.

#### Additional Observations

#### Observations

- We were greeted by the Practice Manager who was friendly and welcoming.
- The Enter & View Visit poster was displayed, with associated questionnaires also clearly available.
- Appointments observed to be running on time, with good patient flow.
- Staff appeared to have a good rapport as a team, and to be mutually supportive and well co-ordinated.
- All staff members were cheerful and accommodating.

### 5. Patient Feedback

During the visit of Wednesday 6<sup>th</sup> October 2021, we engaged with 4 patients in total. A further 2 completed a survey following the visit.

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.

All patients had booked their appointment by phone. Some comment on a 'moderate wait' when calling, however no particular difficulties are mentioned.

When asking about choice of consultation method, nobody recalls being given an option and one person did not get their preference of face-to-face. While some are sympathetic of the circumstances around remote appointments, others we spoke with are visibly frustrated by a lack of choice.

Those needing emergency appointments, such as children, were seen in-person the same day. For routine appointments, waits of around three weeks are reported.

Parents and working patients say they are accommodated - with evening and weekend appointment options appreciated.

#### **Selected Comments**

#### **Booking the Appointment**

"I phoned to book, there was a slight delay on the line but manageable."

"I usually phone and usually there's a moderate wait."

"I needed an emergency appointment for my child - got it without any difficulty."

"It wasn't an emergency but I needed a repeat prescription - they told me to come in."

#### Choice of Consultation

"Today they told me to come in, which I prefer, but no there's not usually a choice."



"No I didn't get my preferred option - was asked to take a telephone appointment with the doctor. Had to wait 3 weeks."

"No. I don't ever recall being given a choice. But I understand the circumstances, I get it - we can't have appointments going to waste (what if a face-to-face is booked and the person doesn't turn up)?"

"I much prefer face-to-face but usually have no option but the phone call. How much longer do I have to put up with this?"

#### Working and Parenting

"I have kids and yes I do feel accommodated - there are evening and weekend options, very handy for me as a working mum."

#### **Any Other Comments**

"In the past I've had to wait some time, but they do accommodate me when needed and I really appreciate that."

#### 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, health conditions, internet access and languages) were accommodated.

Feedback suggests that remote appointments have been punctual. Some patients are comfortable with remote consultations while others question the ability to accurately diagnose over the phone.

#### **Selected Comments**

#### **Punctuality/Timing**



"They're very reliable at getting back."

"Called me as arranged."

#### Meeting Needs/Effectiveness

"Today I'm being seen face-to-face but usually it's a phone conversation only. I guess it depends on the issue, but it's been harder to diagnose on the phone, for sure."

"I prefer face-to-face but I don't mind Zoom either for certain things, it's worked reasonably well."

#### Any Other Comments

"It's sad to have appointments by phone, I think it's a real issue. I'd much rather get seen in person."

#### 5.3 Environment

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

All those commenting on Covid-19 procedures are complimentary. On the general environment there is widespread criticism - we hear about overcrowding, a lack of ventilation and a level of frustration resulting in 'scenes'. One person comments on getting lost.

#### **Selected Comments**

#### Covid-19 Awareness and Safety

"It's a bit chaotic as you can see, but I feel reasonably safe."

"Yes I'm satisfied with the precautions they have in place here."



#### General Environment

"I don't think the corridor is safe, I came here a few weeks ago in the summer and it was 'rammed with people'. There was no ventilation either so extremely uncomfortable for everyone. I've seen 'some scenes' as well."

"It's not really suitable, but at least it's clean."

"The last time I was here I got lost."

#### 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 delays to routine treatment, tests or medication are reported.

#### **Selected Comments**

#### **Treatment/Medication Delays**

"There's usually a bit of a wait (4-5 weeks) but my meds are prescribed as normal."

"No delays - I do my repeats online and it's quite easy."

#### 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.

Some have been encouraged to give feedback, while others have not. Nobody we spoke with is familiar with the PPG or complaints process.



**Selected Comments** 

#### Encouragement to Give Feedback

"I have been encouraged."

"Not that I can remember."

**PPG Awareness** 

"Never heard of it."

#### **Complaints Policy Awareness**

"I wouldn't know, but I've had no reason to complain - as of yet."

#### 5.6 Any other Comments...

Finally, we asked for any other comments.

Patients take the opportunity to complement the treatment and 'emotional support' received.

#### Selected Comments

#### Any Other Comments

"I'm very pleased with my doctor, who is always willing to see me and offer whatever treatment or emotional support I need."

"They gave me some emotional support when I had difficulties with neighbours."



"The practice is always accommodating. I moved to this one several years ago and very pleased that I did!"

### 6. Staff Feedback

All staff members completed a detailed questionnaire prior to the visit. We select responses that represent a range of staffing categories - clinical, management and administrative.

#### 6.1 GPs

The following feedback has been selected from 4 completed surveys. Employment at the practice ranges from 6 months to 5 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)?

• Yes, patients get a choice of online e-consult, walk-in or phone.

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 use Language Line and can set up media for patients with a hearing or visual disability.
- Multiple doctors and staff members speak different languages,

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

- There are many ways of booking an appointment.
- Same day appointments as well as pre-bookable.



• Slots available for face-to-face appointments, NHS 111 emergency appointments and online slots.

#### What do you feel could be improved?

- To improve utilising the 'same day slot' appointments for patients with urgent presenting complaints.
- Patient accessibility to online bookings.
- Duty doctor in morning and afternoon, dealing with emergencies.
- To improve identifying patients with urgent need for same day consultations.
- Access on phone lines could be enhanced by a verbal messaging system to indicate how many are in the queue before you as you wait to be connected.

#### Consultations

I understand that most patients will be triaged - to assess whether their case is urgent, and what type of appointment would be best. Can you tell me more about this?

- Internal triage by admin, will be discussed with clinicians if there is a grey area.
- The receptionists will pass directly to a GP cases for urgent consideration. All GPs share the on call so there is no bottle neck for waiting.
- It would be good for a template to be put in place with specific questions about severity and urgency.

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

- Yes they are.
- Patients will be given face-to-face appointments by clinicians if they prefer this.
- Admin will add a note on booking that the patient prefers a face-to-face consultation.

#### If preferences are expressed, is this taken into consideration?



- 100%
- Yes, always.

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

- SilentSounds for foreign language speakers for telephone consultations.
- On their SystemOne home page it would indicate need for any kind of translation.
- Interpreters for face-to-face consultations.
- Deaf and blind services.
- British Sign Languages.
- Paper forms if no access to computer/internet.
- Admin team will assist our patients with regards to hospital appointment booking, phlebotomy booking etc, if needed.
- A lift for access to the first floor.
- Disabled toilet.
- Multicultural and multilingual staff.

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

- Patients will be offered an earlier or later appointment to suit their needs.
- We have GPs covering later in the day after 3.30pm and appointments up to 6.30pm but sadly we had to stop our 6.30pm 8.00pm slot as the Trust withdrew the budget. We cover from 8.00am.
- We have late appointments available on Mondays and Wednesdays.
- Plus weekends and online.

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

- Remote appointments can run late but when booking patients are given a window, and an expectation of how long it will be.
- They are generally very flexible.

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



- The offer of flexibility more tailored to the patient's need.
- Positive feedback from patients regarding e-consult.
- Flexibility and accessibility.

#### What do you feel could be improved?

- How to improve support from local services.
- How to involve patients more in decisions about their care and treatment.
- Have a clinical navigator and more healthcare staff, and more clinics for chronic disease management.
- GPs and pharmacist working together more cohesively.
- The IT system is efficient but can be let down by Imperial IT hardware support.

#### Environment

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

- Social distancing patient waiting area and staff seating arrangements.
- Wearing masks for all patients and staff.
- Infection control procedure wipe computer, desk and phone before and after use; clinician to wipe equipment and chairs between each patient; laminate everything that is placed on the wall.
- Meetings are held online.
- Staff are encouraged to have the vaccines etc and do lateral flow tests twice weekly.
- Patients are reminded at their appointment to disclose any recent cough, fever and sore throat and ideally get tested before coming in.

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

- Yes, and we have had to make sudden changes because of NHS directives.
- They receive a text message to remind them of wearing a face mask when coming in for face-to-face appointments.



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

• Yes, they are also reminded of PPE (Personal Protective Equipment) with notices everywhere, by emails and by staff in general.

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

- Maintain social distancing.
- Have an electronic system for checking in to avoid queues, for patients to know what do to on arrival, especially if no one is at reception (which happens rarely).
- Perhaps offer a screen for patient feedback.

#### **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?

- It was but now we have 2 HCAs (Health Care Assistants), and 2 nurses and so that makes a big difference. Before we were lacking this capacity.
- There is a system in place.

#### Engagement and Feedback

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

- All patients are encouraged to give feedback verbally, written (email, post) or on the NHS website as this could help our practice to improve.
- Yes also via the PPG.



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

- Yes but not sure if it's in the waiting area.
- Yes, patients are aware of, online and through our monthly newsletter.

#### Staffing

#### Do you recall having received an induction?

- Yes, a comprehensive full day induction.
- We set up an induction protocol back in 2017 which now operates.

#### Do you feel that management are supportive towards staff generally?

- We have an extremely supportive practice manager who is always prepared to help and support us with any issues in the practice.
- We have clinical and admin meetings (weekly and monthly).

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

- How to improve management of complex patients with multiple issues in one consultation.
- Tea-breaks for catch-up as the days can be long.
- Getting extra clinical staff.
- Do not specify appointment times, so the GPs have autonomy in managing their days.
- Staff gym.
- Assigned break areas for the surgery staff.

#### Do you feel that anything works particularly well?

- We have a great team of admin, nurses, HCAs, clinical pharmacist, and GPs, who work very closely together to make sure our patients receive the optimal care.
- The admin team are excellent.



- Communication with management is excellent.
- And approachable staff in general.

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

- Having a supportive team by my side.
- The team is great and the environment is clean.
- Working as a team.

#### And what do you find most difficult?

- How to manage complex patients with multiple issues in one consultation.
- Also high expectations from patients.
- Challenging patients complex cases, especially mental health and substance use.
- Time pressure on consult time.
- Long days and having specific times to call patients as it deprives us of autonomy.

#### 6.2 Acting Deputy Practice Manager

The Acting Deputy Practice Manager has worked at the practice for 3 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)?

Patients can call to book appointments or fill out an e-consult by visiting the practice website.

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)?



SilentSounds book service for people with language barriers. We have a lift in the surgery for easy access for patients with a disability. Those without any computers or phones we do accept them when they walk in to book their appointments.

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

Remote booking for those who work. Appointments in advance at least a month. Same day urgent appointments. Video consultations.

#### What do you feel could be improved?

Nothing thus far.

#### Consultations

I understand that most patients will be triaged - to assess whether their case is urgent, and what type of appointment would be best. Can you tell me more about this?

We offer routine appointments that commence within 2 weeks. We also offer same day urgent appointments for those patients who are not well. Our reception staff are highly trained to triage and signpost patients.

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

Yes patients do have a preference, as certain appointments are straight face-to-face bookable by our admin team. All initial appointments are telephone appointments and could possibly lead to a face-to-face if the doctor thinks it's clinically urgent for the patient to be seen.

#### If preferences are expressed, is this taken into consideration?

Yes, as some patients usually get continuity of care from a certain GP and that agreement is made between GP and patient, admin staff are to uphold patient's agreed preferences.



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 do work around the patient's schedule, we have remote booking for patients to speak to a GP late in the evenings or on weekends.

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

Yes remote bookings are generally on time.

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

The patient is triaged appropriately and then afforded a face-to-face appointment depending on their clinical needs by the GP. If there is a failed encounter when calling the patient, the GP will make 2 more attempts throughout the clinic, that reduces our number of did-not-attends that cost the NHS £160.

#### What do you feel could be improved?

Nothing thus far.

#### Environment

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

Patients are requested and informed to wear masks. Staff to wear masks in communal areas. PPE provided to all clinical staff. Hand sanitisers and masks at entrance and at reception. Waiting area seating arrangements follow the 2 metre rules.



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

Yes we have signs telling the patients exactly what to do, also we have clear instructions posted on our website. We also have this message on our phone system for when patients call.

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

Yes, staff are fully aware as we have signs in all clinical and non-clinical rooms and hallways. This is also reiterated in our monthly practice and admin meeting.

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

Everything works well.

#### **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 are no delays with care in this practice.

#### Engagement and Feedback

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

Yes via the NHS Choices website and via the practice website (feedback/complaints).

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



#### Yes.

#### Staffing

Do you recall having received an induction?

Yes.

Have you received any training recently?

Yes, several sessions in St Charles and on Microsoft Teams.

Do you feel that management are supportive towards staff generally?

Yes very supportive.

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

No.

Do you feel that anything works particularly well?

Everything works particularly well.

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

Patient satisfaction.

And what do you find most difficult?

Aggressive patients.

#### 6.3 Reception Staff



The following feedback has been selected from 7 completed surveys. Employment at the practice ranges from 6 months to 4 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)?

- Yes they have the choice to book via telephone, walk-in and e-consult.
- Patients can also book appointments in person, and if they have attended the surgery for another appointment or to collect/drop off anything they can also book then.

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)?

- Patients without computers can call us.
- Foreign language speaking/sign language patients are provided with an interpreter on the phone and for face-to-face appointments.
- Hearing Loop provided at reception.

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

- Patients are able to get same day appointments by calling the surgery at 8am.
- The most important calls are triaged (more urgent appointments).
- The e-consult slots give another option for patients.
- Due to Covid restrictions there aren't many patients who attend the surgery for faceto-face appointments. It's only advised under the GP's discretion. This limits the virus spreading in the hospital.

#### What do you feel could be improved?

- I believe there shouldn't be any improvement as all colleagues have regular meetings via Teams on how we could improve as a surgery.
- We have already made some improvements in the registration process. If we have any other ideas, we will suggest them to the management.



#### Consultations

I understand that most patients will be triaged - to assess whether their case is urgent, and what type of appointment would be best. Can you tell me more about this?

- When patients call the surgery, they would be asked for the reason of the appointment.
- Based on the symptoms and availability of urgent slots they would either be booked for an urgent slot; go to A&E; call 111 to be booked in at the Urgent Care Centre or asked to call back at 8am the next day to get an urgent appointment if it can wait until tomorrow - or if not resolved by other services.
- Priority age groups of under 5 and over 75-year-olds can be booked on the same day.
- Non urgent/administrative requests will be booked for the next available routine appointment.
- All patients are offered telephone/video consultations in the first instance for triage.

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

- Patients are informed that all appointments are virtual either via telephone or video. If a patient requests an in-person appointment this is notified to the GP within the appointment details for consideration.
- Patients can only be booked in for telephone consultations and can only be booked in person by the clinician.

#### If preferences are expressed, is this taken into consideration?

- Yes, informed in the appointment details so the GP/clinician is aware.
- Patient's requests are taken into consideration and reconfirmed with the GP if it's possible and necessary, or mentioned in the appointment notes for the GP to be taken into consideration.

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



• People with difficulties are given more flexibility with appointments and booked for a longer duration if necessary.

## 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 for patients as most appointments are done via telephone call.
- When booking appointments patients are asked for their preferred appointment time.
- If someone has a narrow time window for answering calls or has other work/life commitments on the day of the appointment, it would be mentioned to the GP.
- Remote booking available seven days a week.

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

- All appointments usually run on time for all clinicians.
- We can only book remote appointments but do not have control of the appointment after it was booked.

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

- Patients are triaged appropriately and if any follow-up including investigations are required these can be arranged and the patient informed accordingly.
- Reduced risk of Covid-19 and ensuring patient and staff safety continues to be maintained.
- If patients have a problem which can be visually noticeable (swelling, scar, redness etc) patients are being sent a message on which they can reply with photos for the doctor to see it at the telephone appointment. Other documents can also be sent.

#### What do you feel could be improved?

• Availability of in-person slots as patients generally would like to come in to the surgery.



#### Environment

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

- Masks are worn at all times, and there are a limited number of patients who attend the practice.
- Keeping distance.
- Using hand sanitiser.
- Isolating if displaying Covid symptoms.
- All areas are being cleaned throughout the day.
- Staff are provided with lateral flow tests to be done weekly.
- The cleaner routinely cleans the clinical and administrative area every day.

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

- There are signs and information about Covid-safe procedures at the GP.
- If a patient is not aware of it, or has not read it before, it would be explained by a member of staff.

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

• Yes, staff are aware, and they will be informed of any changes.

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

• I cannot think of any improvement on the environment.

#### **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?



- In response to demand, more GPs were employed or asked to work for longer hours to increase the availability of appointments.
- HCAs, nurses, and a pharmacist introduced to take some of the workload of medication, diabetic and mental health reviews from GPs.
- 'Weekend Plus' slots offer short notice appointments at weekends and some evenings.

#### Engagement and Feedback

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

- Yes they are complaints go to the practice manager, and for positive feedback patients go on to our website.
- Patients are being sent a message after the consultation to provide feedback.
- Patients can also provide suggestions in person if attending the surgery.

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

- It is advertised on the GP website.
- In person speak to the practice manager or deputy.
- In writing by sending an email for the attention of the practice manager.

#### Staffing

#### Do you recall having received an induction?

• Yes, I received an induction when I started.

#### Have you received any training, including recently?

• I have attended several work-related training sessions.



#### Do you feel that management are supportive towards staff generally?

• Yes, management is supportive and always open to speak to and answer questions, address concerns or recommendations.

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

- I am happy with the working conditions, if I will see that something can be improved, I'll speak to the management about it.
- Not at the moment, current conditions are appropriate and reflective of Covid-19 guidelines and policies.

#### Do you feel that anything works particularly well?

- The calling system works well as it allows you to see how many patients are waiting and for how long, which makes it easier for task planning to see if more staff need to be allocated to calls during busier times.
- Regular meetings and correspondence from management to communicate with all staff regarding any changes, updates, and information.
- Variety of different clinicians (GP, clinical pharmacist, practice nurses, HCAs, diabetic nurse etc) to offer relevant appointments to patients.

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

- I enjoy most when I can turn a concerned, sad, or even angry customer into a happy customer by providing the support in their difficult situation and finding the best, quickest solution.
- Interaction with patients.

#### And what do you find most difficult?

• The most difficult is when a patient needs to be seen, but there are no appointments to book them in. I had to offer other options. I try to suggest the best option, based on their circumstances.



### 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 Fulham Centre for Health.

We make 1 recommendation on consultations.

#### 7.1 Consultations

Generally, patients will receive a telephone triage, with face-to-face appointments prioritised on clinical need.

**Recommendation 1**: 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**: We see a high proportion of face-to-face patients: the two Practice Nurses and HCA see all patients face to face and the GPs see at least 25% of the daily patients face to face. From March we will add more face-to-face appointments for patients to access.

We make 3 recommendations on the environment.

#### 7.2 Environment

The current premises and location seem to cause issues, particularly in terms of physical access (getting in and out) and space (ability to maintain a safe



distance). A locked entrance door also results in patients making wasted trips, in some cases getting lost in the process.

We were informed that the practice is aiming to relocate - to much more suitable premises, not far from the current location. In the meantime, we would urge that:

**Recommendation 2**: General and on-site location signage is improved, so that patients do not get lost. The locked entrance door also needs to be acknowledged in signposting.

**Response:** To be discussed in the next operational meeting.

**Recommendation 3:** The waiting area is more clearly designated, to reduce overcrowding, and confusion for both practice and Urgent Care Centre patients.

**Response:** Feedback regularly discussed in operational meetings. New location in Charing Cross identified.

**Recommendation 4**: The risk assessment on wheelchair access is reviewed, to ensure that patients are not inconvenienced when visiting and that the practice is easily accessible to everyone.

**Response**: Charing Cross has easily accessible wheelchair access. The GP Practice is located on the ground floor and patient can enter the practice via the A&E entrance.

We make 4 recommendations on engagement and feedback.

7.3 Engagement and Feedback



Staff members say that patients are encouraged to leave feedback - however just one patient recollects this. On visiting the NHS Choices <u>review page</u>, we find that very few comments have been posted.

**Recommendation 5**: We recommend that encouragement to feed back is more prominent in texts and emails - with direct links to review sites supplied, where practical. A dedicated feature in the newsletter may also help to stimulate uptake.

**Response**: We send a text message for patient to give feedback after every consultation via Mjog (a mobile messaging app). We send a AccuRx message (text message) with the NHS choice link for patients to leave feedback: Dear.....

Following your consultation. Please can you write a review of your experience: Fulham Centre for Health (Charing Cross Hospital)

https://www.nhs.uk/services/gp-surgery/hammersmith-and-fulham-centres-forhealth-branch/Y02589001/leave-a-review.

There have been great efforts to publicise the Patient Participation Group (PPG), which is mentioned on the registration form and features on a dedicated noticeboard in the waiting area. Despite these efforts, none of the patients we spoke with are familiar with the PPG - including those waiting next to the noticeboard.

**Recommendation 6**: While the noticeboard itself is informative, it is not visually striking so easy to miss - use of images and colour will help to attract attention.

**Response:** We also display information on the Jayex Screening Board.

None of the patients we spoke with are aware of the complaints process. We did not see the policy in the waiting area.



**Recommendation 7:** We would ask that the location of the policy is checked and confirmed. At most practices, the document is situated near the reception window.

**Response:** The complaint policy is located right next to the reception desk on the notice board

Despite the overall positive comments received from the interviewed patients, observations made of a visiting patient suggests that the process of dealing with complaints could be improved.

**Recommendation 8**: The complaints policy (not viewed by Healthwatch) should include clear timeframes, to avoid situations such as the one witnessed, and to ensure that complainants receive a response in a timely manner.

**Response:** This information is available on the complaint policy.

We make 1 additional recommendation.

#### 7.4 Additional Recommendations

Given the confusions with the location, when the Practice Manager was asked to speculate on what attracted patients to their practice, she acknowledged that new patients may assume that being within the hospital - the practice could arrange swifter referrals to hospital consultants, scans, X-rays and other diagnostic investigations, which, she explained, was not the case.

**Recommendation 9**: It would be helpful for this to be addressed in the advertising/registration materials to eliminate possible confusion and unrealistic expectations by prospective patients.

**Response:** This feedback will be added on the newsletter.



#### Additional Statement

The practice is in the process of fundraising to enable a move to a different area next year which, although still within the building of Charing Cross Hospital, would be larger and more suitable for a GP practice (the Healthwatch visitors were shown the proposed location for the move at the back of the main hospital building to the lefthand side of the lifts).

### 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 100% compliant. The layout is concise, well presented and proportioned, and all items were found easily.

### 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, we did not see details of previous or upcoming meetings, or links to documentation.

### 9. Glossary of Terms

- AIS Accessible Information Standard
- BSL British Sign Language
- CQC Care Quality Commission
- FFT Friends and Family Test
- HCA Health Care Assistant
- 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.

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"I much prefer face-to-face but usually have no option but the phone call.

How much longer do I have to put up with this?"

Patient

