



Enter and View Report

Locking Castle Medical Centre 27th March 2018



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Details of the Visit

Location

Highlands Lane Locking Castle Weston super Mare BS24 7DX

Date and Time of Visit

27th March 2018: 9am-11am

Enter and View Representative Gill Auden

Registered Provider

Stafford Medical Group

Type of Service

GP Surgery

Specialisms

N/A

Manager

Juliet Bodman



Acknowledgements

The Healthwatch North Somerset Authorised Enter and View Representative wishes to thank Locking Castle Medical Centre and in particular the staff.

Purpose of the Visit

Healthwatch North Somerset is carrying out a series of visits to GP Practices in North Somerset to ascertain the experience and opinions of local patients.

Locking Castle Medical Centre was selected as part of our series of North Somerset GP Enter and Views of GP Practices in North Somerset.

Healthwatch North Somerset made the decision to visit GP Practices in North Somerset to observe the patient experience of using the services. Feedback gathered from local people provides a lot of positive feedback and there are numerous examples of good practice. Access to primary care is a theme frequently identified in the intelligence gathered by Healthwatch North Somerset and Enter and View visits allow observation of the patient environment.

The purpose of this Enter and View visit was aimed at outlining what was observed and recognising, highlighting and sharing of good practice and making any suitable suggestions for improvement to the service concerned.

The report may also make recommendations for commissioners, regulators or for Healthwatch North Somerset to explore particular issues in more detail. Unless stated otherwise, Enter and View visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch Enter and View visit are referred to the service provider and appropriate regulatory agencies for their rectification.

This report relates only to this specific visit and feedback received directly by Healthwatch North Somerset during the two hours of the Enter and View visit. It is not Representative of all service users, only those who contributed within the restricted time available, through interviews or other feedback.

Description of the Service

Locking Castle Medical Centre is part of the Stafford Medical Group and is situated in a purpose built building, situated next to Worle Retail Park. Although there is only designated for Disabled Patients there is plenty of parking available in the retail park.

Planning for the visit

The visit was an announced visit with Locking Castle Medical Centre Practice Manager being given two weeks' notice. We sent a confirmation of visit letter, a Practice Manager questionnaire, posters and leaflets to the Surgery to inform patients, relatives, carers and staff about the Enter and View visit and about the role of Healthwatch North Somerset. The Enter and View visit was planned at 9am to observe the Surgery during a busy period of their day. As part of the planning the Enter and View Representative did some background research - online and out of hours.

How was the Visit Conducted?

One Enter and View Representative carried out the visit. The Enter and View Representative met with the Practice Manager. The Representative met with the Practice Manager again at the end of the visit.

The Enter and View Representative observed the condition of the premises and the interaction between the staff and patients.

The Enter and View Representative was not approached by or talked to any patients or staff, the information and evidence detailed in this report is collated from speaking to the Practice Manager and the Enter and View Representative's own observations.

The Enter and View Representative sought background information and reviewed the website to note the information available to patients and made a call out of hours to note the recorded information given to patients.

How were findings recorded?

Comments and quotes were recorded by the Enter and View Representative whilst observing the Practice and engaging with the Practice Manager. Observation and prompt record templates were used to make notes, these were typed up after the visit by the Enter and View Representative. The report was compiled and written based on the notes and records of the visit.

Communication with the Manager

The Enter and View Representative met with the Practice Manager briefly at the start of the Enter and View visit. The Practice Manager provided written examples for the three prompt questions which are used to establish instances of good practice, evidence change occurring because of patient feedback and identify potential improvements. The three prompt questions and responses are recorded below.

Q1. Are there any examples of good practice that you would wish to share with the rest of the primary care community?

- We have six face to face slots each day (three in the morning and three in the afternoon) which are reserved for 'unwell children under five' these can be directly booked by the reception staff and we have found that they help reduce the anxiety of parents.
- We have dedicated prescription clerks covering 8.30am-5.30pm, Monday to Friday they ease the job of the receptionists as they can pass prescription query phone calls of any sort to the prescription clerks who will deal with the problem or pass the information on to the appropriate person.
- We have set up a controlled drug audit book so we can track all Controlled Drugs.
- For patients who cannot manage a monthly or longer prescription (for whatever reason mental health, addiction, and social problems) we have set up a system to take over the repeat ordering of the medication.
- We do a Saturday morning 'Flu Party' for our children who need nasal flu vaccinations each October. We have drinks, biscuits, colouring and a balloon modeller to reduce the stress of children and parents.



Q2. Do you have any examples of how the Practice made changes following feedback from patients?

- We have increased the number of phlebotomy appointments.
- We have a small stool in the disabled toilet to help toddlers use the facilities.
- The reception staff are happy to provide a cup of water on request as we felt a water cooler/dispenser might cause a spill hazard.
- We have set up a list of patients with chronic diseases that are not covered by the Quality and Outcome Framework (QOF) parameters. The people on this list are reviewed quarterly at our clinical meeting to ensure their conditions are being adequately monitored.
- Following discussions at our regular Patient Participation Group meetings, we are looking in to setting up some education sessions for mothers with young children; some would be run by Advanced Nurse Practitioners and some by Dr. Yousef who has a special interest in paediatrics. Topics suggested so far include: head lice, threadworms, minor illness in children, paediatric resuscitation and choking.

Q3. From the Practice perspective, are there any changes or recommendations you would make to improve access to services at the Practice for patients?

- We have struggled with recruitment in the past but have recently taken on a new salaried GP which has eased the situation. We are also in negotiation with a doctor who was previously a regular locum but is now on maternity leave she should be joining us as a salaried GP later in the year.
- We want to close Stafford Place Surgery we feel it is no longer suitable to provide healthcare in 2018. We have the support of our PPG who understand that having to run two buildings is really stretching our resources. We are planning to re-apply to the CCG and NHSE soon following some further consultation with patients. We feel strongly that we can provide a much better service to patients at Locking Castle Medical Centre.
- Since taking on some additional nursing staff, and moving an increasing amount of the SPS workload to LCMC we are rapidly running out of space. We have been in touch with our landlord at LCMC and are negotiating some Practice improvements including converting some of the ground floor admin space to clinical. There is also the possibility of building on two additional consulting rooms. We would have liked to have a lift installed, but apparently this is prohibitively expensive.
- We will also be investigating using the building after 6.30pm and on Saturday mornings to become an active of Advanced Access.
- We were very happy to be given a 'Good' rating by the CQC last November and are working to improve on this next time.

Observations and Findings

The Enter and View Representatives observed the following:

External Building Condition

The building is purpose built and is well maintained.

Internal Decoration, Cleanliness and Furnishings

The building is well decorated, clean with modern furnishings



Outside the Surgery

- The surgery is a purpose built building which has no patient parking on site (other than Disabled Parking), but it is a short flat walk from the retail parks' car park next door.
- A bus stop was located close to the building.

Access to the Surgery

- There is clear signage to the front of the building
- The building is easily accessed by wheelchairs and pushchairs via a level path.
- There are two heavy doors to get through to the Reception desk.
- The doors are not automated but there are clear signs and a bell if patients/visitors require assistance.

Reception Area

- The reception area has a combination of high and low areas, with glass screens.
- There was one receptionist on duty who was wearing a name badge.
- Some of the conversation at reception could be heard in the waiting area.
- There was not a queue at reception during the Enter and View visit.
- All the staff encountered were approachable and friendly.
- There is an electronic check in the waiting room with hand sanitiser gel on the adjacent wall. The check in has language options on it.
- There is a notice board with names and photos of GPs and the name of the Practice Manager.
- The toilets were clean and tidy, and a step was provided for small children to use.
- Translation services are available through reception but this was not in evidence.
- Whilst reception is not completely private there is a notice stating that patients who require privacy have a room available to use.

Waiting Room

- The waiting room was light and airy.
- There was no water dispenser, but there was a notice stating that anyone requiring water could ask the receptionist
- The seating was around the room and the seats were plastic covered. Some chairs had arm rests, but chairs higher than normal were not seen. There was plenty of seating available.
- There is a wooden toy for children in the waiting area.
- There was room to move around the chairs with a wheelchair or pushchair.
- The floor in the waiting room was tiled and carpeted and this appeared to be clean and in good order.
- Patients were called by a TV screen which was quite loud and the pronunciation was not very clear. There was no background music.
- Patients didn't appear to wait for long for their appointments during the observation time. No patient waited longer than five minutes.
- Conversations in the reception area could be heard in the waiting room.
- There were plenty of notice boards around the waiting room and some information also on a small corner table.
- The Practice Mission Statement was not visible.
- There are hearing loop signs.
- Signs to the toilets are visible.



- There was a blood pressure machine in the private room which is available for patients to use.
- The reception area was clean and tidy with a rubbish bin provided.

Information Boards/Leaflets

- There was plenty of information available on numerous boards in the waiting area and reception.
- The information was relevant and up to date.
- The PPG was well advertised.
- Family and Friends information was visible.
- Healthwatch North Somerset information including 'patient story' and 'volunteers needed' were displayed.
- Information about complaints was visible.
- There was a comments box in the waiting area and "you said we did" information.
- There was a specific carers' notice board and information was available on other boards.
- The information boards were very well organised and up to date, but not overwhelming.

Patient Contact

No patient contact was undertaken during the Enter and View visit.

Communication with the Practice Manager at End of Visit

At the end of the Enter and View visit the Representative met with the Practice Manager to clarify any issues that were unclear. Responses to queries raised are below.

- There was no background music provided and the Practice Manager agreed it might help with privacy issues.
- The notice board with names and photos of GPs was a little out of date as it stated that the Practice Manager was new although she has been there for nearly 18 months.
- There was no water dispenser and the Practice Manager explained that that was a deliberate decision as they were concerned that spillages could cause a slip hazard to patients. However there is a notice informing patients that they are welcome to ask the receptionist for a glass of water.
- The Practice Manager explained that they hope to close the Stafford Place surgery branch as it is an old building in need in much restoration and upgrading which is too expensive for the Practice to undertake. They have applied to the CCG and NHS England to close the surgery but have so far been refused. The Practice feel very strongly that they can provide a much better service for patients at Locking Castle Medical Centre. In addition not having to pay rent at Stafford Place would allow the Practice to make improvements (i.e. a two clinical room extension) at Locking Castle.

Good Practice

- The Advanced Nurse Practitioner and Practice Nurses run a variety of clinics.
- The Saturday morning 'Flu Party' for children who need nasal flu vaccinations each October. Drinks and biscuits are provided, and colouring and a balloon modeller are on hand to reduce the stress of children and parents.
- Six GP appointments each day for unwell children.



- Education sessions for young mothers to be set up.
- The Practice have set up a list of patients with chronic diseases that are not covered by the Quality and Outcome Framework (QOF) parameters. The people on this list are reviewed quarterly at the practice clinical meeting to ensure their conditions are being adequately monitored.

Out of Hours

As part of the background research the Enter and View representative noted the following details when they phoned the surgery out of hours: -

The surgery name was given and the opening hours. Details of when to call 111 or 999 were given. It was also mentioned that 111 was free.

Review of the Practice Website

As part of the background research the Enter and View Representative noted the following details when researching the website: -

- The Practice website was viewed via a laptop, the full website page was visible.
- The opening hours were displayed.
- The out of hours' phone number was displayed.
- The website provided out of hours' information and is easy to find on the front page, it also states that calling 111 is free.
- The NHS 111 logo is located at the bottom of the home screen.
- NHS Choices logo is located at the bottom of the home screen and directly connects to NHS Choices.
- From the information on the Practice website it was not possible to find out how to make a complaint although it was clearly signposted in the waiting room.
- The website provided clear guidance and contacts, of all local healthcare groups and hospitals.
- It is easy to find how to register as a new patient, following the tabs from the home page.
- The website provides an up to date health related news feed from the BBC.
- The front page of the website offered translation and language selection.
- A direct dial number for the Practice Manager was not available.
- The Practice website was clear and easy to navigate.

Recommendations

Healthwatch regulations stipulate that service providers and commissioners have a duty to respond to local Healthwatch reports and recommendations within 20 working days, in writing, to acknowledge receipt and to explain what action they intend to take; or if they do not intend to take action they must explain why. (Health and Social Care Act 2012: Addendum to summary report: issues relating to local Healthwatch regulations).

Healthwatch North Somerset recommends the following based on the Enter and View Representative's observations and feedback received by the public in North Somerset.

We believe the following recommendations to be achievable, affordable and evidence based:

Background music could help dissipate any noise from the reception area

- The addition of a photo of the Practice Manager along with the GPs would be helpful
- Waiting times were available although during the visit no patient waited longer than 5 minutes
- A poster stating that translation services are available would be helpful
- Information in other formats (i.e. braille) would be helpful and should be posted on a board in the waiting room/reception area
- A larger notice offering water to patients would be a good idea

Provider Response

A response was not received from the Provider.

About Healthwatch North Somerset

Healthwatch North Somerset is the local independent voice for health and social care services. We work with local people to improve services for people who live, or access services in North Somerset, gathering local views and experiences and acting on them to make local services better, now and in the future.

Healthwatch North Somerset's statutory function and remit, which is laid out in The Health and Social Care Act 2012, is to provide a voice for people who use health and adult social care services, by:

Influencing

- Giving people an opportunity to have a say about their local health and social care services, including those whose voice isn't usually heard
- Taking public views to the people who make decisions including having a Representative on the Health and Wellbeing Board (People and Communities Board in North Somerset)
- Feeding issues back to government via Healthwatch England and the Care Quality Commission (CQC)

Signposting

- Providing information about health and social care services in the local area
- Advising people on where to go for specialist help or information (signposting)
- Helping people make choices and decisions about their care
- Working closely with other groups and organisations in the local area.

Enter and View

To enable Healthwatch North Somerset to gather the information it needs about services, there are times when it is appropriate for Healthwatch North Somerset staff and volunteers to see and hear for themselves how those services are provided. That is why the government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch North Somerset Representatives to enter premises that service providers own or control to observe the nature and quality of those services.

Healthwatch North Somerset Enter and Views are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch North Somerset to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch North Somerset Enter and View Authorised Representatives are not required to have any prior in-depth knowledge about a service before they visit. Their role is to observe the service, talk to service users and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report.

Legislation allows 'Enter and View' activity to be undertaken with regard to the following organisations or persons:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities
- a person providing primary medical services (e.g. GPs)
- a person providing primary dental services (i.e. dentists)
- a person providing primary ophthalmic services (i.e. opticians)
- a person providing pharmaceutical services (e.g. community pharmacists)
- a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or care services (e.g. adult social care homes and day-care centres).

Key Benefits of Enter and View

- To encourage, support, recommend and influence service improvement by:
- Capturing and reflecting the views of service users who often go unheard, e.g. care home residents
- Offering service users an independent, trusted party (lay person) with whom they feel comfortable sharing experiences
- Engaging carers and relatives
- Identifying and sharing 'best practice', e.g. activities that work well
- Keeping 'quality of life' matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a 'critical friend', outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and carers play an integral part in local commissioning.

Relevant Legislation

- The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).
- The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013." (28 March 2013).
- The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).
- The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013." (28 March 2013).





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