



Enter and View Report

Riverbank Medical Centre
4th April 2018



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Details of the Visit

Location

Walford Avenue, Worle BS22 7YZ

Date and Time of Visit

4 April 2018; 09.00am - 11.00am

Enter and View Representative

Sue Stone

Registered Provider

Riverbank Medical Centre

Type of Service

GP Surgery

Specialisms

n/a

Manager

Laura Dadds, Practice Manager

Acknowledgements

Healthwatch North Somerset Authorised Enter and View Representatives wish to thank Riverbank Medical Centre and in particular the staff, patients and the PPG at the surgery.

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. Riverbank 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

Riverbank Medical Centre is located within a large housing estate in Worle, Weston-super-Mare. The patients at this Practice can access a comprehensive range of services which includes:

- Asthma and Chronic Obstructive Pulmonary Disease
- Anticoagulant monitoring and dosing
- Travel Vaccines
- Child Health and development
- Baby Clinic
- Learning disability health check
- Primary Care counselling services
- Diabetes
- Cholesterol checks
- Hypertension
- Child Immunisations
- Family Planning
- Phlebotomy
- Smoking cessation clinic

The Practice is open Monday to Friday between 08.15 am to 6.30 pm. Telephone lines are open from 8.00 am to 6.00 pm. If patients go to the Practice to make an appointment,

these requests are accepted after 9.30 am due to changes to patient access (Patient On-Line).

In addition, the Practice is working with other local practices to offer more appointments in the early mornings, evenings or at weekends as part of the *One Care Improving Access*.

The number of patients registered with the Practice is approximately 9,855.

Planning for the visit

The visit was an announced visit with Riverbank Medical Centre Practice Manager being given two weeks' notice. We sent a confirmation of visit letter, a Practice Manager questionnaire, poster and leaflets to the practice to inform patients, relatives, carers and staff about the Enter and View visit.

As part of the planning the Enter and View Representative did some background research - online and out of hours.

How was the Enter and View Conducted?

One Enter and View Representative carried out the visit. The Enter and View Representative met with the Practice Manager at the start and at the end of the visit and was joined by the new PPG Chair.

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

The Enter and View Representative spoke to a few patients while carrying out the observations in the waiting room to explain the presence of the Healthwatch North Somerset. At the start of the visit the Practice Manager introduced the Representative to several staff.

The information and evidence detailed in this report is collated from speaking to the Practice Manager, staff, patients and the PPG Chair 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 the 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 and PPG Chair immediately before the Enter and View. Three prompt questions were 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?

- Recall system set up using a comprehensive set of searches on EMIS Web - Patients with chronic diseases such as asthma, diabetes, CHD are called up by the month of their birth. This has created one single point of communication with the patient rather than multiple letters for each separate chronic disease they may have.

When contacting the Practice for their appointment the patient is directed to an initial appointment with a Health Care Assistant to undertake a work-up - blood tests and other condition related tests - and followed up, where necessary, with the most appropriate health professional e.g. specialist Practice Nurse.

Interest for this recall system has been expressed through the EMIS Web Facebook page with dozens of practices nationwide having expressed an interest and requested further information.

- Re-Introduction of the patient led Musculoskeletal (MSK) Physionet service -Patients can choose option 0 on the surgeries phone system when they call if they have an MSK related problem. The Receptionist is then able to take the patient through a set questions and, if they meet the criteria, can be booked directly into an appointment with a Physiotherapist. Generally, appointments are available within two working days which demonstrates much shorter waiting times for these patients. Current waits for GP referral to MSK/Physiotherapy not using this service is approximately 12 weeks.
- Text messaging of results - Consent is currently being sought from all patients for who the Practice holds a mobile telephone number. This is to enable future plans to text test results to patients.

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

- Improvement made to telephone access to surgery, giving options to patients to direct their calls using “options” such as option 0 for the MSK service. A practice audit had revealed that some calls were running for over 20 minutes and that as a result were preventing other calls from entering the system. Directing calls more appropriately has seen a considerable drop in the time taken to deal with a call.
- Use of Health Apps - example given of the Bristol Children’s’ Hospital HANDi App wj offers simple and straightforward advice on what to do and who to contact when a child is unwell. It includes illness-specific home assessment guidelines for six common childhood illnesses

- Active PPG, every Friday am have a stand in the foyer at the Practice. The PPG has raised money for the Practice to purchase equipment to benefit the patients.

The PPG will be taking over the management of the noticeboards within the Practice to maintain the information available to patients.

- The Practice is currently going through a merger process with a larger group and are unable to make larger scale changes.

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

- Improve patient awareness that reception staff are not being "nosy" or overstepping their mark when asking for a reason for the appointment. They need this information to "signpost" the patient to the most appropriate service/person to deal with their specific problem/query.

- More awareness for patients on how to use services more appropriately such as the Minor Injuries Unit at North Somerset Community Hospital in Clevedon and when to use their pharmacy as their first port of call rather than the practice. Use of online information from NHS Choices and Health apps such as HANDi.

- Prevention of potential conditions through accessing an NHS Health Check.

- With the merger progressing explaining the opportunities and changes for the patients currently registered at the Practice. Key themes for the patients at Riverbank were around:

- General concerns around prescriptions, online services, not having to travel to other sites, keeping full service and reputation, does not become to impersonal/bigger is not always better etc.
- General Transport/Bus Service/Traffic
- Seeing the same GPs/Staff
- Availability of Appointments
- Parking

The opportunities of the merger:

- Resilience
- Call on a greater number of clinical and supporting staff
- Larger, more up to date premises and equipment
- Sustainability
- Greater range of services

Observations and Findings

The Enter and View Representative observed the following:

External Building Condition

- The medical centre is purpose built and was commissioned for use in February 1995 and designed at one level which provides good access for patients.

The Practice has a pleasant outlook and the area around the Practice is well kept and tidy. There is a designated car park for the Practice.

Internal Decoration, Cleanliness and Furnishings

- The internal standard of decoration, majority of flooring, signage for consulting rooms, reception and waiting rooms was good. One area of discolouration in the waiting room was noted and the Practice Manager explained that due to the imminent merger and the possible change of use of the building, remedial work had not been carried out.
- Toilet facilities for patients were clean and tidy.

Outside Riverbank Medical Centre

- The Medical Centre is located within a large housing estate in Worle. The signage for the Practice starts some distance away and continues to the road where the building is located. At the entrance to the Practice, there is also a large sign.
- The car park is a reasonable size and has one disabled space located right outside the entrance to the building. If the car park is full, patients/visitors to the Practice can park on the road.
- A bus stop is visible from the entrance to the Practice; however, it should be noted that due to recent changes made by the bus service provider no buses go to the Practice. Patients must walk from a bus stop on Wansborough Road which is a six minute walk.

Access to the practice

- As the building is purpose built the entrance is easily accessible and level.
- There are two doors that patients must negotiate to get to the reception area, both were easy to use and wheelchair/pushchair accessible. It was noted that the doors were not automated.

Reception Area

- The Reception Desk is directly in front of patients as they walk through the second entrance door.
- It was observed that the height of the desk was quite high, and the Representative noted that it may not be suitable for wheelchair users.
- There are no barriers separating the public from the receptionist.
- On the day of the visit there was one receptionist on duty, and the Practice Manager also dealt with a patient query in the area screened off for private conversations.
- All the staff the Enter and View Representative met at the Practice were approachable and friendly.
- All staff seen during the visit were wearing their ID badges.
- The display of waiting times is accessible to patients when they use the automated check in screens.

- No information relating to the GPs/nursing staff were observed, however full names and qualifications could be found by patients on the Practice website. Included in the list were the times that the GPs and Urgent Care Practitioners are available.
- The automated check-in is in the Reception area.
- During the visit the Enter and View Representative had not observed information about hearing loops. In discussion with the Practice Manager it became apparent that the sign had been removed from the main entrance door and stuck to the waiting room door. The Practice Manager also commented that the Practice in addition to the main loop at reception had purchased a mobile loop.

Waiting Room

- There is one large designated waiting room at the Practice which includes a conservatory area.
- It was observed that the area was closed off from the main corridor and reception desk therefore ensuring privacy for those in conversation at the reception desk.
- The seating was arranged in both rows and around the edge of the room, some of the chairs had arms which would aid patients who required support.
- The seats were in good condition with washable coverings.
- The Enter and View Representative noted that there was space to manoeuvre easily around the waiting room, however there was a notice asking for those with pushchairs to leave them in the foyer entrance.
- Signage for toilets were viewed in the main corridor and were at ceiling height.
- There are baby-changing facilities, however no signs indicating the location were observed.
- The flooring in the waiting room was carpet in the main body of the room and lino in the conservatory area. It was observed that there were several marks/stains in this area and the Practice Manager was aware of these. However due to the possible change of use of the building remedial work had not been carried out.
- There is a plumbed in water dispenser in the waiting room for patients use.
- There was a designated children's area with books.
- Within the conservatory area it was observed that the Blood Pressure machine, height and scales were behind located behind a screen, which would allow patients a level of privacy when using the equipment.
- The Enter and View Representative noted that there was very little noise in the waiting room. Having the door closed helped with shutting out conversations in the Reception area.
- There was clear guidance for patients to let reception know that they had arrived.
- During the Enter and View visit several consultations were taking place. The system in place to call patients to the rooms was through the TV screen which displayed the name of the patient/room to go to. There was also a spoken prompt with these details.



- It was also observed in the corridor leading from the waiting room/reception to the consulting room an area that had been given over to a local primary school. From the information displayed Year 3 pupils were learning about skeletons and muscles. Each of the pupils produced their own patient information leaflets.

Information Boards/Leaflets

- The Enter and View Representative was unable to locate an example of the Practice Mission Statement, however after the observation this was discussed with the Practice Manager one was shared and added to the notice board in the waiting room.
- It was observed that all the information provided was relevant to health/social care and in date. The Enter and View Representative was also informed that the PPG will shortly be taking over the management of the notice boards to ensure they are kept tidy and up to date.
- The Patient Participation Group (PPG) was advertised in the waiting room and they also had their own board in the reception area.
- No Family and Friends information was visible.
- Healthwatch North Somerset posters were on display.
- A comment box was available on the reception desk, though no forms were evident. This was immediately rectified by the Practice Manager.
- In the waiting room there was an information poster about complaints and this included information about NHS England Customer Services should complainants not wish to speak directly to the Practice they could go to NHS England.
- Information about translation services was not visible and the Practice Manager explained that this information is recorded when patients registered. If required the Practice has access to Language Line.
- There is a designated Carers' Board.
- The PPG is to take over the "you said, we did" board and has its own tell us what you think form.
- Information about on-line appointments is located at Reception, and the receptionists are active in promoting to patients.
- It was observed that the waiting room had a designated Data Safety board and a Health Campaign board.



Patient Contact

- During the visit the Enter and View Representative spoke with a few patients and explained what the visit was about. One commented that he was very happy with the Practice and had always received a good service and was well treated.

Communication with the Manager at end of Visit

At the end of the Enter and View visit the Representatives met with the Practice Manager to clarify any issues that were unclear or had been noted. There was an opportunity to walk

through the patient areas with the Practise Manager. The Representative was able to discuss the points not immediately clear from the observations made.

- Hearing loops signs - these were located as they had been moved from the original place and reinstated.
- Signs for baby changing facilities - a sign was actioned.
- Flooring in the conservatory/waiting room - Practice Manager explained about change in use of building and was unable to make any large-scale changes to the facilities.
- Practice Mission Statement - printed off, laminated and put up in waiting room.
- No forms for the comment box - this was actioned by the Practice Manager.

Good Practice

- Building relationships with local primary school using the curriculum and information about health and wellbeing.
- Recall system set up using a comprehensive set of searches on EMIS Web to ensure patients with multiple conditions visit once for annual review on the month of the patient's birthday. This is for patients with chronic diseases such as asthma, diabetes, CHD and created one single point of communication with the patient rather than multiple letters for each separate chronic disease they may have.
- Re-Introduction of the patient led Musculoskeletal (MSK) Physionet service. Patients can choose option 0 on the surgeries phone system when they call if they have an MSK related problem. The Receptionist is then able to take the patient through a set questions and, if they meet the criteria, can be booked directly into an appointment with a Physiotherapist
- Use of Health Apps such as the Bristol Childrens' hospital HANDi App offers simple and straightforward advice on what to do and who to contact when a child is unwell. It includes illness-specific home assessment guidelines for six common childhood illnesses

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 along with the opening hours of 8.15 am to 6.30 pm
- Information was provided to the patients if they needed urgent or advice, both the 999 and NHS 111 phone numbers were given. Callers are also advised that calls to NHS 111 are 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 is accessible in full from both a laptop/PC and iPad/Smartphone. To the review the website the Enter and View Representative used a laptop.
- The opening hours of the surgery on the webpage were the same as the out of hours ansaphone.

- Information about out of hours is provided, however patients must scroll through a lot of information to locate the out of hours details. It took several attempts by the representative to locate the information.
- The NHS 111 logo was located after scrolling through the website home page, patients can click onto it and it takes you to the NHS Choices webpage for NHS 111.
- If the patient required information about raising a concern it is not easy to locate the information. The Representative had to use the search function. Once located the information was found in the Suggestions page. Here patients are informed that the Practice delivers an in-house complaints system. There is also a link to NHS Choices website, the link however appears not to provide patients with further information relating to complaints.
- No forms or patient information relating to complaints or concerns are available to download.
- The Representative was not able to locate details on how to register with the Practice as a new patient, there is a reference to the GMS1 Registration Form for download.
- To locate the catchment area for the Practice there was a need to use the search facility. The map is clear and allows the patient to have an idea if their address is within the boundary. To receive confirmation a phone call to the Practice is required.
- If a patient wanted to speak to the Practice Manager there is no direct line, calls would be via the main phone number for the Practice.
- Although the Representative found the colours and definition of the webpages to be clear, there was a lot of scrolling though to find the information required to complete the mystery shopper. Also, to locate specific information the search facility had to be used.
- It was also noted that the website provider has placed several advertisements on many of the webpages and the Representative found that some of the links are no longer active and details of useful phone numbers were in the main for Bristol.

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:

- Complaint pages on website to be updated to reflect information available to waiting room which gives patient options if they did not wish to speak directly to the practice.
- Signs for the baby changing facilities to be put up. The Representative commented that these were actioned on the day of the visits.
- Lack of comment box forms - actioned of the day of the visit by the Practice Manager.

- To share the practice mission statement through a display in the waiting room/webpage

Provider Response

- Dear Karen
Thank you for your email and the collation of such a comprehensive report. I can confirm receipt of the report. If I may make a couple of minor changes I would be grateful.

Page 5. End of first paragraph. Just to explain our reasoning behind this change, it was a supported move so as not to disadvantage those patients who are unable to attend the practice in person. This change has been supported by CQC.

Kind regards

Laura

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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