



Enter and View Report

Tower House Medical Centre 20th March 2018





Details of the Visit

Location Stock Way South, Nailsea, BS48 2XX

Date and Time of Visit 20th March 2018. 14:00 - 16.00

Enter and View Representative Shirley Rainey and Amel Moussaoui

Registered Provider Tyntesfield Medical Group

Type of Service GP Surgery

Specialisms N/A

Surgery Manager Kat Harris



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Acknowledgements

Healthwatch North Somerset Authorised Enter and View Representatives wish to thank Tyntesfield Medical Group and in particular the staff and patients at Tower House Medical Centre.

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. Tower House Medical Centre was selected as part of our series of North Somerset GP Enter and View visits 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 North Somerset Enter and View visit are referred to the service provider and appropriate regulatory agencies for their rectification.

This report relates 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:

Tower House Medical Centre is part of a group of four GP Practices that make up the Tyntesfield Medical Group which has 33,000 patients registered with them. Situated in the middle of Nailsea in North Somerset Tower House Medical Centre opens from 08.00 -18.30 Monday to Friday and has pre-booked appointments on Saturdays.

Planning for the visit

The Enter and View visit was an announced visit with the Tower House Medical Centre Practice Manager being given two weeks' notice. We sent a confirmation of visit letter, posters and leaflets to inform patients, relatives, carers and staff about the Enter and View visit and about the role of Healthwatch North Somerset. The timings of the visit were at the request of the Practice, but we found that on our visit the Surgery was quite quiet. 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 visit conducted?

Two Enter and View Representatives carried out the visit. The Enter and View Representatives met with the Practice Manager at the start and at the end of the visit.

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

The Enter and View Representatives observed during the two hours but did not interview any patients directly. The information and evidence detailed in this report is collated from speaking to the Practice Manager and the Enter and View Representatives own observations.

The Enter and View Representatives 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 Representatives 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 Representatives. The report was compiled and written based on the notes and records of the visit.

Communication with the Manager

The Enter and View Representatives met with the Practice Manager immediately before the Enter and View visit. 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?

- Recently there has been heavy snowfall. We used social media to contact people who we knew had 4x4 vehicles.
- We also used the electronic appointment reminder system 'mjog' to notify patients of the bad weather, possible impact on surgeries and appealed for patients with 4x4 vehicles to assist if possible.
- We used our joined-up telephone system to ensure that we had staff available to deal with all calls - even if they couldn't get in to their normal place of work.

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

- Patients requested high chairs for those who found it difficult getting out of the lower chairs - three chairs were purchased, two for the ground floor and one for the first floor.
- Patients suggested adding the 13.30 pickup / drop off time for samples to the ample instruction sheet. The form has been amended to include these times.

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?

None were given.

Observations and Findings

The Enter and View Representatives observed the following:

External Building Condition

The Surgery is entered through a public car park. There are Disabled Parking spaces directly outside the entrance to the Surgery, and these although not belonging to the surgery, are clearly marked and allow three hours free parking. The Practice Manager indicated that there were no concerns about patients not being able to access parking.

The premises looked clean and in a good condition.

Attached to the premises is an independent pharmacy.

Internal Decoration, Cleanliness and Furnishings

The internal decorations were clean and appropriate to the Surgery needs.

Outside Tower House Medical Centre

- The signage for the building is clear and can be seen from a distance.
- There are two bus stops within walking distance of the Surgery.
- There is a sloped area allowing easy access for wheelchair/pushchairs.
- The entrance door was easy to use with automated disabled access.

Reception Area

- The reception area was bright with an open two-level desk. As the Surgery has two floors, the reception area is built as an atrium.
- There is a sign informing patients that should they require a confidential discussion they can request this and a room would be organised.
- When sat upstairs in the waiting area it is possible to overhear all the conversations taking place at the reception area downstairs, screens around the upstairs area do slightly help to improve confidentiality.
- During the Enter and View visit there was one member of staff at the reception desk (staff did change during the visit) but the surgery was not busy and at no time did we see more than two people queuing.
- Reception staff were not wearing name badges, but we saw badges on other members of staff; the badges allowed access to other areas within the surgery.
- Patients were directed to sign in at the electric sign in board.
- There was sanitising hand gel close to the sign in board.
- The staff on duty during our visit were very approachable and friendly.
- A board was displayed indicating the staff and GPs present, but no photographs were seen.

Waiting Room

- There are two waiting areas, downstairs and upstairs; with a lift for accessibility to the upstairs waiting room and surgeries.
- Each area had a television with ongoing information and this was used to call patient for their appointments.
- Downstairs, the chairs were plentiful with washable seats, some had armrests and they were all in good condition. Upstairs the chairs were situated around the edge of the room.
- There was plenty of space, so patients were able to manoeuvre pushchairs or wheelchairs around the waiting rooms.
- There were clean, well signed toilets downstairs, with baby changing facilities. Upstairs there was a disabled toilet.
- Flooring downstairs was laminate flooring and carpeted flooring upstairs; both areas were clean and the flooring was in good condition.
- Drinking water was not provided. The Practice Manager confirmed that this was because of health and safety concerns but patients could ask at reception for a glass of water.
- The atmosphere in the waiting rooms was quiet with background music.
- There was a sign on the reception desk indicating that a Hearing Loop was available.

Information Boards/Leaflets

- In the downstairs waiting room there were clear information boards. The notices were relevant and up-to-date.
- The Practice mission statement was clearly displayed.
- There were patient information leaflets available (comments, complaints and suggestions).
- Information about the Patient Participation Group was displayed.
- A Tyntesfield Medical Group Winter newsletter was noted.
- Friends and Family tests were displayed asking patients 'How likely are you to recommend Tower House Medical Centre to your family and friends'?
- There was a Comment Box.
- Translation services were not advertised, but the Practice Manager confirmed that they were advertised on the website.
- There was a large informative Carers Board in the Patient Resource Room

Patient Contact

- A TV screen was used downstairs to display next patient appointments with GP name and room information. Upstairs patients were called into their appointments by the clinical staff.
- The electronic sign in screen gave the patient information about their appointment. A notice in the waiting room stated that 'You should be aware of waiting times and you should ask the receptionist if you have been waiting for more than 20 minutes'. A patient mentioned that he was unaware of how long he would be waiting and this was raised with the Practice Manager afterwards.
- The surgery has a Patient Resource Room, which included equipment for taking blood pressure and information boards

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. These included:

healthwatch

- Waiting times displayed/ patients informed of delays. Patients are told by the reception staff if they are likely to have a longer wait.
- Information about translation services: These are displayed on the web site.
- No 'you said, we did' board was observed: No board available as wall space limited.
- Provision of drinking water: Not provided due to Health and Safety concerns, but patients can ask for a drink at reception.

Good Practice

- The Medical Centre's Patient Resource room was excellent
- The Medical Centre have set up a volunteer scheme that not only provides transport but is also used to support other patients.

Out of Hours

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

- The name given was for Tyntesfield Medical Group and not Tower House Medical Centre. This is because it is a shared telephone system.
- The Practice opening hours were not given.
- Out of hours callers were advised to call NHS 111 or 999 in an emergency if they needed medical assistance. No information was given regarding NHS 111 being free to call.
- There was no message to advise that patients could not leave a voicemail.

Review of the Practice Website

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

- The website was viewed on an iPad and was a truncated view with four tabs in the first instance.
- It took a little while to find the out of hours contact information for NHS 111 on the truncated site, it was found under 'contact' and then on the bottom line under each individual Surgery address. There was no information about calling 999 in an emergency.
- You can access the full website by clicking 'Main Site' to access the full website for the Tyntesfield Medical Group.
- On the main website under the main tabs that run across the top, you can click on a drop-down list for information about the individual Practices in the Tyntesfield Medical Group. There is also a sub tab list on the right-hand side of the website page.
- The opening hours are available on the main website under each Practice.
- There was a rolling ribbon on the front of the website which supplied information, among other items, about who to contact out of hours.
- Under the opening hours tab that runs across the top of the website page, there is also information about who to contact out of hours; accessed by clicking on a drop-down list. The information provided included walk in centres, 999 and 111 telephone numbers.
- The website does not mention that it is free to contact NHS 111 and 999 or to go to a Walk in Centre.

- You can see the NHS 111 logo on the bottom of the web page, and when you click it takes you to NHS Choices out of hours information page.
- A Google Translate option with a list of languages is on the sub headers running down the side of the page.

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 Representatives' observations and feedback received.

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

- Appointment waiting times could be more clearly advertised for patients.
- A notice to advertise the provision of translation services.

Provider Response

No provider response received

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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