



Enter and View Report

**Longton Grove Surgery
18th January 2018**



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Details of the Visit

Location

Longton Grove Surgery, 168 Locking Road, Weston-super-Mare
BS23 3HQ

Date and Time of Visit

24th January 2018

Enter and View Representative

Vicky Marriott

Registered Provider

Longton Grove Surgery

Type of Service

GP Surgery

Specialisms

N/A

Surgery Manager

Eloise Poynter

Acknowledgements

Healthwatch North Somerset Authorised Enter and View Representatives wish to thank Longton Grove Surgery and in particular the staff and patients at the Practice.

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. Longton Grove Surgery 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

Longton Grove Surgery is situated in a purpose built medical centre housing two GPs and a pharmacy on the outskirts of Weston-super-Mare in North Somerset. It is the main site for the Practice which has a branch surgery open for half days at Locking Village Hall. Longton Grove surgery moved from premises in a Victorian building in the centre of Weston-super-Mare in 2014.

The surgery opens at 8.00am on four weekdays and 7.30am on a Wednesday. It closes at 6.30pm on Wednesday, Thursday and Friday and 7.30pm on Monday and Tuesday. It is closed on the weekend.

Planning for the visit

The visit was an announced visit to the Longton Grove Surgery, with the Practice Manager being given two weeks' notice. We sent a confirmation of visit letter, 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 timings of the visit for 9.30am was requested by the Practice Manager and the surgery had at least 30 patients arriving for services during the period observed.

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

How was the Enter and was Conducted?

One Enter and View Representative carried out the visit. The Enter and View representative met with the Surgery Manager at the start of the visit and discussed the answers to the three prompt questions. The Manager was unavailable when the Enter & View representative was ready to leave the surgery after the observation was completed.

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 patients but did have a conversation with administrative staff and the receptionist. 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 the findings recorded?

Comments and quotes were recorded by the Enter and View Representative whilst observing the Practice and engaging with the Surgery 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 Surgery Manager 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?

- The surgery has worked to establish high levels of continuity for patients. This is one of the surgeries core values and the GPs hold personal patient lists and reception staff encourage patients to see their own doctor. This means the doctors can run their appointments systems more efficiently.
- The surgery offers high levels of access to GP appointments which is again one of the surgeries core values. The reception will only book appointments up to two weeks in advance which they say reduces the wait for an appointment.

- ❑ The surgery has low levels of patients using out-of-hours services - as a result of the continuity and access as above.
- The surgery works hard to create a happy staff culture and has low staff turnover. The staff are therefore familiar faces to patients, are experienced, well trained and morale is high.
- The surgery set up a successful lifestyle programme (at first, offering group sessions and then individual ones) for patients with pre-diabetic symptoms or already on their diabetic programme. Dr Haggerty was responsible for involving Public Health, Community Health Trainers and other allied professionals. They are now evaluating the programme and have begun training other GP Practices to carry out this kind of programme.
- The surgery has been leading in the locality on improving diabetic care. Using the services of a Chronic Disease Nurse, Consultant Endocrinologist and a GP they have been running virtual clinics to upskill other practices to improve care.
- The surgery are offering an Ear Syringing clinic, instead of individual appointments with a GP for this. They can provide the service for more patients this way and the appointments can be shorter and more efficient.
- The purpose-built site has provided rooms for additional services and clinics for other patients, as well as the surgery patients. They offer retinopathy, a dietitian, AAA screening, Minor Operations, Leg Club, Midwifery and Positive Step.

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

- Waiting rooms chairs with arms have been provided in response to patient feedback
- The surgery is starting a newsletter for patients.
- The surgery has increased turnaround of prescriptions to 72 hours and has worked to cut down concerns over repeat prescriptions and volume issues.
- The surgery are hoping to bring in text messaging through the EMIS system to remind patients of their appointments.
- The Patient Participation Group meets quarterly.
- Feedback forms and a drop box asking patients to 'give us an idea' are positively received.

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?

- The surgery would like their referrals to secondary care to be fast and effective, but they have little control over the criteria set by secondary care for patient accessing services or waiting times for those services.
- The surgery provides access to a wide range of additional services already (see above).

Observations and Findings

The Enter and View representative observed the following:

External Building Condition

- Longton Grove Surgery is on the second floor of a purpose built medical centre, which houses another GP Practice, a pharmacy and Brisdock offices.

Internal Decoration, Cleanliness and Furnishings

- The surgery has examples of community art up on the walls and hallways which provides an inviting and welcoming atmosphere.
- The surgery name is clearly marked at the ground floor entrance, and at the top of the stairs, outside the lift and behind the reception desk. There is also a welcome sign on the wall (despite this one patient had clearly come to the wrong GP Surgery and had to be signposted to the floor below).
- There is the option of taking the stairs or using a large lift to the 2nd floor surgery. Exiting the lift and stairs brings the patient into the entrance which is open plan.
- Internally the building was observed as very clean and with a modern bright decoration using wood and warm colours. The waiting room was observed as being clean, bright and roomy.
- The waiting room is adjacent to reception and the rest of the treatment, clinic, administration and meeting rooms run off a long wide corridor to one side of the patient area. Double doors into the waiting room area from this corridor were pinned back to join them together, allowing doctors and nurses to cross into the waiting room to call their patients. There was plenty of space for wheelchairs and buggies to move around the surgery areas including into the baby changing and toilet facilities.

Outside Longton Grove Surgery

- The medical centre building is painted blue and stands out on the busy main road.
- The signage for the surgery and the car park is clear on the road.
- There are bus stops on both sides of the road, about 200 yards from the door of the building. There is a crossing in front of the building.

Access to Longton Grove Surgery

- This building has its own car park with disabled spaces and there is parking in the nearby roads. At 9.15am there were two spaces available out of the 30 possible spaces. A level path runs around the side of the building from the car park and provides a ramp for access into the main entrance on the ground floor.

Reception Area

- The long reception desk was at two levels providing a user friendly area for wheelchair users.
- On the day of the Enter and View visit there were two staff at reception which appeared to be adequate for the patient flow and to answer phone calls. The Enter and View Representative did not observe a queue at any point during the visit with one patient waiting at the most two minutes.
- The staff wore ID badges and all were observed being very welcoming, helpful friendly and patient.
- The long reception desk ran at right angles to the waiting area, and despite being open plan provided sufficient privacy if the patient was speaking at the furthest end away from the waiting area. No conversations could be overheard in the waiting room.
- The Enter and View Representative found two hearing loop signs, one at reception and one in the waiting room area. Checking with the receptionist she confirmed this was still available.
- A mission statement was attached to the wall opposite reception.

Waiting Room

- ❑ There was an electronic sign-in screen with sanitiser gel available next to it. The electronic sign-in also gave patients information about delays to their appointment. The receptionist said that in certain circumstances this would also be announced in the waiting area.
- The waiting room chairs were facing forward in rows with others at the perimeter. They were clean and bright and plenty were available.
- Some of the chairs had arms for leverage.
- The relevant HWNS Enter and View posters were displayed clearly.
- A table at the front of the room had Friends and Family patient feedback forms and a sign asking 'got an idea under your hat?' with a comment box nearby.
- A TV screen on the wall at the front of the room displayed regular health or awareness messages and background music could be heard.
- There were children's books and also magazines and other reading material available.
- There was plenty of room to enter and manoeuvre wheel chairs/pushchairs or park these in the waiting room area. There were no closed doors into the waiting area which made access easy. The corridor to the consultation and treatment rooms were wide and clean.
- A double doorway into the treatment corridor had the doors pinned back.
- The flooring was wooden and in good order.
- The clinical staff called and welcomed patients from the open double doors at the entrance to the treatment corridor, using friendly words and using first and second names and not using the more formal titles of Mr, Miss or Mrs.
- The Enter and View Representative observed that patients did not appear to wait for much longer than a few minutes, with one waiting about 10 minutes for their appointment.
- Toilets were clearly marked for men and women and baby changing facilities but not for disabled access. This is because the toilets have wide doorways, grab rails and low sinks
- The walls of the waiting room had posters, information and leaflets on health and social care. A small number of leaflets, such as one about No Smoking Day was out of date (2016), but others were up to date.
- The Enter and View Representative discussed with the receptionist that there was no visible information regarding translation or information being available in different formats. The receptionist advised that if when a patient registers with the surgery and this is identified the staff provide this translation and give the patient double appointments with a GP. Having looked on the website there is information in other languages available but the availability of alternative formats for leaflets were not advertised.

Information Boards/Leaflets

- There was a board displaying the Surgery GP's, Nurses and other staff names and photographs.
- The Practice Mission Statement was displayed opposite reception.
- Some Healthwatch North Somerset information leaflets were displayed but not the 'Share Your Story' ones.
- Patient Reference Group information was displayed.
- Information on Patient Access on-line services is displayed.

- There was no 'You Said We Did' board.
- There was information available on how to make complaints.
- Friends and Family Test forms and a comment box was available.
- The latest CQC report was displayed.
- A Carers Board was seen in the wide corridor providing details of support for all types of carers including children. Carer rights were clearly displayed. However some of the contact details provided were inaccurate as they are out of date.
- DiY chlamydia test kits were available in the women's toilets.

Patient Contact

- The Enter and View Representative observed that the receptionist was helpful and polite to the patients who went to the reception desk. One mother who became exasperated by her active toddler while waiting for about 10 minutes was engaged with by staff who were patient, kind and tolerant.

Communication with the Practice Manager at the end of the visit

The Manager was unavailable when the Enter & View representative was ready to leave the surgery after the observation was completed.

Good Practice

The Enter and View observation found good practice throughout the surgery, including hand sanitiser at the electronic check-in, clear guidance from staff and the use of well -placed signs, adequate staff on duty to answer telephone and deal with face to face enquiries and a professional but informal way of calling patients using first and second names rather than Mr Mrs or Miss. The practice layout had been designed to ensure it is user friendly and accessible. The surgery had listened to patient feedback and had provided a number of seats in the waiting area with arms. Patients waiting for their appointments are provided with opportunities to feedback ideas, offer anonymous comments, find out about patient involvement and see on-screen advice about health and care issues.

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: -

- When calling the surgery out of hours, the answering message mentioned the surgery name.
- Surgery opening hours were given as 8.00am-6.30pm, so did not mention the two late evening appointments that are possible until 7.30pm and the 7.30am opening time on Wednesdays.
- Callers are given clear information on who to phone - NHS 111 for general non-life threatening illness/or if they cannot wait for the GP surgery to open; or 999 for life threatening/emergency.
- The caller is not informed that the calls to NHS 111 are free.
- No voicemail options are available to leave messages.

Review of the Practice Website

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

- When searching using the search engine Google for Longton Grove Surgery, the practice comes up at the 1st ranking.
- Accessing the website on a PC or laptop takes the patient to the full desktop website. If using an iPad or mobile a truncated view is opened which offers news, home, opening times and contact details. A further option is the main site and when selected opens the full website.
- In the truncated view under the options:
 - News - Patient newsletter January 2018
 - Home - brief description about the practice, its commitment to providing excellent access and continuity of care and its range of clinics to manage chronic disease
 - Opening times - and an addendum saying when telephones are manned and that patients can book appointments later in the evening on Mondays and Tuesdays between 6.30pm and 7.30pm.
 - Contact Details - Name and address for both the main site and branch surgery, telephone/fax numbers, Health Visitors/District Nursing, Out of Hours ie NHS 111.
- The main website is fairly easy to navigate, there a number of tabs which can be clicked on for information. On the home page there is a navigation pane on the left which gives quick links and further information. The Enter and View Representative was unable to locate a direct line for the Practice Manager.
- The website holds more information about the opening times than the answaphone message.
- The website gives of hour's information which is accessible by using the tab Opening Hours.
- The patient is informed that the 111 service is free to call.
- There is a 111 logo on the home page, if clicked this logo the takes the patient to the external website of NHS Choices and the pages give full details of the 111 services. It was noted that this web page has patient information leaflets in easy to read and different languages.
- If a patient wanted to raise a concern or complaint the information is easy to find by navigating from the home page and forms can be downloaded from a link. The complaint form includes a section on consent. The details in the leaflet gives the options to speak to SEAP/Independent Complaints Advocacy or NHS Commissioning Board if they do not want to speak to the Practice directly.
- A recommendation for this leaflet would be to update the NHS Commissioning Board which is now called NHS England and review the section "Taking a Complaint Further". This suggests that the complaint should go to NHS England if they are unhappy with the Practice response. The steps for a complaint if they are unhappy with response is to go directly to the Parliamentary Health Service Ombudsman

Recommendations

The Healthwatch Enter and View representative did not meet Practice Manager at the end of the visit therefore recommendations are provided acknowledging that these may have been resolved at the time of the visit.

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:

- Review and update the carers sign board information
- Update information leaflets in patient waiting area
- Review and amend the patient information provided on the website for those raising concerns/complaints
- Provide a "you said, we did" information board
- Make it obvious that information can be provided in a range of other formats
- Provide opening hours accurately on the telephone message.

Provider Response

- No comments were 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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