



Enter & View Report

Barrow Health Centre

7 July 2015



Report Details

Address	Barrow Health Centre 27 High Street Barrow upon Soar Loughborough LE12 8PY
Service Provider	Dr NHR Simpson's Practice
Date and time of visit	Tuesday 7 July 2015 8.30am-11.00am
Authorised representatives undertaking the visit	1 - Visit Leader 2 - Authorised Representatives 1 - Staff Lead

Acknowledgements

Healthwatch Leicestershire would like to thank the service provider, patients and practice staff for their contribution to the Enter & View Programme.

Disclaimer

Please note that this report relates to findings observed on Tuesday 7 July 2015. Our report relates to this specific visit to this service and is not representative of the experiences of all service users and staff, only an account of what was observed and contributed at the time.



What is Healthwatch?

Healthwatch is the independent consumer champion created to gather and represent the views of the public. We have significant statutory powers to ensure the voice of the consumer is strengthened and heard by those who commission, deliver and regulate health and care services.

What is Enter & View?

Part of the local Healthwatch Programme is to carry out Enter & View visits. Enter & View visits are conducted by a small team of trained volunteers, who are prepared as 'Authorised Representatives' to conduct visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvements.

Enter & View is the opportunity for Healthwatch Leicestershire to:

- Enter publicly funded health and social care premises to see and hear consumer experiences about the service
- Observe how the service is delivered, often by using a themed approach
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives
- Observe the nature and quality of services
- Collect evidence-based feedback
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners.

Enter & View visits are carried out as 'announced visits' where arrangements are made between the Healthwatch team and the service provider, or if certain circumstances dictate as 'unannounced' visits.

Enter & View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.



Purpose of the visit

- To gather patient views of the service provided at Barrow Health Centre.
- Capture the experience of patients and any ideas they may have for change.
- To look at a number of key themes; reception and waiting areas, information available to patients, patient facilities and access to services.
- To observe patients engaging with the staff and their surroundings.

Strategic Drivers

- Access to services are a local Healthwatch priority.

Methodology

This was an announced Enter and View visit.

We approached the Practice Management Team before we spoke to anyone in the Health Centre who advised us that we had access to the patients and the communal areas during our visit.

Authorised Representatives asked patients about their experiences of the Health Centre and completed 53 patient surveys. (The findings of which can be found in Appendix 1 and inform recommendations in this report). They explained to everyone they spoke to why they were there, left them with a Healthwatch Leicestershire leaflet and took notes.

A large proportion of the visit was also observational, involving the Authorised Representatives observing the surroundings to gain an understanding of how patients engaged with reception staff and the facilities.



Summary of Findings

- Making appointments is an issue for patients and they do not understand the appointment booking system
- Patients reported that the telephone often cuts out while they are waiting in the queue to make their appointment
- There were mixed opinions about the reception staff and patients described some receptionists as being rude and abrupt and other receptionists as extremely helpful
- The majority of patients were unaware of the Patient Participation Group and what it does
- The waiting area was smart and clean with ample chairs for patients
- The disabled toilet was not suitable for an independent wheelchair user

Result of Visit

Location

The Health Centre is well signposted from the main road.

There were 44 car parking spaces including parking for two emergency vehicles, one doctor parking space and staff parking spaces. There were no car parking spaces for disabled drivers. We noted that the car park surface was damaged in places.

There is a pharmacy approximately 12 metres from the Health Centre.

Reception and waiting areas

The Health Centre opened at 8am and we noted that there were three people waiting outside at 7.35am.

By 7.55am there were 14 people (including a baby) waiting outside. The Health Centre opened promptly 8am and the patients were seen to and clear of the reception area by 8.10am.

The main entrance was wide with two automatic entrance doors. The Health Centre is all on one level. We saw wheelchair users accessing the building with ease and there was enough room for electronic wheelchairs to manoeuvre.

On entering the building, we observed patients checking themselves in for their appointment using the 'System One' self check in machine which is at eye level on the wall. We noted that there was no antiseptic hand sanitiser near the sign-in screen. Near to the sign-in screen were notices reading; 'Please remember, one appointment - one problem', and 'If you are more than 10 minutes late you will be asked to rebook'.



The waiting area was smart and clean. Although small, the space was well used with comfortable chairs some with arm rests. The chairs were facing away from the reception desk and facing either the display screen or children's play area. However, some chairs were very close to patients standing at the reception desk. The waiting room looked onto a patio area that has flower planters.

There was a notice requesting patients to queue at a distance from reception until a position was vacant. We observed patients respecting other patients' privacy and waiting to be called to reception.

Sound reducing boards on the reception desk separated each receptionist's position. Some patients commented that when they are in the queue it was sometimes difficult to see which desk they were being called to.

A TV screen was used to call patients with a clear audible chime to attract their attention. No other messages were displayed on this screen. One TV screen near reception was not in use.

Direction signs to clinical rooms were displayed clearly.

Access to services

Patients told us that due to poor experiences of telephone appointments they had taken the option of booking in person. They are often waiting 20-30 minutes for their call to be answered. Patients who had to take children to school or commuted to work expressed their frustration of an inefficient telephone booking service.

Reception staff came under greatest criticism for demonstrating inconsistent customer service with some strong negative comments from patients. Patients told us that some of the non-clinical staff were not helpful or understanding.

Patients also told us that some receptionists are rude and ask information about patients' medical history when they make appointments on the telephone and in the open plan area without any privacy to their conversation. Patients told us that they resented having to share personal medical details with reception staff to secure an appointment and some patients felt there was no patient confidentiality.

There was no obvious area for privacy away from the reception desk or a notice for patients to request this option.

We observed a cleaner with a dry floor mop cleaning the floor in the reception and office area working around the staff. We noted that the cleaner would be able to hear the interactions between the receptionists and the patients, which could compromise patient confidentiality.

Information available to patients

The small notice board was accessible and tidy. There was an additional leaflet rack situated behind a row of chairs, which were occupied most of the time during our visit.

There was no information about the Patient Participation Group (PPG) on the notice board, although there was a heading for the group.

There was no information about the appointments systems and means of booking on the notice board. Patients said that they did not have information about appointment times and booking systems, NHS 111, health problems the nurses can assist with or the PPG.

A NHS Friends and Family test box was in a clear position on the reception desk. A hand sanitiser was on the reception desk but we noted it was empty.

Patient facilities

The male and female toilets are located in the waiting room. The toilets are functional but could be modernised. In the ladies toilet the notice on washing hands was dirty and placed on the worktop next to the sink.

There are no signs to the disabled toilet. The disabled toilet door hinged inwards which did not leave enough space for an independent wheelchair user to enter and close the door. There was no emergency pull cord in the toilet and a person in a wheelchair would not be able to reach the light switch or pull the toilet chain.

A self-service blood pressure kit was available for patients to use.

A hearing loop system is installed.

Additional Findings

We were introduced to the Interim Chair of the PPG who seemed very involved with the Health Centre and had a good working relationship with the Practice Manager. The PPG is planning an Annual General Meeting in September and all the practice staff and patients will be invited to the meeting.

Patients raised worries about the number of new houses being built in the area and were concerned how this would affect their GP services.



Recommendations

1. Consider how to reduce or avoid the need for receptionists to ask patients for personal medical information when booking appointments.
2. Review the guidance given to receptionists on when and how they ask patients for personal medical information.
3. Consider ways of improving privacy for patients who want to speak in confidence to receptionists.
4. Consider changes to the appointment system with improvements on how patients can use the existing system:
 - Flexible appointment system to meet patient needs
 - Address technical issues with the telephone system.
5. Review the patient noticeboard and leaflet rack positioning within the waiting room and review the information displayed on the waiting room noticeboard and TV display screen in order to keep patients informed about the appointment system, out-of-hours options and other facilities.
6. We recommend a more 'patient choice' style to the 'One appointment - one problem' notice, such as; 'If you have more than one health problem, please ask for a longer appointment'.
7. Provide hand sanitisers near the sign-in screen.
8. Review how the disabled toilet can be made more easily accessible for independent users.
9. Consider re-surfacing the car park and allocating two disabled spaces near the entrance.
10. Include information about the PPG, meeting dates and members on the notice board so that patients know how to get involved and share feedback.

Service Provider Response

This report was agreed with Barrow Health Centre as factually accurate.

They have provided the following responses to the recommendations.

1. The receptionists are asked by the clinicians to ask this question to enable the patient to be directed to the right clinician as we have 4 minor illness prescribing nurses who can see and treat patients accordingly which in turn frees the doctors for the more urgent cases. We recognise our nurses' services could be promoted more efficiently to our patients who we feel will then understand the need for the request to give a brief reason for their visit.
2. Our staff are continually engaging in learning and training and currently we have an expert in Customer Service Training coming into the surgery at the end of August to deliver specifically to our reception team.
3. This is again something we discuss with our staff at each monthly staff meeting and are looking into ways in which we can reduce this, asking staff to take the patient into a quiet room if this is required. We have also discussed the idea of a privacy booth or making our reception desk more private however we do not own the building it is an NHS property and any changes would be in consultation with them.
4. This is ongoing with our staff whereby we will be visiting other surgeries in the area and observing their systems with a review to compare to ours and improve where necessary.

The calling system has now changed. Now when patients call instead of sitting in a long calling queue (sometimes 25 callers) the calling queue is reduced to 7 callers, if you are the 8th plus caller you will hear an engaged tone, or depending on your telephone provider hear the message this number is currently unobtainable or this number is busy please call back. This ensures the patient is now not in a long calling queue and reducing their telephone costs and indicates to them to call back in a few minutes.

5. This was discussed at the last staff meeting and we are currently looking into ways we can utilise the TV screen through our back office IT support. The leaflet rack now does not have any chairs in front of it to ensure easier access for all patients. The PPG have been informed of their services to be best displayed via the noticeboard regularly.
6. We have now re-worded our notice and encourage patients with more than one health problem to book an afternoon appointment where possible.
7. We are in the process of installing a hand sanitiser on the wall next to the screen.
8. We will alert NHS Property services to this as we do not own the building so has to be done in consultation with them.
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Distribution

The report has been distributed to the following:

- Barrow Health Centre
- Care Quality Commission (CQC)
- Leicestershire County Council (LCC)
 - Adults & Communities
 - Health & Wellbeing Board (HWBB)
 - Overview & Scrutiny Committee (OSC)
- East Leicestershire & Rutland Clinical Commissioning Group (ELRCCG)
- West Leicestershire Clinical Commissioning Group (WLCCG)
- NHS England (Leicestershire and Lincolnshire) Local Area Team
- Healthwatch England and the local Healthwatch Network

Published on www.healthwatchleicestershire.co.uk

Appendix 1 - Survey Findings



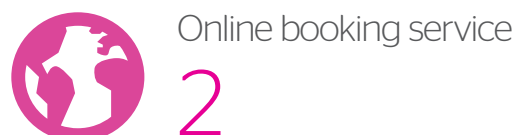
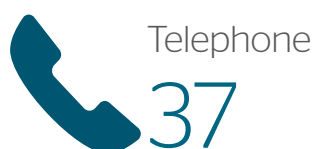
Q1. Is it easy to get through to your surgery on the telephone to make an appointment?

19 YES

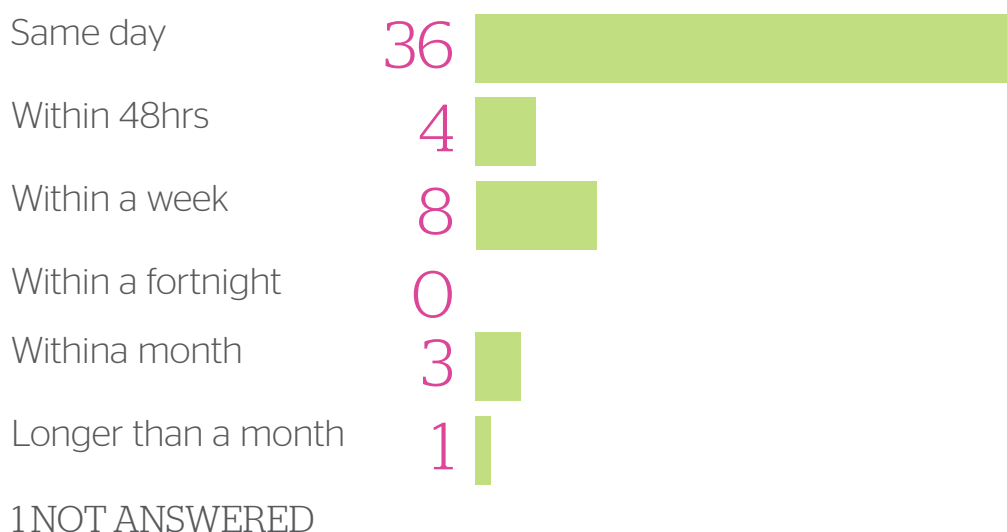
32 NO

2 NOT ANSWERED

Q2. What methods do you use to book an appointment? (Multiple responses)



Q3. How long did it take you to book an appointment?



Appendix 1 - Survey Findings

Q4a. When making your appointment, are you given the option of seeing the doctor or nurse of your choice?

6 DON'T MIND

Q4b. For urgent appointments, can you normally see the doctor or nurse on the same day?

6 NOT ANSWERED

Q5. How long after your appointment time, do you normally wait to be seen?

0-5 mins 2 ●●

5-10 mins 23 ●●●●●●●●●●●●●●●●●●
●●●●●●

10-15 mins 14 ●●●●●●●●●●●●●●

15-20 mins 4 ●●●●

20-25 mins 4 ●●●●

Over 30 mins 5 ●●●●●

1 NOT ANSWERED

Q6. How satisfied are you with the practice opening hours?

Not at all satisfied	4	
Slightly satisfied	2	
Moderately satisfied	19	
Very satisfied	12	
Completely satisfied	15	

1 NOT ANSWERED

Q7. If you needed to contact a doctor or nurse when the GP Practice is closed what would you do?

Telephone the practice and listen to the answerphone

6

Telephone the out of hours service

4

Phone NHS 111

15

Go to nearest Urgent Care Centre

28

Go to nearest A&E

1

A mix of any of the above

2

2 NOT ANSWERED

Q8. Does your GP practice have a Patient Participation Group (PPG)?



41 patients did not know if the practice has a PPG Group.

Q9. Are the staff (receptionists/ practice manager) at the surgery helpful and understanding?

On a scale of 1 to 7, 1 meaning extremely unhelpful and 7 meaning extremely helpful, patients rated the staff overall at an average of 4.67

4.67



Q10. Is there enough privacy to talk to reception in confidence?

33 YES

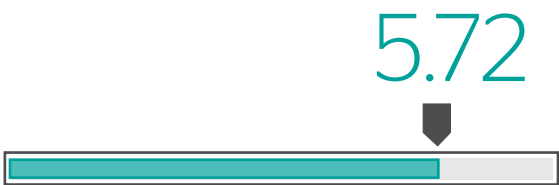
18 NO

2 NOT ANSWERED



Q11. Overall, are you happy with the quality of care and treatment (clinical) you receive at the surgery?

On a scale of 1 to 7, 1 meaning extremely unhappy and 7 meaning extremely happy, patients rated the staff overall at an average of 5.72



Q12. Overall, are you happy with the service (non-clinical) you receive at the surgery?

On a scale of 1 to 7, 1 meaning extremely unhappy and 7 meaning extremely happy, patients rated the staff overall at an average of 5.10





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Healthwatch Leicestershire

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