

Details of visit**Service Provider:****Service address:****Date and Time:****Authorised****Representatives:****Contact details:****General Practice Enter & View****Page Hall Medical Centre****101 Owler Lane, Sheffield, S4 8GB****18th November 2015, 10 am - 12 noon****Linda Gregory, Chris Sterry****Healthwatch Sheffield, The Circle, 33 Rockingham
Lane Sheffield, S1 4FW****Acknowledgements**

Healthwatch Sheffield would like to thank the management and staff of the surgery for facilitating this visit and giving their time and thanks also to the patients who took time to talk to us on the day for sharing their experiences.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

**What is Enter and View?**

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and 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.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.



Purpose of the visit

- To gather information to inform us about how the practice addresses access issues in general and with reference to those with particular needs.
- To identify examples of good working practice.
- To observe the environment and processes in the public areas during a surgery session.
- To identify any areas for improvement and make suggestions if appropriate.

Strategic drivers

- Citywide reporting of difficulty accessing GPs in a timely manner
- Healthwatch Sheffield focus on access for excluded groups

Methodology

This was an announced Enter and View visit.

The visit was arranged via the Practice Management team, giving access to the reception and waiting areas and ensuring there was a private area available for confidential discussion if required. The visit was advertised in advance via copies of the announcement flyer being placed in the main entrance area and waiting room. On the day of the visit a flyer giving details was placed on the reception desk. The time agreed coincided with a normal (untargeted) clinic. Patients were attending appointments with GPs and practice nurses.

The practice manager and a GP made themselves available for interview. They had also informed the Practice Patient Participation Group of the visit and the Group provided three of its members for interview. Other information was gathered on ad hoc basis from patients in the waiting areas. All responses were in reply to questions posed by the authorised representatives. No patients attended the surgery to speak to us specifically as a result of the pre-publicity. The private room was used only for the management and PPG representative interviews. Finally, processes and interactions were observed as the clinic progressed.

Summary of findings

- Access is via main entrance on Rushby Street, which is wheelchair accessible. However, the main door is a double door with the left door locked in position and the right door needs to be manually pushed. This leads to a small inner porch which is signposted to accommodate prams, etc. A further double door leads into Reception Area and again left door is locked in position and the right door is manually pushed to open. This may make things difficult for some wheelchair users, although Staff at the front desk assist patients who have difficulty negotiating the entrance doors when necessary.
- Clear signage at main entrance in English, all non-medical staff wearing name badges. Notice board in entrance porch, which was tidy.
- The appointment calling system is both visual and auditory and the screen during waiting times scrolls through a variety of public health and other 'preparatory' messages. Medical staff came into the waiting area to call patients for their appointment.
- All who attended seemed mainly clear as to the surgery's processes and chose either to go straight to Reception or the electronic sign-in (which accommodates a few languages) However, some of patients attending may not be able to use the electronic sign-in as they may be only able to fully understand their language when spoken.
- The spacious nature of the waiting area, which is to the right of the entrance and reception, meant that overheard conversations at reception would only be possible if someone queued too close. The 2 Reception staff were welcoming, unflustered and helpful. They are able to speak other languages, notably Urdu/Arabic.
- Our discussions with practice managers and PPG rep reinforced the outward appearance of an establishment trying hard to do their best, open to new ideas and looking forward. There was no 'blame' culture or other judgmental language used in discussion of difficult topics. Their work and analysis is fact-based and they know their weak points. The wait to see a specific doctor when booking ahead is unacceptably long, regularly up to 3 weeks, one patient advised that they were unable to get an appointment until four weeks time.
- There was a sign with the number of DNAs of the previous week (85) and for the month of October approximately 320.
- There is a small car park on Heathcote Street for 6 cars, one space being a disabled access space. However, the normal extended width is not present, therefore could cause problems for persons with limited mobility. The practice told us; "Parking is a significant problem locally, particularly since the building of the new primary school. We have raised the issue with the council but to no avail. The practice is unable to provide more on-site parking as we cannot extend our site as we are bordered on all sides by roads."
- The surgery is not on a bus route, but buses can be accessed fairly nearby.

- There is no signage at the car park and there is no access directly to the surgery. While there is on street parking on Heathcote Street and Owlter Lane, at the time of the visit there was only one space available. Outside the main entrance on Rushby Street there is parking available between 9.30am and 4.00pm, however, it is an extremely busy road, which could cause problems when alighting from a vehicle.
- The practice is an inner city practice, taking patients from within 1 mile (approx.) radius of Owlter Lane, covering Page Hall, Firvale, Northern General Hospital, Crabtree Estate, Earl Marshall, Wensley Estate and Firth Park (as far as Hucklow Road).
- There are no staff vacancies and little staff turnover. They would like to recruit another receptionist. They did have some experienced doctors who left the practice earlier this year.

Results of Visit

General

- Clear and helpful website
- Patient Participation Group advertised on website and notes of discussions posted there, although latest ones on the day of our visit were from January 2015. Practice update: The latest Minutes have since been added to the Website.
- Surgery open 6 days, Monday - Friday 8.15 -12.30 and 13.30 - 18.00, except Thursday which is half day closing. Saturdays 9.00 - 12.00, but only for pre-booked appointments.
- Medical Centre facing spending cuts
- They are on the SystemOne clinical system.
- Became a teaching practice for medical students in 2001 and started training GP registrars in 2003
- Notice board in entrance porch
- Have a high turnover of patients, many of whom do not have English as their first language
- Actively promote Friends and family Test (FFT) and record all comments received
- Practice is very adaptable
- New registrations of patients have to live within surgery boundary and complete an application and produce ID.
- Text reminders sent for appointments
- During the week interpreters are available if requested. However on Saturdays you may need to bring your own interpreter. Require at least 2 days notice.

- They have volunteers from the Roma community and Darnall Wellbeing who attend to support patients and help them with access to the surgery and other relevant services.

Services

- Diabetic reviews
- Asthma Reviews
- Heart Disease and Stroke reviews
- Spirometry Checks
- Well-man Checks
- Well-Women Checks
- Urdu/Arabic Interpreters
- 75 plus Checks
- Flu Vaccinations
- Travel Vaccinations
- Smoking Cessation
- Chiropody
- Young Patients
- Have Induction Loop and use language [line]
- Emergency Contraception
- Counselling
- Occupational Health
- Carers

Appointments

- Online booking up to 9 months in advance
- For same day emergency appointments there is a triage system via triage nurse with a duty doctor, who is there throughout surgery hours
- Waits to see specific doctors can be 3 weeks plus and they do support same doctor continuity for those with regular attending needs
- Registered patients now 7350, 83% of whom are from ethnic minorities
- There were 85 DNAs the previous week
- Have a very strict DNA policy. If you miss an appointment more than 3 times in one year, they may ask you to find a new doctor

Processes /waiting

- Fairly large waiting area with wall bench seating
- Sign in for attending appointments either at reception or electronic (Multilanguage) system.
- One toilet, we understand this has been raised as an issue by the PPG. Practice response since visit: This was re-decorated recently in response to patient feedback on NHS Choices website.
- Clear signage on each door, reception sign in bold capitals
- Doctors come to waiting room to call patients
- Calm atmosphere, comfortable temperature

Staffing

- Low staff turnover
- Would wish for a further receptionist and trained health assistants
- Practice manager's response since our visit: "We are training another Health Care Assistant so have two now. We are 'borrowing' a receptionist from another practice a couple of afternoons a week until our funding issues are addressed and we can recruit someone."

PPG reps

- Generally very positive and supportive
- PPG members all volunteered - most have been involved a while
- 'Good staff, but require more'
- 'Some doctors leave'
- Emergency appointments good
- Doctors are positive and give time to discuss with patients, do not rush you.
- Provide an holistic approach
- Can book scans at the hospitals, saving time on hospital visits
- Doctors can book repeat appointments
- Generally appointment waiting time is 2-3 weeks

Patients

Interviewed 6 patients

- Not happy with waiting times and was not aware of the emergency triage facility, will be leaving practice.
- Been with the practice 22 years and feels well supported, they do the best they can. Liked the triage facility and provide time to get to the root of health problems and



talk openly.

- Practice is convenient, very friendly; do not want it to close.
- Felt had to wait a long time in the waiting room for their appointment, due in at 11.15 but not called until 11.50, a second patient also stated this, it appears to be an issue with those called in on the day following triage.
- Patients did talk about the difficulties of getting an appointment especially for a particular doctor. Can book on internet but went on and first 2 weeks were already full.
- Patient also said that the staff/doctors are brilliant, they are caring and never rushed you.
- Information given to you is good, the practice rings up if blood tests etc are due.
- Difficult to park and suggested a “drop off” bay outside the practice would be helpful.
- One patient was unhappy that antibiotics were not prescribed for her son and she’d had to come in again.

Additional findings

All at the surgery could not have been more open and willing to discuss the positives and the challenges. We felt that this was a caring and forward looking practice. The challenges for the practice tend to be around the diverse nature of their patients and their lack of knowledge/education about health issues and how the NHS works. Also services that tend to be available and accessed by patients whose first language is English, e.g. weight management courses, are often unable to provide an appropriate service to their patients. This means that the surgery has to provide bespoke additional support to these patients. This is time consuming and is also reflected in the need to provide longer appointment times to deal with any health concerns. Medical health history is not easily available and practice staff spend time finding out, for e.g. what injections will have been available to a child in a particular country. Levels of literacy are generally low and this impacts on the ability of staff to get across general health concepts.

DNA is a particular issue, whilst the practice sends texts, they are aware that a family may have one phone between them and might not know who the appointment is for. This appears to be a difficult area for the practice to make much progress in.

Recommendations

- 1. Continue with your caring, collaborative and forward looking approach.**
- 2. Build on work started with other practices to look at the provision of services that are not readily available in the “mainstream NHS” for**

patients from minority backgrounds.

3. Explore further methods of communicating the extent of non-attended appointments and especially how this impacts on waiting periods for booked appointments, e.g. by including percentages of overall activities and how waiting periods could be reduced by active cancellation.
4. Consider exploring with the CCG how a forum could be established in the area that involved a variety of professionals, with the aim of improving health and wellbeing.
5. Make sure a Healthwatch poster is visible in all waiting areas to ensure all your patients know who we are and how they can help us reach the views of the people of Sheffield.

Service Provider response

Thank you for this very positive report about our practice. Our response to your recommendations:

1. Continue with your caring, collaborative and forward looking approach.

Despite the funding crisis, which means the practice continues to be under great strain, we remain optimistic as we have a strong, dedicated team and loyal, supportive patients. We look forward to continuing to build a federation with other local practices, hope to start providing new services such as testing for TB and have begun working with the Kings Fund looking at practice workload to see if we can make improvements to the way we work.

2. Build on work started with other practices to look at the provision of services that are not readily available in the “mainstream NHS” for patients from minority backgrounds

We will be meeting with other local practices this month to discuss the needs of our patient populations and share ideas on what services to provide and how to fund them.

3. Explore further methods of communicating the extent of non-attended appointments and especially how this impacts on waiting periods for booked appointments, e.g. by including percentages of overall activities and how waiting periods could be reduced by active cancellation.

We already provide appointment cards and send SMS reminders daily in an attempt to reduce the number of missed appointments. We also try to make sure newly registering patients understand how to book/cancel appointments appropriately.

We have now designed a poster which displays the number of patients who fail to keep their appointments each month, the clinical time wasted and encourages patients to cancel their unwanted appointments in time so they can be used by

others.

We are planning to have a quarterly newsletter and will include information about the importance of keeping appointments or cancelling them so that other patients can use them.

- 4. Consider exploring with the CCG how a forum could be established in the area that involved a variety of professionals, with the aim of improving health and wellbeing.**

We continue to collect evidence about the needs of our patients and gaps in provision and will be working with other local practices with similar patients to try to secure funding for the delivery of appropriate services.

- 5. Make sure a Healthwatch poster is visible in all waiting areas to ensure all your patients know who we are and how they can help us reach the views of the people of Sheffield.**

We are happy to continue to display Healthwatch posters.

