

Enter and View Report: Albion Street Surgery

Service address:	Albion Street Surgery, 9 Albion Street, Brighton, BN2 9PS
Service Provider:	Contracted by Brighton and Hove Clinical Commissioning Group
Date and Time:	16 th March 2015
Authorised Representatives:	Sue Seymour and Paul Wilson
Contact details:	Healthwatch Brighton and Hove Community Base, 113 Queens Road, Brighton, BN1 3XG

Acknowledgements

Healthwatch Brighton and Hove would like to thank the service provider, patients, visitors and staff for their contribution to the Enter and View programme.

What is Healthwatch?

Healthwatch Brighton and Hove supports local children, young people, adults and their communities to influence the design, delivery and improvement of their local health and social care services, now and for the future. We enable people to make informed choices about their health and wellbeing by assisting them when they have concerns or complaints about these services.

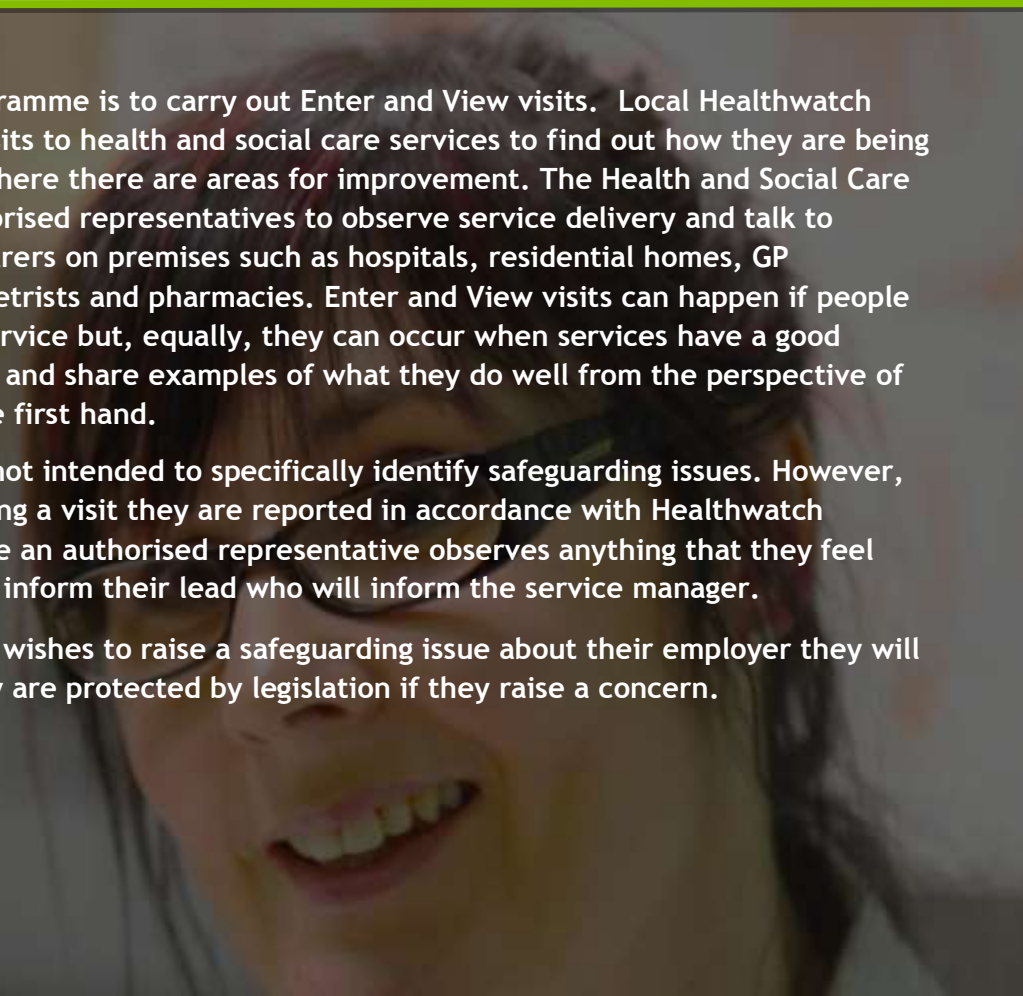
Healthwatch Brighton and Hove is a part of the Healthwatch national network, established by the Government under the Health and Social Care Act 2012 to ensure local patients and users have a greater input to shaping and designing local services. There are 152 local Healthwatch organisations across England.

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.

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.





Why is Healthwatch Visiting GP Practices?

Healthwatch Brighton and Hove is undertaking a programme of visits to GP Practices across the city during 2015. In total we will visit 15 GP practices, including 3 pilot visits in March 2015. This report is based on one of our pilot visits.

During our time in each service, volunteer representatives will be talking to patients about their experiences of care and accessing services, and recording what they see in the waiting rooms.

At a time when GP practices are going through a significant change both locally and nationally¹, Healthwatch wants to understand how patients feel services in Brighton and Hove are performing, and make recommendations about improving patient experience.

We want to highlight what good care looks like to patients, and to look at how patients can be empowered to have more of a say in how their practices are run. The Clinical Commissioning Group² and Brighton and Hove City Council are currently working with GPs in the city to transform primary care and pilot a range of extended services. Known as 'EPIC'³, this programme is bringing multi-disciplinary teams into surgeries together with extra services such as 'Community Navigators'⁴.

Healthwatch chose the pilot visits based on a range of criteria:

1. Those practices about which we had received calls via our helpline.
2. Those not recently visited by the Care Quality Commission⁵.
3. A cross city representation of the 6 GP clusters⁶ in the city.
4. Feedback from NHS choices.
5. Patient populations.
6. Soft intelligence from partners and community engagement.

¹ [Important Changes to Healthcare in the Community](#), Department of Health

² [Clinical Commissioning Group](#) NHS organisations set up by the Health and Social Care Act 2012 to organise the delivery of NHS services in England.

³ [EPIC](#) Stands for Extended Primary Integrated Care

⁴ [Community Navigators](#) provide community service signposting to individuals

⁵ [The Care Quality Commission](#) monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety

⁶ [Developing Enhanced Health and Wellbeing Activities](#), Health and Wellbeing Board, March 2015



Methodology

Two Authorised Volunteer Representatives for Healthwatch Brighton and Hove visited Albion Street Surgery on 24th March 2014. It was one of three pilot visits to GP Practices, which were put in place to calibrate our survey and method for future visits. Both representatives were fully trained and supported by the Healthwatch office. They have also both completed a full Disclosure and Barring Service check prior to the visit.

The representatives talked with 17 patients on the day of the visit, as well as some members of staff. The details of the visit were shared with the practice manager in advance of the session; however staff was not informed about what time or day the representatives would arrive, only the week of the visit was disclosed.

Patients completed a set of questions with the representatives (see appendix 1), who were located in the waiting room of the practice. If any surveys were not completed at the end of the session, they were left at reception with freepost envelopes for patients to complete and return separately. Alongside talking to patients, the volunteers also conducted an observation (see appendix 2) in the waiting room. The representatives had a checklist to encourage them to note down observations for a variety of key information.

What does n= mean?

In the results section of this report, you may notice that we use the term 'n='. This is a way to show how many people responded to each individual question. It is a way of being more honest and transparent about our findings. If we say that 100% of people agree with a statement, but next to it there is an (n=2), you will know that whilst 100% sounds impressive, only two people actually responded to that particular question!



Results of Visit

Appointments & Referrals

As with the majority of GP practices, at Albion Street Surgery it is possible to book appointments with nurses and doctors over the phone, in person and via the internet. Of these options, patients found it easiest to book in person, 100% (n=12), followed by bookings over the phone, 88% (n=15). Only 3 patients we spoke to had used the online appointment booking service at the practice. Out of them, 67% (n=2), found this to be very easy.

The patients that we received surveys from were more likely to have spoken to a doctor over the telephone regarding their health than a nurse. All patients who spoke to a Doctor 100%, (n=8), or a nurse 100%, (n=2), on the telephone found it to be an easy or very easy access to the service, indicating a very high quality service.

I am totally satisfied with this practice, after 20 years!

A Patient talking about Albion Street Practice

67% (n=12) of patients we spoke to said they were able to get the appointment they needed within 3 days. 33% (n=6) said that getting an appointment at the practice can take up to a week. Patients reflected that the waiting time is variable depending on how busy the surgery is, and can take a while. Others felt satisfied with their practice and the time it takes to get an appointment.

Sometimes, when face to face appointments are not available, GP practices will offer telephone appointments with doctors as an alternative. 61% (n=11) of those asked thought that a telephone appointment was not as good as attending a face to face appointment. Of the patients we received surveys from, 2% (n=4) said they had received this service.

Of those patients who had experienced referrals to hospital care, 83% (n=5) felt that the process went well. Some commented that they were referred the following day, and one person said their referral to the breastfeeding clinic was particularly fast. Of those who experienced problems, some experienced delayed or lost referrals' and issues with the hospital administering paperwork.



Quality of service

90% (n=9) of patients were of the opinion that the reception staff were helpful or very helpful. Patients commented that they had been squeezed in at the last minute, that an effort had been made to work around their availability, and that they are generally accommodating. More negative experiences have been around being given inaccurate information, and a perceived reluctance of reception staff who work in the morning to help with enquiries.

They always try to get you an appointment with who you want to see or with another doctor

A Patient talking about reception staff

When calling to receive test results, 100% (n=10) of patients found it easy or very easy to access their test results. 100% (n=16) of people who have had appointments at the practice also felt that they were given enough time to explain their issues properly to the doctors and nurses on duty. One person commented that they thought ten minute appointments were too short.

Environment

The waiting room was clean and tidy, and had padded benches for patients to sit on. There were a number of splits in the fabric of the benches, which could make them difficult to clean. A hand sanitizer was available, and information was visible about the importance of using it.

Providing Information

The representatives saw a range of posters and information around the practice. The displays were laminated and clear to read. They contained information about where to go out of hours if patients require medical assistance, public health information and how to feed back to organisations like to CQC.

The waiting room displayed a complaint form for patients should they wish to use it. Despite this visibility, 55% (n=10) of the patients who filled in the survey said that they did not know how to make a complaint at the practice if they needed to.

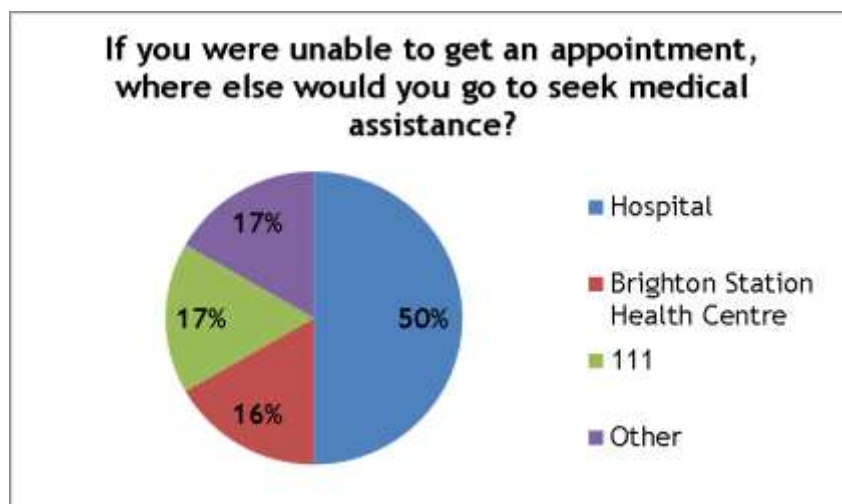


Albion Street Surgery currently has a Patient Participation Group, or PPG⁷. Information about the PPG was available through an LCD screen in the waiting room. Despite this, 83% (n=15) of patients did not know what a Patient Participation Group was, and 84% (n=15) did not know how to get involved with their local PPG.

Aside from PPGs and complaints processes, there are a number of alternative ways that the practice enables patients to have their say. Feedback forms were available to let the practice know about experiences. 50% (n=9) felt they knew what the national patient survey⁸ was, and 33% (n=6) felt they knew what a practice manager does.

Out of Hours

We asked patients where they would go if the practice was closed and they needed medical assistance. The detail in the chart below shows that whilst 33% (n=2) would approach places like the Brighton Station Health Centre and NHS111, 50% (n= 3) would go straight to A&E. Of those in the 'other' category, one person said that they would contact the now disbanded NHS Direct.



⁷ [Patient Participation Groups](https://www.patient.co.uk/patient-participation-groups), Patient.co.uk

⁸ [National Patient's Survey](https://www.nhs.uk/healthcare-professionals/national-patient-survey), Frequently Asked Questions



Summing up and looking forward

The Albion Street Surgery is generally well regarded across a range of areas. We asked patients to rank the practice from 0-10 (with 0 being the very worst, and 10 being the very best). Out of the 18 patients that ranked the practice, the average score was a positive 8 out of 10. The lowest score received was 6, and the highest 10.

Our representatives asked patients what improvements they would like to see at the practice. The main theme from the responses we received was that people would like more evening appointments to suit their working lives. There were also themes around people with long term conditions, who said that they would like better follow up on self-care, and that they would like their information to be saved so they do not have to repeat their issues when they book an appointment.

Additional findings

Alongside telling us about their experiences of Albion Street Surgery, patients also told us about issues outside of the surgery including referrals to specialists, the importance of interpreting services for GP Practices and thoughts on the Community Mental Health Service. These stories will be used as future intelligence for Healthwatch Brighton and Hove.



Our Recommendations

1. Consider additional promotion of the online appointment booking service. This can help to free up the telephone for appointments and is quick and easy for patients who wish to use it.

Response: Information regarding on-line booking is promoted on our TV screen presentations in the waiting areas. We promote on-line booking to patients over the telephone and those who attend reception. We will provide updated information regarding on-line booking in our registration pack. We are currently developing a patient information leaflet which will be available in the registration pack and at reception to include on-line booking details.

2. Consider reupholstering the waiting room benches, or bringing in new comfortable seating for patients in the waiting room.

Response: It is likely that the seating will be improved very soon.

3. Consider how to promote your complaints process to best effect, so that patients are more aware of it should they ever wish to use it.

Response: Information is provided on our TV screen presentation in the waiting areas. We will develop a poster giving details about the complaints process for both waiting rooms. We will provide information regarding the complaints process in our registration pack. We are currently developing a patient information leaflet which will be available in the registration pack and at reception to include complaint process details.

4. Consider how to better promote your PPG so that more people are aware of what it does and how to get involved. The Brighton and Hove PPG network could provide some guidance regarding this.

Response: We have a poster in both waiting areas giving details of the PPG and requesting new members. We also include the next meeting date when this is arranged. We will develop further information in the form of a notelet to be made available at reception. Information will be provided on our TV screen presentation in the waiting areas. We will be working with support providers through the CCG, The Trust for Developing Communities and Community Works in June 2015. This work will build on previous support and training.

5. Put up promotional material which introduces the practice manager and explains how they

can help patients.

Response: We will develop some promotional material to be advertised in the waiting rooms and will include this detail in the registration pack and patient information leaflet.

6. Consider how to ensure patients with long term conditions have improved consistency of service, to avoid them repeating themselves to staff and to improve access to self-care

Response: All patient records are held on SystmOne which can be accessed by all staff working in the practice. If you are able to provide further clarity, or a particular patient experience in relation to this matter we will investigate further.

7. Finally, consider how to offer evening appointments for patients. It may be beneficial to engage with the EPIC project⁹ locally to achieve this.

Response: We are not part of the EPIC but are considering this. We do however offer early morning and evening appointments each Monday.

Next Steps

Healthwatch Brighton and Hove will use this pilot visit to inform our visits to GP practices throughout the year. This includes making changes to the questions asked. We will also share our recommendations with the Practice directly, as well as the CCG and other stakeholders. We welcome any feedback about this visit, the process used and questions asked so please do not hesitate to get in touch.

We will publish outcomes from this visit together with information about what has happened with the recommendations on our website¹⁰.

⁹ [EPIC](#) Stands for Extended Primary Integrated Care

¹⁰ [Healthwatch Brighton and Hove](#), 'What We've Done'

Appendices

Appendix one: The questions we asked

- 1. How have you found to do the following:** Book an appointment in person, book an appointment by phone, book an appointment online, speak to a Doctor on the phone, speak to a Nurse on the phone, get your test results back.
- 2. How long do you usually wait between booking an appointment and attending it?** The same day, up to 3 days, up to a week longer than a week, I have not booked an appointment
- 3. Have you ever been offered a telephone consultation if appointments at the practice have not been available?** Yes, it's as good as a face-to-face appointment; yes, it's not as good as a face-to-face appointment; no, but I would be interested in receiving this service; no, but I would not be interested in this service,
- 4. If you were unable to get an appointment here, where else would you go to seek medical assistance?** (if none, please leave blank)
- 5. Do the doctors and nurses give you enough time to explain your condition and issues during your appointment?** Yes, no, I have not had an appointment
- 6. How helpful do you find the reception staff?** very helpful, helpful, unhelpful, very unhelpful, unsure
- 7. What is your experience of being referred to a specialist?** My referral went well, my referral was lost, my referral was delayed, I haven't needed a referral.
- 8. How much do you feel you know about the following services at your practice:** How to make a complaint, what a PPG is, how to get involved in your PPG, what the patient survey is, what the practice manager does
- 9. Overall, how would you rate your GP practice out of 10? (10 being excellent, 1 being very poor):** 1,2,3,4,5,6,7,8,9,10
- 10. What changes would you like to see to make your GP practice better?**
- 11. Is there anything you would like to tell Healthwatch about other NHS or social care services in Brighton and Hove?**

Appendix two: The Observation Checklist

- 1. Noticeboard:** Is it cluttered, does it have up to date information, is the information easy to read?
- 2. Waiting area:** Is it clean and tidy, are the seats soft, are there any magazines and children's toys?
- 3. Hygiene:** Is hand gel available in the practice waiting room, and information about stopping bugs from spreading?
- 4. Communication:** How are receptionists and other staff interacting with patients? What is their tone of voice, and how helpful are they being?
- 5. Information:** Is there any information available about: Alternative options to A&E, the Friends and Family Test, how to make a complaint?
- 6. Feedback:** Is there any information about patient participation groups, or feedback boxes and forms available?
- 7. Healthwatch Promotion:** Is there a Healthwatch poster on display? If not please provide reception with one when leaving
- 8. Additional observations**

