#### healthwetch Brighton and Hove

## St. Luke's Surgery

Service address:	The Grand Ocean, Longridge Avenue Saltdean, East Sussex BN2 8RP			
Service Provider:	Contracted to Brighton and Hove Clinical Commissioning Group			
Date and Time:	Thursday 24 <sup>th</sup> September 2015, 09:00 - 12:00			
Authorised Representatives: Healthwatch Address:	Nick Goslett and Sue Seymour			
	Healthwatch Brighton and Hove Community Base, 113 Queens Road, 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.

#### Who are 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 148 local Healthwatch organisations across England.

#### What is Enter and View?

A part of the role of Healthwatch 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 3 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.



## Why is Healthwatch Visiting GP Practices?

Healthwatch Brighton and Hove (HWBH) is undertaking a programme of visits to GP Practices across the city during 2015. In total we will visit 15 GP practices, including thee pilot visits in March 2015. As part of this HWBH is undertaking an online survey asking the same questions, to ensure that as many people as possible are able to give feedback on their local practice.

During our time in each service, authorised 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 significant change both locally and nationally<sup>1</sup>, Healthwatch wants to understand how patients feel services in Brighton and Hove are performing, and make recommendations to ensure high quality health and wellbeing services.

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 Group<sup>2</sup> and Brighton and Hove City Council are currently working with GPs in the city to transform primary care and there are many new initiatives in place. These include 'EPIC<sup>3</sup>', which is run by BICS<sup>4</sup> and aims to bring multi-disciplinary teams into surgeries together with extra services such as 'Community Navigators<sup>5</sup>'. Healthwatch does not act as an inspectorate for Health and Social Care; this is the job of the Care Quality Commission.

Healthwatch chose the visits based on a range of criteria:

- Those practices about which we had received calls via our helpline.
- Those not recently visited by the Care Quality Commission.
- A cross city representation of the 6 GP clusters<sup>6</sup> in the city.
- Feedback from NHS choices
- Patient populations
- Soft intelligence from partners and community engagement

<sup>&</sup>lt;sup>1</sup><u>Important Changes to Healthcare in the Community</u>, Department of Health

<sup>&</sup>lt;sup>2</sup> <u>Clinical Commissioning Group</u> NHS organisations set up by the Health and Social Care Act 2012 to organise the delivery of NHS services in England.

<sup>&</sup>lt;sup>3</sup> EPIC Stands for Extended Primary Integrated Care

<sup>&</sup>lt;sup>4</sup> <u>BICS</u> stands for Brighton Integrated Care Service

<sup>&</sup>lt;sup>5</sup> <u>Community Navigators</u> provide community service signposting to individuals

<sup>&</sup>lt;sup>6</sup> Developing Enhanced Health and Wellbeing Activities, Health and Wellbeing Board, March 2015



## Methodology

Two Authorised Volunteer Representatives for Healthwatch Brighton and Hove visited St Luke's Surgery on Thursday 24th September 2015, 09:00 - 12:00. It was one of a programme of 15 visits to GP Practices which Healthwatch Brighton and Hove chose to undertake in 2015-2016. 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.

We received 21 of completed questionnaires in total, all of which were through the visit itself. The details of the visit were shared with the practice manager in advance of the session, however staff were not informed about what time or day the representatives would arrive, only the week of the visit was disclosed. Healthwatch B&H stresses that the E&V method is intended to be a snapshot of patient opinion, and therefore may not capture the wider concerns of the patient population.

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 on 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. Equalities information was also collected for those who took part, to help us to understand the issues that might face particular groups in the community.

#### About the practice

St. Luke's Surgery is relatively small, and has around 2300 patients, who are served by one nurse and one doctor. The surgery are not a part of the EPIC project, and are in the process of setting up their own PPG.

#### 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 patients responded to each individual question in a particular way. It is a way for us to be more honest and transparent about our findings. If we say that 100% of patients agree with a statement, but next to this is an (n=2), you will know that whilst 100% sounds impressive, only two people agreed with the statement.



## **Results of Visit**

#### Appointments & Referrals

As with the majority of GP practices, at St. Luke's Surgery it is possible to book appointments with nurses and doctors over the phone, in person and via the internet. Of these options, All of the four patients who booked in person found it easy or very easy to do, and 95% and over the telephone (n=19). All patients we talked to also found it very easy to get their test results back via telephone (n=11), and all patients said they were able to get the non-emergency appointment they needed within 3 days (n=19).

How has it been for you to	Very easy to do	Easy to do	Difficult	Very difficult to do	l have not used this service
Book an appointment in person	4	0	0	0	17
Book an appointment by telephone	18	1	0	0	2
Book an appointment online	0	0	0	0	20
Order repeat prescriptions online	1	0	0	0	20
Get your test results back via telephone	11	0	0	0	10

Online services appeared to be under-utilised at this practice, with no patients saying they used online appointment booking, and only one patient saying that they order repeat prescriptions online.

### $igcellul{e}$ I'm new to the practice, but so far I'm pleased igree

Sometimes if face to face appointments are not available, GP practices will offer telephone appointments with doctors as an alternative. 59% (n=10) of those asked thought that a telephone appointment was as good as attending a face to face appointment. Of the patients we have spoken to, 35% (n=6) said they had received this service.

Of those patients who had experienced referrals to hospital care, 92% (n=11) felt that the process went smoothly. One patient, who had experienced a delay, felt they were kept up to date by the practice.



#### Quality of service

Of the people we asked, everyone said that said that doctors (100%, n=19), nurses (100%, n=18) and to a slightly lesser extent reception staff (95%, n=18) gave them enough time to explain what they needed to. They also felt listened to by doctors (100%, n=19), nurses (100%, n=18) and reception staff 79% (n=15). Both doctors (100%, n=19) and nurses (100%, n=18) were excellent at explaining treatments to patients and good at giving patients choices in their treatment (doctors, 95%, n=18, nurses 83%, n=15). 95% (n=18) of patients felt that when they attended an appointment with the doctor, the doctor had all the relevant medical information for them available during the appointment.

# I love being with a single doctor practice. It's a pleasure to come into the surgery. It's a real highlight of my day

On the day of the visit, representatives found the reception staff to be very friendly. We asked people what is important to them as patients when visiting their GP practice. Of the patients who responded, a key theme was around the need for personalised advice and services, easy to book appointments and friendly atmosphere.

#### Environment

On the day of the visit our representatives found the waiting room clean and tidy. Waiting patients could not easily overhear conversations at reception, and a TV screen showed the name of the next person to see the doctor. Comfortable seats, toys and magazines were available. A TV screen was visible, although it seemed to only have information about Lloyd's pharmacy. A toilet with disabled access was available for patients to use. Hand gel was available on the day of the visit, and information was available on infection control.

#### **Providing information**

A range of cancer information was available in the waiting room. Perhaps in part due to this, 72% (n=13) of the people we talked to were aware of access to cancer screening services through the centre. Information was also available regarding free NHS health checks. 44% (n=8) of patients said they were aware of the checks, and 28% (n=5) were aware of annual health checks for people with long term conditions. On the day of the visit, our



representatives did not observe Information on smoking cessation services. 22% (n=4) of patients we asked were aware of these services. Of all the people we talked to, 28% (n=5) were unaware of all of the programmes we asked about. The noticeboards available were observed to be tidy and up to date, with leaflets well laid out.

#### Feeding back to the service

On the day of the visit, information on how to make a complaint about the centre was visible; however no complaints forms were available. When asked if they knew how to complain if they needed to, 53% (n=9) of patients felt they knew what to do. 29% (n=5) were aware of the national 'GP patient survey', and 59% (n=10) felt that they understood what a practice manager's role in a GP practice was.

St. Luke's Surgery is currently in the process of setting up a PPG. At the time of the visit, five patients knew what a patient participation group was, and four patients felt they knew how to join their practice's group. Other feedback systems available on the day included a Friends and Family Test box and forms.

#### **Out of Hours**

We asked patients where they would go if the practice was closed and they needed medical assistance. Most people replied with a range of options, and said that their actions would depend on the severity of the issue. The average number of options provided by patients was 1.1. Information about where to go out of hours was not available on the day of the visit.





#### Summing up and looking forward

St Luke's Surgery is clearly very well thought of by the vast majority of patients we spoke to. It appears that patients here have a preference for a single handed practice, and are positive about the personalised approach the surgery provides them with. We asked patients to rank the practice from 0-10 (with 0 being the very worst, and 10 being the very best). Of the 20 patients that ranked the practice, the average score was a 9.1. The lowest score we received was 7, and the highest 10.

The CQC have not yet completed a report on this surgery. The national GP Patient Surgery<sup>7</sup> confirmed our findings about patients having positive experiences of appointments. Our representatives asked patients what improvements they would like to see at the practice. Most patients felt there were no significant improvements to make.

#### Additional findings

Alongside telling us about their experiences of St. Luke's Surgery, patients also told us about issues outside of the surgery. Patients at this practice shared broad concerns they had about NHS 'cuts', social care for older people and staffing levels at the local hospital.

<sup>&</sup>lt;sup>7</sup> <u>GP Patient Survey</u>, Summary information, St. Luke's Surgery, extracted 12<sup>th</sup> October 2015



## **Our Recommendations & Responses**

**1.** Brief staff, provide materials and promote the use of online appointment booking. This

could alleviate patient concerns regarding telephone appointment booking, and help to

fulfil this function as stated on NHS choices.

**Response:** Staff do promote the online services opportunistically to patients and we have now added the offer of this service to our Registration Forms so patients can opt in when they first join the practice. There are posters up at reception and messages have been added onto repeat prescription slips, to encourage patients to use this service

2. Consider ways to improve patient awareness of NHS health checks and annual health checks

for people with long term conditions, to improve the chances of catching and preventing illness.

**Response:** We have taken your comments on board and re designed the notice boards in the waiting room which now heavily focus on the NHS Health Checks. We are also adding in leaflets to patients when we write to them welcoming them to the Practice. All patients will Long Term Conditions are sent a letter from the practice once a year inviting them in for their annual health check with the Nurse/Doctor.

**3.** Provide some information on smoking cessation support, to improve patient knowledge and

potential to act in this area.

**Response:** We do have leaflets in the waiting room for smoking cessation but did notice that the Poster seemed to be missing. We have now rectified this by adding a new poster offering this service to patients. We will probably look at changing one of the waiting room notice boards from time to time and focus on smoking instead of Health Check. The idea is to make changes to the information in our waiting room throughout the year so patients may notice more.

**4.** Consider providing Brighton and Hove CCG's 'We Could be Heroes' campaign information

about out of hours medical assistance, to improve patient awareness of out of hours options.

options.

**Response:** We do have the NHS111 and We could be hero's posters and leaflets in the waiting/reception area but maybe we could again have a more focused approach when readjust the notice boards throughout the year. We do also have this information on the front page of our website.

**5.** There was a low awareness of PPGs at the practice which may be expected given that a group is only just being established. Learning from other practices with established PPGs might help to get the group up and running clearly and it might be helpful to consider

including the above recommendations for discussion in future PPG meetings

**Response:** The response to our PPG meetings is still quite good with about 10 - 12 members at each meeting. The group has now had 3 meetings and is producing a quarterly newsletter for patients. We have put up a new notice board at the front entrance which is purely for the PPGs use which they have added posters etc. encouraging patients to join. The Group has also applied for funding to purchase banners and other material's to use and local fetes to again try to recruit new members. The Healthwatch report will be distributed at the next meeting for discussion.



## **Next Steps**

Once the provider has responded to each of the recommendations, we include these responses in the final report, which is published on our website<sup>8</sup> for the general public to see. The report will also be shared with key organisations in the city including the Care Quality Commission, Brighton and Hove Clinical Commissioning Group and others. After the report's release, Healthwatch Brighton and Hove will conduct some planned follow up activity to ascertain whether changes have been made following the visit. The online survey will be available until 30<sup>th</sup> September 2015. Any surveys collected after this report is completed will be included as an appendix to the report at a later stage.

Once we have visited all 15 practices, we will also compile a larger strategic report which will pull together key themes across this snapshot of primary care provision in the city. This report will also be made available to all practices visited as well as partner agencies. An easy read version will be made available to the public.

<sup>&</sup>lt;sup>8</sup> <u>Healthwatch Brighton and Hove</u>, 'What We've Done'

## **Appendices**

#### Appendix one: The questions we asked

- **1.How has it been for you to:** Book an appointment in person; book an appointment by phone; book an appointment online; order a repeat prescription; get your test results back via telephone
- 2. How long do you usually wait between booking a non-emergency 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 same day telephone consultation instead of a face-toface appointment? 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 it wouldn't be as good as a face-to-face appointment; no, but it would be as good as a face-to-face appointment
- 4. If you were unable to get an appointment here, where would you go to get medical help?
- **5. Please tick or cross below** (grid) Do the Doctors/Nurses/reception staff give you enough time/listen to you/make sure you know about your treatment/give you choices about your treatment
- 6. Are you aware of the following services which are available through the practice? (please tick if you are aware of them) Free health checks for people between the ages of 40 - 74; cancer screening services; annual health checks; services to help you to quit smoking (smoking cessation); I have not heard of any of these programmes.
- 7. What makes a fantastic GP practice, including the things that are most important to you as a patient?
- **8.** How much do you feel you know about the following services at your practice: How to make a complaint about your GP practice; what a PPG is; how to get involved in your PPG; what the patient survey is; what the practice manager does
- **9. What is your experience of being referred to a specialist?** My referral went smoothly; my referral was delayed but I was kept up to date; my referral was delayed and I was not kept up to date; I haven't needed a referral.
- **10.**Do you think the doctor has all the relevant medical information about you available during your appointments? Yes; No; Unsure; I haven't had an appointment
- 11. 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

- 12. What changes would you like to see to make your GP practice better?
- **13.** 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.** Hygiene: Is hand gel available in the practice waiting room, and information about stopping bugs from spreading? Is there a bathroom available and is it accessible for people in wheelchairs?

**3.** Information through leaflets, posters and TV screens: Healthwatch Materials, ICAS Materials, We Could be Heroes Campaign, Free NHS Health Checks, Cancer Screening Programmes, Smoking Cessation, The EPIC Project,

**4.** Communication: How are receptionists and other staff interacting with patients? What is their tone of voice, and how helpful are they being? Are conversations easily overheard by other patients? Are patients clearly informed/ called in for their appointment?

**5. Waiting area:** Is there any information about the practice's patient group, feedback boxes, complaints info and forms, or any other type of feedback information available? How is it presented? Is there any information on the Friends and Family Test?

**6.** Feedback: Is there any information about the practice's patient group, feedback boxes, complaints info and forms, or any other type of feedback information available? How is it presented? Is there any information on the Friends and Family Test?

#### 7. Additional observations

