# **healthwatch** Blackburn with Darwen



Key Topic: Great Practice August 2017



## About Healthwatch Blackburn with Darwen

Healthwatch gives people a powerful voice locally and nationally. At a local level, Healthwatch BwD helps local people get the best out of their local health and social care services. Whether it's improving them today, or helping to shape them for tomorrow, Healthwatch BwD is all about local voices being able to influence the delivery and design of local services.

Healthwatch was created by the Health and Social Care Act, 2012. We are part of a network of local Healthwatch which helps to ensure that the views and feedback from patients and carers are an integral part of the design and delivery of local service.

Every voice counts when it comes to shaping the future of health and social care, and when it comes to improving it for today. Everything that local Healthwatch does will bring the voice and influence of local people to the development and delivery of local services.

Find out more at: www.healthwatchblackburnwithdarwen.co.uk





## Disclaimer

Please note that this report relates to findings from **830** residents in Blackburn with Darwen. Our report therefore is not a representative portrayal of the experience & views of all in Blackburn with Darwen, only an account of what was represented at the time.

## **Date of Project**

Engagement activity took place September 2016 - March 2017

## Acknowledgements

All the GP Surgeries in Blackburn with Darwen who allowed us to engage with their patients.

Your Support Your Choice

Healthwatch BwD Volunteers for supporting the project:

- Madhu Pandya
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## **Executive summary**

Healthwatch Blackburn with Darwen worked in partnership with GP surgeries in the borough to explore the views & experiences of their patients.

The report details the findings which briefly found:

- A good service provided by the majority of GP's & surgeries
- Receptionists attitude & decision making was sometimes challenging
- Waiting time both on the phone & for appointments was an issue for some participants
- Lack of time in appointments to address patient issues/symptoms

## Introduction

The Great Practice project explores the views & experiences of local residents in regards to their GP surgery.

Engaging with residents across Blackburn with Darwen we seeked to identify good practice, while identifying challenges experienced by the local community.

## **Statistics**

Blackburn with Darwen is a relatively deprived borough, and the health of people in Blackburn with Darwen lags behind the England average on a range of indicators. Death rates have fallen over the past ten years, but are still generally higher than average in Blackburn with Darwen.

The borough's <u>Standardised Mortality</u> <u>Ratio</u> in 2015 was 121, meaning that there were over 20% more deaths than there would have been if it had experienced the same mortality rates as England and Wales in general. The rate of deaths under age 75 from heart disease and stroke is significantly higher than the England average, and this gap shows no sign of narrowing. However, in the case of premature deaths from cancer, the gap between Blackburn with Darwen and England has virtually disappeared.

<u>Life expectancy</u> for both men and women is lower than the England average. Within Blackburn with Darwen itself, there are considerable differences in life expectancy between the most and least deprived areas of the borough.



- The healthy life expectancy of men in Blackburn with Darwen is 58.0 compared to 63.4 in England
- The healthy life expectancy of women in Blackburn with Darwen is 60.3 compared to 64.1 in England

Priority issues for Blackburn with Darwen according to Joint Health & Wellbeing Strategy 2015-2018:

Start Well		Live Well		A	Age Well	
•	Children & Young People's	•	Alcohol	•	Dementia	
	Emotional Health and	•	Cardiovascular Disease	•	Loneliness	
	Wellbeing	•	Cancer	•	Trips & Fall	
•	Children's Dental Health	•	Sexual Health			

• There are 28 GP practices in Blackburn with Darwen

## **Research Methods**

### Questionnaire

A questionnaire was devised with support from the project task group, this was then completed both in person & online.

## **Drop In**

A series of drop in's were implemented in GP surgeries in which HWBWD staff & volunteers could speak to residents whilst they accessed their surgery.

### Door to Door

Door to door questionnaires were carried out within three localities, Audley, Darwen & Shadsworth. 416 questionnaires were completed in this way.

## Enter & View

An unannounced Enter & View took place to gather resident's views



## Who we spoke to?

- 830 residents took part in the project
- 34% of participants identified as male
- 66% of participants identified as female

Age of participants



■ 16-24 ■ 25-34 ■ 35-44 ■ 45-54 ■ 55-64 ■ 64+

## Findings

What GP Surgery in BwD are you currently registered at?

When did you last speak to a GP or nurse from your GP surgery?

When did you last speak to a GP or nurse from your GP surgery?



- 41.7% of participants had spoken to a GP or nurse from their surgery within the last month
- 21.7% of participants had spoken to a GP or nurse from their surgery in the previous 1-2 months



- 16.6% of participants had spoken to a GP or nurse from their surgery in the previous 2-6 months
- 6.7% of participants had spoken to a GP or nurse from their surgery in the previous 6-12 months
- 7.8% of participants hadn't spoken to a GP or nurse from their surgery for over a year

## How do you normally make an appointment to see your GP?

The majority of participants made appointments over the phone, followed by in person. A very small percentage made appointments through more modern technologies.



Telephone SMS Online In Person Email

- 81.6% of participants used the phone to make an appointment
- 1% of participants used SMS to make an appointment
- 2.3% of participants booked appointments online
- 14.8% of participants booked appointments in person

## How easy was this for you to do?

The main difficulties for participants when making appointments was not being able to get through to their GP surgery & the time to call. Participants didn't like having to go into detail about why they needed an appointment with receptionists.

How easy was it was this for

vou to do?



Very Difficult = Difficult = Neutral = Easy = Very Easy



- 18.1% of participants found it difficult or very difficult to make an appointment
- 62% of participants found it easy or very easy to make an appointment

'Have to ring up at 8.30 am sometimes can't get through until 9am' Shadsworth Surgery

*'Difficult - getting through is hard'* Audley Surgery

*'always in a queue forever'* Witton Surgery

'a lot of people ring up at certain times, they should have more people on reception to take calls' Montague Health Practice

'very difficult, phone line always busy by the time you get through apps have all gone' William Hopwood

*`line is busy 90% of the time'* William Hopwood

'wait for GP to ring back, sat for hours waiting for call back. Not happy about having to give receptionist all details of what's wrong' Limefield Surgery

## Recommendation 1

Receptionists should only ask details about patients that is necessary. Receptionists should not abuse their power of choosing whether someone can have an appointment & when. A patient's confidentiality should be protected at all times.

## Did you get an appointment?

How soon did you get an appointment?



- 35% of participants got an appointment on the same day
- 23.7% of participants got an appointment within 48 hours



- 30.7% of participants got an appointment within a week
- 7.4% of participants got an appointment within a fortnight
- 3.2% of participants had to wait a month or longer to get an appointment

'have to wait as doctor is only part time and I prefer to see her as she knows me and my history and my family' Audley Health Centre

'Within 48 hrs. if I'd have asked for an emergency app. they would have seen me, really good surgery' St Georges Surgery

'they prescribed over the phone which I'm not happy about really' Limefield Surgery

## **Recommendation 2**

Rather than GP's prescribing over the phone for a minor issue or repeat prescription, when patients are happy they should be given the option to be signposted to their pharmacy.



# How convenient was the appointment you were able to get?



- 69.7% of participants found their appointment convenient or very convenient
- 3.8% of participants found their appointment not at all convenient
- 2.8% of participants had to take time of work to attend their appointment

## If you need an urgent appointment to see a GP can you normally get an appointment on the same day?

Just over half of participants were able to get an urgent appointment on the same day, this was largely down to the receptionist they spoke to or

## having to ring at a certain time which wasn't possible for all.



- 53.9% of participants normally got an urgent appointment the same day
- 24.8% of participants did not get an urgent appointment the same day

*'depends who the receptionist is'* Little Harwoood

'No, not really. The doctors are good but can't get past the receptionist, they are terrible.' Limefield

'Sometimes - you have to ring certain time' Lambeth Street

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## **Recommendation 3**

For urgent appointments patients should be able to call at any time during the day. Were possible several appointments should be reserved throughout the day to allow for this.

## How helpful do you find the receptionists at the surgery?

Participants on the whole found receptionists helpful but there was still almost a fifth of participants who found them unhelpful. Participants didn't like receptionists asking them too many details & felt sometimes they had too much power in the decision making process.



How helpful do you find the receptionists at the surgery?



- 19.2% of participants found receptionists at their surgery unhelpful or very unhelpful
- 62% of participants found receptionists at the surgery helpful or very helpful

'sometimes they ask what's wrong with me or try to tell you what to do' Shadsworth

'Very pleasant' Oakenhurst

## Key Topic: Great Practice



## **Recommendation 4**

Receptionists should all receive training in customer service & this should be regularly updated. They shouldn't give out medical advice unless qualified to do so.

## Overall how would you rate your experience of making an appointment?



- 10.2% of participants found the experience of making an appointment poor or very poor
- 63.4 of participants found the experience of making an appointment good or very good

## Is there a particular GP that you usually prefer to see or speak to?

Is there a particular GP that you usually prefer to see or speak to?



- 71.6% of participants has a particular GP that they usually prefer to see or speak to
- 28.4% of participants did not have a particular GP that they usually prefer to see or speak to

'Yes - other GPs ask me same questions instead of looking at notes. Find it difficult with LD. Don't want to have to explain symptoms to new GP.'

Shadsworth Surgery



'No - all are equally good - Dr/nurses alike' Brownhill Surgery

# How often do you see or speak to the GP you prefer?

How often do you see or speak to the GP you prefer?



- 20.9% of participants always so or spoke to the GP they preferred
- 30.6% of participants so or spoke to their preferred GP often
- 11.9% of participants so or spoke to their preferred GP rarely or never

# On the whole how would you rate your GP's practice at:

## Giving you enough time

Giving you enough time



■ Very Poor ■ Poor ■ Neutral ■ Good ■ Very Good

- 8.1% of participants said their GP practice was poor or very poor in giving them enough time
- 71.9% of participants said their GP practice was good or very good in giving them enough time

Recommendation 5 GP's should have the flexibility to allow for double appointments when a patient has numerous symptoms or issues.

## Listening to you

Listening to you



Very Poor Poor Neutral Good Very G

- 6.4% of participants said their • GP practice was poor or very poor at listening to them
- 78.6% of participants said their GP practice was good or very good at listening to them

## **Explaining tests/treatments**



VeryPoor Poor Neutral Good Very Good





- 4.3% of participants felt their GP surgery was poor or very poor at explaining tests/treatments
- 78.2% of participants felt their GP surgery was good or very good at explaining tests/treatments

# Involving you in decisions about your care?



Very Poor Poor Neutral Good Very Good

- 5.2% of participants felt their GP surgery was poor or very poor at involving them in decisions about their care
- 73.9% of participants felt their GP surgery was good or very good at involving them in decisions about their care

## **Recommendation 6**

Patients should be involved in decisions about their care at every stage of the process, relevant communication methods should be in place to allow this to happen for all patients.

# Treating you with dignity & respect?



Treating you with dignity &

Very Poor Poor Neautral Good Very Good

- 4.2% of participants felt their GP surgery was poor or very poor at treating them with dignity & respect
- 86.6% of participants felt their GP surgery was good or very good at treating them with dignity & respect

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# Did you have confidence in the GP you saw or spoke to?

Did you have confidence in the GP you saw or spoke to?



■ Yes ■ No ■ Unsure

- 86.8% of participants had confidence in the GP they saw or spoke to
- 7.9% of participants did not have confidence in the GP they saw or spoke to

'Yes - get confused if don't see same GP in same room' Shadsworth Surgery

'find problem only being able to discuss one thing at a time' Audley Surgery

'No - sometimes he transfers you to someone else. RBH it's a long travel, they just bugger you about' BCW Montague

# How satisfied are you with the hours that your GP surgery is open?

How satisfied are you with the hours that your GP surgery is open?



- Neutral Satisfied
- Very Satisfied
- 7.9% of participants were dissatisfied or very dissatisfied with the hours their GP surgery is open
- 74.4% of participants were satisfied or very satisfied with the hours their GP surgery is open



# Which of the following surgery opening options would make it easier for you to see someone?

Opening options residents would like to see



Early Morning Lunch Evening Weekends

- 27.8% of participants would like to see their GP surgery open early mornings
- 16.3% of participants would like to see their GP surgery open lunchtimes
- 34% of participants would like to see their GP surgery open evenings

• 21.9% of participants would like to see their GP surgery open weekends

**Recommendation 7** 

GP surgeries should explore opening options to best meet residents needs & where possible open early mornings & evenings, as well as lunchtimes & weekends to ensure all residents have parity in access.

## If you need to contact a doctor or nurse when your GP practice was closed what would you do?

What residents would do when their GP is closed





- 47.7% of participants would ring 111 when their GP is closed
- 19.2% of participants would use GP out of hours service when their GP is closed
- 14.9% of participants would use walk in/urgent care service when their GP is closed
- 10% of participants would use A&E when their GP is closed
- Others spoke of speaking with family, calling 999, accessing the chemist or waiting until the GP opens

## **Recommendation 8**

Further promotion should take place to make residents aware of which services to use when their GP practice is closed.

# Would you go to the pharmacy instead of a GP for minor issues?

The majority of participants would go to their pharmacy instead of a GP for minor issues, cost was a concern for some though & awareness of what the pharmacy could provide felt lacked in some areas. Would you go to the pharmacy instead of a GP for minor issues?



- 83.5% of participants would go to the pharmacy instead of a GP for minor issues
- 15% of participants would not go to the pharmacy instead of a GP for minor issues

'fine but have to pay that's what puts people off going' Male 64+



## **Recommendation 9**

The role of pharmacies in health prevention should be greater promoted & residents should be encouraged to access for minor ailments. Prescriptions for minor ailments should be able to be prescribed by pharmacists to reduce cost.

# Overall how would you describe your experience of using your GP surgery?

Overall expereince of using GP



Very Poor Poor Neutral Good Very Good

# Would you recommend your GP surgery to someone who has just moved to your local area?

'No - appointment making is better now (no more ringing at 8 am) but still needs further improvement' Little Harwood

*'Translater would be helpful'* Darwen Health Centre

'Yes, excellent GP's that listen' Little Harwood

'Yes - I have suggested this surgery to other already' Dr Ahmed, Darwen Health Centre

*'A lovely friendly practice'* Brownhill Surgery

'No - lack of understanding and no communication' Stepping Stones Audley

# What's the best thing your GP has done for you?

'Listened to me and given me a double booking to help explain a diagnosis that had caused me to panic' Cornerstone, Lambeth Street

'Stopped me from killing myself - the receptionist offered to take me to church on a Sunday.' Cornerstone, Shadsworth

'Showed consideration and empathy. Allowed me to make choices, speak to me in a manner that's calm and collective, very thorough' Montague health Practice



'All dr's at surgery are very good just appointment system' Audley Health Centre

'None - don't understand mental health issues' William Hopwood

# What does Great Practice mean to you?

'Being taken seriously and not feeling trivialised. My GP makes great effort to reassure me but she never has time due to regulations.' Cornerstone Lambeth Street

'Confidentiality, don't like receptionists asking what is wrong with me' Montague Pratice BCW

'Being able to see my GP and not being referred elsewhere!' Cornerstone Shadsworth

'They let you know they're running late, keep you up to date. Listen.' Audley

'A doctors service open without appointments as was once at Ewood!!'

Mainly seeing preferred GP who knows me Little Harwood

'It is vital to have this and not rely on the internet to figure out what is happening to me when I can't get an appointment. I ended up in hospital because I couldn't get urgent appointment and so self-diagnosed incorrectly.' William Hopwood 'It's a small practice that is near to home, good ambience in waiting room, treated with respect. I am pleased with this practice care.' Brownhill Surgery



## Key Topic: Great Practice



## Conclusion

- No major issues were identified during this project & experiences on the whole were good, although there was room for improvement in a number of areas.
- Receptionists attitude & decision making process was commented on numerous times, with participants concerned about their confidentiality & not being able to see a GP due to the 'luck of the draw' of which receptionist they spoke to, identifying a need for consistency.
- The time spent on the phone was an issue for many participants, often resulting in them not being able to get an appointment.
- The waiting time for appointments was often longer than desired which caused frustration amongst participants, and was likely to impact either

their physical or mental health.

71.9% of participants felt their GP gave them enough time in their appointment, this still left a relatively large percentage who desired more time to best meet their needs.

## Recommendations

### **Recommendation 1**

Receptionists should only ask details about patients that is absolutely necessary. Receptionists should not abuse their power of choosing whether someone can have an appointment & when. A patient's confidentiality should be protected at all times.

### **Recommendation 2**

GP's should not prescribe over the phone unless for a very minor issue or repeat prescription when the patient is happy, in which case patient should be signposted to their pharmacy.

## **Recommendation 3**

For urgent appointments patients should be able to call at any time & a number of appointments should be



reserved throughout the day to allow for this.

## **Recommendation 4**

Receptionists should all receive training in customer service & this should be regularly updated. They shouldn't give out medical advice unless qualified to do so.

## **Recommendation 5**

GP's should have the flexibility to allow for double appointments when a patient has numerous symptoms or issues.

### **Recommendation 6**

Patients should be involved in decisions about their care at every stage of the process, relevant communication methods should be in place to allow this to happen for all patients.

## **Recommendation 7**

GP surgeries should explore opening options to best meet residents needs & where possible open early mornings & evenings, as well as lunchtimes & weekends to ensure all residents have parity in access.

## **Recommendation 8**

Further promotion should take place to make residents aware of which services to use when their GP practice is closed.

## **Recommendation 9**

The role of pharmacies in health prevention should be greater promoted & residents should be encouraged to access for minor ailments. Prescriptions for minor ailments should be able to be prescribed by pharmacists to reduce cost.



## Service Provider Responses

## Blackburn with Darwen CCG

Recommendation	Narrative
Recommendation 1	Agree. Care navigation training is being
Receptionists should only ask	commissioned for all reception staff to
details about patients that is	assist and improve the patient experience.
absolutely necessary.	This may lead to more questions but
Receptionists should not abuse	confidentiality will always be maintained
their power of choosing whether	and protected.
someone can have an appointment	
& when. A patient's	
confidentiality should be	
protected at all times.	
Recommendation 2	Agree. GP led telephone triage is being
GP's should not prescribe over the	used more widely and as such - only if the
phone unless for a very minor	patient is happy - more prescriptions are
issue or repeat	likely to be issued in this way , if clinically
prescription when the patient is	appropriate
happy, in which case patient	
should be signposted to their	
pharmacy. Recommendation 3	All practices have a policy to do this. The
For urgent appointments patients	CCG commissions additional appointments
should be able to call at any time	through locality 'spokes' to ensure urgent
& a number of	GP appointments are always available.
appointments should be reserved	or appointments are attrays available.
throughout the day to allow for	
this.	
Recommendation 4	As per recommendation 1.
Receptionists should all receive	
training in customer service & this	
should be regularly	
updated. They shouldn't give out	
medical advice unless qualified to	
do so.	
Recommendation 5	Not always possible if patient doesn't
GP's should have the flexibility to	advise of problems in advance.
allow for double appointments	
when a patient has numerous	
symptoms or issues.	



Recommendation 6 Patients should be involved in decisions about their care at every stage of the process, relevant communication methods should be in place to allow this to happen for all patients.	Absolutely. Wider use of digital solutions is making this easier
Recommendation 7 GP surgeries should explore opening options to best meet residents needs & where possible open early mornings & evenings, as well as lunchtimes & weekends to ensure all residents have parity in access.	Practices have to open 8am till 630pm Mon to Fri. They can choose to open early or later which some do under a different contract arrangement. However all across BwD Patients can book appts up to 9pm Mon-Fri and on Sat and Sundays from 845am till 230pm through their own practice. But the appointment will be within one centre within the patients locality and not with their own GP or in their own practice
Recommendation 8 Further promotion should take place to make residents aware of which services to use when their GP practice is closed.	Agree and this will be taken up and promoted via the CCG website in due course
Recommendation 9 The role of pharmacies in health prevention should be greater promoted & residents should be encouraged to access for minor ailments. Prescriptions for minor ailments should be able to be prescribed by pharmacists to reduce cost.	The CCG has recently launched a prescribing for Clinical Need Policy which promotes self care and pharmacies as first choice for a whole range of minor ailments. Most minor ailment products are considerably cheaper than a prescription charge. The CCG has asked pharmacies to stock cheaper generic options rather than expensive brands.

## References

Blackburn with Darwen Story of Place, Integrated Strategic Needs Assessment

Blackburn with Darwen Health & Wellbeing Board Joint Health & Wellbeing Strategy 2015-2018

http://www.phoutcomes.info





If you would like more information about Healthwatch Blackburn with Dawen, a hard copy of this report or to find out how you can get involved in future projects please get in touch.

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