



Enter and View Report

*Mendip Vale Medical Practice
Congresbury Surgery
30th November 2017*



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Details of the Visit

Location

Congresbury Surgery

Date and Time of Visit

30/11/17

Enter and View Representative

Karen MacVean

Registered Provider

Mendip Vale Medical Practice

Type of Service

GP Surgery

Specialisms

N/A

Surgery Manager

Sarah Voce

Acknowledgements

Healthwatch North Somerset Authorised Enter and View Representatives wish to thank Mendip Vale Medical Practice and in particular the staff and patients at Congresbury Practice.

Purpose of the Visit

Healthwatch North Somerset is carrying out a series of visits to GP Practices in North Somerset to ascertain the experience and opinions of local patients. Mendip Vale Practice at Congresbury was selected as part of our series of North Somerset GP Enter and Views of GP Practices in North Somerset.

Healthwatch North Somerset made the decision to visit GP Practices in North Somerset to observe the patient experience of using the services. Feedback gathered from local people provides a lot of positive feedback and there are numerous examples of good practice. Access to primary care is a theme frequently identified in the intelligence gathered by Healthwatch North Somerset and Enter and View visits allow observation of the patient environment.

The purpose of this enter and view visit was aimed at outlining what was observed and recognising, highlighting and sharing of good practice and making any suitable suggestions for improvement to the service concerned.

The report may also make recommendations for commissioners, regulators or for Healthwatch North Somerset to explore particular issues in more detail. Unless stated otherwise, Enter and View visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch Enter and View visit are referred to the service provider and appropriate regulatory agencies for their rectification.

This report relates only to this specific visit and feedback received directly by Healthwatch North Somerset during the two hours of the Enter and View visit. It is not representative of all service users, only those who contributed within the restricted time available, through interviews or other feedback.

Description of the Service

Congresbury Surgery is part of the group of five GP practices that make up Mendip Vale Medical Practice. Situated in a semi-rural area of in North Somerset, Mendip Vale Medical Practice has approximately 26,000 patients who all have access to any of the five Practice surgeries. Congresbury Surgery opens from 8.30am -1.30pm Monday to Friday.

Planning for the visit

The visit was an announced visit with the Mendip Vale Medical Practice General Manager and Congresbury Surgery Practice Manager being given two weeks' notice. We sent a confirmation of visit letter, posters and leaflets to the surgery / health centre to inform patients, relatives, carers and staff about the Enter and View visit and about the role of

Healthwatch North Somerset. The timings of the visit were at the request of the practice but found that on our visit the surgery was very quiet during the visit period. As part of the planning the Enter and View Representative did some background research - online and out of hours.

How was the Enter and was Conducted?

One Enter and View Representative carried out the visit. The Enter and View representative met with the Surgery Manager at the start and at the end of the visit.

The Enter and View Representative observed the condition of the premises and the interaction between the staff and patients.

The Enter and View Representative was approached by one patient but did not have a conversation with any of the Practice clinical or administrative staff other the receptionist and the Practice Manager. The information and evidence detailed in this report is collated from speaking to the Practice Manager and the Enter and View Representative's own observations.

The Enter and View Representative sought background information and reviewed the website to note the information available to patients and made a call out of hours to note the recorded information given to patients.

How were the findings recorded?

Comments and quotes were recorded by the Enter and View Representative whilst observing the Practice and engaging with the Surgery Manager. Observation and prompt record templates were used to make notes, these were typed up after the visit by the Enter and View Representative. The report was compiled and written based on the notes and records of the visit.

Communication with the Manager

The Enter and View Representative met with the Surgery Manager immediately before the Enter and View. Three prompt questions were used to establish instances of good practice, evidence change occurring because of patient feedback and identify potential improvements. The three prompt questions and responses are recorded below.

Q1. Are there any examples of good practice that you would wish to share with the rest of the primary care community?

- ➊ There is a practice car and driver available for all Mendip Vale Practice surgeries. This transport is accessed through a clinical staff referral (mainly the GP) to bring patients to the surgery who would otherwise struggle to get there.
- ➋ The Contact Patient Scheme - Practice Admin contact 3 or 4 vulnerable patients fortnightly to check on their wellbeing. (Originally this arrangement was used by St George Practice but when the 'Mendip Vale Medical Group' formed the rest of surgery's in the group adopted this system)
- ➌ Midwives from Weston General Hospital are available on certain days
- ➍ Private physiotherapists use the surgery to see patients
- ➎ A Health care nurse is available and there are usually two GPs on site

- Being part of a group of practices provides flexibility of getting staff in to cover sickness and holidays from across the group so do not have to use locums
- Patients can access any of the five surgeries' in the Mendip Vale Medical Practice group
- Developed close partnership relationship with Village Agents and local communities.
- The Practice has developed skills in supporting the local travelling community to aid access to health care
- There are District Nurses based in Langford and St George surgeries to cover area
- The General Practice Manager advised the Enter and View Representative, that the phone and computer system are linked for all the 5 Practices in the Mendip Vale Practice. Calls to any Surgery in the Mendip Vale Practices are answered by the first available receptionists from across the 5 Surgeries. which reduces patients call waiting times. The volume of calls and the call wait times are monitored continuously throughout the day by the General Practice Manager, so in busy periods other staff can be pulled in to answer calls.

Q2. Do you have any examples of how the Practice made changes following feedback from patients?

- The Practice car is now available to bring in patients who would otherwise struggle to get to the surgery. This was an issue raised by patients in the past.
- Rapid access to GP's with the flexibility in place for patients to access all four surgeries in the group. This also had been an issue raised by patients.

Q3. From the surgery's perspective, are there any changes or recommendations you would make to improve access to services at the practice for patients?

- The current surgery is not purpose built and restrictions of the building make disabled access to certain treatment/consultation rooms difficult. After consultation with local communities, Congresbury Surgery and Yatton Surgery will be closed and a new purpose-built surgery will be built by the end of next year (2018). The new surgery will be located in-between both communities
- Discussions with local transport providers to ensure easy access is in place to enable patients to get to the new Surgery.

Observations and Findings

The Enter and View representative observed the following:

External Building Condition

- Congresbury Surgery is a converted residential bungalow set back from a busy main road with a car park in front. There are mature hedges all round that shield the building from the road but there are no identifying signs to indicate the surgery is

there. There is a path to the side of the building that led on to a ramp to access the building.

- There is surgery name, contact details and opening times information on the main entrance door.

Internal Decoration, Cleanliness and Furnishings

- Internally the building was observed as very clean and neutrally decorated. The waiting room and the one treatment room that was observed were also very clean, bright and roomy.
- There is a big window in the waiting room covered with white net curtains.
- The toilets that were viewed were clean with access space for a wheelchair and baby changing facilities. The washbasin was at an appropriate height for all users. Useful information was displayed about the importance of, and how to, wash hands properly.
- The offices were located at one side of the building and were accessed by using a door security code.
- The treatment and consultation rooms were accessed from the waiting room through a looped corridor.

Outside Congresbury Surgery

- Congresbury Surgery is a converted residential bungalow situated on a busy main road.
- It was quite hard to identify the Practice from the road. There was no signage facing the road to show where the surgery was, but the Practice is set back off the road with a car park to the front.
- The car park was very small with seven parking spaces plus one disabled space. There were also two parking spaces reserved for GP's.
- A public car park was located a 4-minute walk away, there was no on-street parking.
- There were bus stops on both sides of the road very near the surgery.

Access to Congresbury Surgery

- The main entrance is located at the side of the building which has pedestrian access and an access ramp for wheelchairs and pushchairs.
- There is clear signage on the main entrance door displaying welcome, opening times and directions to the reception desk.
- Entrance is through two doors to the reception. The doors were quite stiff and not automated.

Reception Area

- The reception desk was located just inside the main door, to the side, and consisted of a high desk with sliding glass panels which were opened when the receptionist needed to communicate with patients, it did not appear to be very wheelchair user friendly.
- On the day of the Enter and View visit there was one receptionist on duty which appeared to be adequate for the patient flow and to answer phone calls. The Enter and View Representative did not observe a queue at any point during the visit.
- The receptionist wore an ID badge, as did the Surgery Manager. All staff observed were very welcoming, helpful and friendly.

- There was a lack of privacy at the reception desk; conversations could be overheard by people waiting in the waiting room. Patients who phoned had more privacy as the glass screens could be pulled across.
- The Enter and View Representative could not find a hearing loop sign and the Surgery Manager confirmed the facility was not available.

Waiting Room

- There was an electronic sign-in screen with sanitiser gel available next to it.
- The waiting room was bright and airy with a coffee table in the middle displaying some information, magazines and local newspapers.
- The chairs were placed round the room and there appeared to be plenty available.
- Some chairs were upholstered, and some were plastic. Some of the chairs had arms for leverage and there are two children's chairs available.
- There was room to manoeuvre wheel chairs and pushchairs around the waiting room area but the corridors to the consultation and treatment rooms appeared narrow and quite dark which could make it difficult to manoeuvre wheelchairs and pushchairs around especially double buggies.
- Doorways appeared to be of normal size; so it could be difficult to get wheelchairs and pushchairs in and out of the consultation/treatment rooms.
- The flooring was laid with laminated flooring and in good order.
- Drinking water was not provided.
- The waiting room was very quiet, and people appeared to be seen quickly by the clinical staff.
- There was no background music playing (the Enter and View Representative was told later by the Surgery Manager this was due to patient choice).
- There was a screen on the wall, but it was not switched on. The Surgery Manager advised that it was not used.
- Waiting times were not displayed. The Enter and View Representative observed that patients did not appear to wait for much longer than five minutes for their appointments.
- Toilets were clearly marked for men and women; both doubled up as disabled toilets (disabled sign on both doors). The women's toilet indicated there were baby changing facilities.
- All clinical staff came into the waiting room to collect and welcome patients by announcing their name.
- There was DIY blood pressure machine available in the corridor.

Information Boards/Leaflets

- There was a board displaying the Surgery GP's and Nurses names.
- The Practice Mission Statement was displayed.
- PPG (Patient Participant Group) information was displayed.
- Information regarding the surgery's on-line services was displayed.
- Friend and Family Test forms were visible along with a comment box for the completed forms to be posted in, as well as other comments.
- Feedback from patients was displayed but quite hard to see. The Enter and View Representative. There was however very little display space due to the nature of the building.
- Results of a consultation that had been carried out about the proposed closure of the Wrington Surgery were displayed.

- Up to date health and social care information was displayed.
- General information regarding health issues, support groups and research was available.
- Healthwatch North Somerset leaflets were displayed, as well as posters regarding the Enter and View visit.
- There was no a direct information board for carers but there was a specific section with information for young people.
- DIY chlamydia test kits were available in the foyer and in the women's toilets.
- The Enter and View Representative discussed with the Surgery Manager that there was no visible information regarding translation or information being available in different formats. The Surgery Manager advised that if needed the staff would use language line and staff received regular training about dealing with different situations, so they would be able to respond to individual patient needs. The Surgery Manager advised that information about translation was on the surgery website. They had so far, not had a situation where information was needed in a different format, but this would be addressed if it occurred.

Patient Contact

- During the visit, one patient spoke to the Enter and View Representative asking what they were doing at the surgery. The Representative explained the purpose of the visit, the patient declined to fill in a questionnaire, but advised that the surgery was very good, and they had no complaints about the care they received, not only from Congresbury Surgery but from the NHS in general. After being seen by the clinical staff this patient advised the Enter and View Representative that the treatment room had been very cold. The Enter and View Representative was told by the Surgery Manager that a problem had already been identified with the heating and an engineer had attended that morning and was coming back to rectify the problem.
- The Enter and View Representative observed that the receptionist was helpful and polite to the patients who went to the reception desk.

At the end of the Enter and View visit the Representative met with the Surgery Manager to clarify any issues that were unclear. The responses are added to the feedback above.

Good Practice

- A Practice car is available to ensure vulnerable patients can access their GP and primary care health services.
- Flexibility across the Practice group ensures patients have a choice of which surgery to go to enabling them to see a GP quickly.
- Welfare Checks are carried out fortnightly on vulnerable patients.
- The monitoring and flexibility of the Mendip Vale Practice linked phone and computer systems across all 5 practices, reduces patient call-waiting times.

Out of Hours

As part of the background research the Enter and View representative noted the following details when they phoned the surgery out of hours: -

- The name given was for the practice group 'Mendip Vale Practice'. Congresbury surgery was not named specifically
- The phone message detailed the Mendip Vale practice phone line opening hours

- There was clear information on redirecting your call, including NHS 111 for general non-life-threatening illnesses and 999 for emergency treatment
- The message ended without advising you could not leave a voice mail message

Review of the Practice Website

As part of the background research the Enter and View representative noted the following details when researching the website: -

- Congresbury surgery website is incorporated on the main Mendip Vale Practice website.
- The website was reasonably easy to navigate both on a PC and a mobile phone.
- The most relevant information pertaining to the surgery for example, the opening times, contact details, location, registering and out of hours information can be found by clicking on the main information tabs (with drop-downs) running along the top of the page.
- There was a lot more information contained in an extensive list of tabs on the right-hand side, which was more difficult to navigate. For instance, it was difficult to find the complaints procedure which was contained in the 'Patients Charter and Policy' tab on the right had side. On eventually finding the complaints information there were no forms to download or no direct contact number for the practice manager, whom you were directed to contact.

Recommendations

Healthwatch regulations stipulate that service providers and commissioners have a duty to respond to local Healthwatch reports and recommendations within 20 working days, in writing, to acknowledge receipt and to explain what action they intend to take; or if they do not intend to take action they must explain why. (Health and Social Care Act 2012: Addendum to summary report: issues relating to local Healthwatch regulations).

Healthwatch North Somerset recommends the following based on the Enter and View Representative's observations and feedback received by the public in North Somerset.

We believe the following recommendations to be achievable, affordable and evidence based:

- Due to the lack of visibility externally, it is recommended that a sign identifying the surgery is placed so it can be seen from the road and/or pavement. This would ensure new visitors/patients could find the surgery more easily.

Provider Response

- None received

About Healthwatch North Somerset

Healthwatch North Somerset is the local independent voice for health and social care services. We work with local people to improve services for people who live, or access services in North Somerset, gathering local views and experiences and acting on them to make local services better, now and in the future.

Healthwatch North Somerset's statutory function and remit, which is laid out in The Health and Social Care Act 2012, is to provide a voice for people who use health and adult social care services, by:

Influencing

- Giving people an opportunity to have a say about their local health and social care services, including those whose voice isn't usually heard
- Taking public views to the people who make decisions - including having a representative on the Health and Wellbeing Board (People and Communities Board in North Somerset)
- Feeding issues back to government via Healthwatch England and the Care Quality Commission (CQC)

Signposting

- Providing information about health and social care services in the local area
- Advising people on where to go for specialist help or information (signposting)
- Helping people make choices and decisions about their care
- Working closely with other groups and organisations in the local area.

Enter and View

To enable Healthwatch North Somerset to gather the information it needs about services, there are times when it is appropriate for Healthwatch North Somerset staff and volunteers to see and hear for themselves how those services are provided. That is why the government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch North Somerset representatives to enter premises that service providers own or control to observe the nature and quality of those services.

Healthwatch North Somerset Enter and Views are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch North Somerset to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch North Somerset Enter and View Authorised Representatives are not required to have any prior in-depth knowledge about a service before they visit. Their role is to observe the service, talk to service users and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report.

Legislation allows 'Enter and View' activity to be undertaken with regard to the following organisations or persons:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities

- a person providing primary medical services (e.g. GPs)
- a person providing primary dental services (i.e. dentists)
- a person providing primary ophthalmic services (i.e. opticians)
- a person providing pharmaceutical services (e.g. community pharmacists)
- a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or care services (e.g. adult social care homes and day-care centres).

Key Benefits of Enter and View

- To encourage, support, recommend and influence service improvement by:
- Capturing and reflecting the views of service users who often go unheard, e.g. care home residents
- Offering service users an independent, trusted party (lay person) with whom they feel comfortable sharing experiences
- Engaging carers and relatives
- Identifying and sharing 'best practice', e.g. activities that work well
- Keeping 'quality of life' matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a 'critical friend', outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and carers play an integral part in local commissioning.

Relevant Legislation

- The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).
- The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013.” (28 March 2013).
- The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).
- The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013.” (28 March 2013).



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