

A Patient's View of North Somerset General Practice

Enter and View Project Summary Report
November 2017 - April 2018



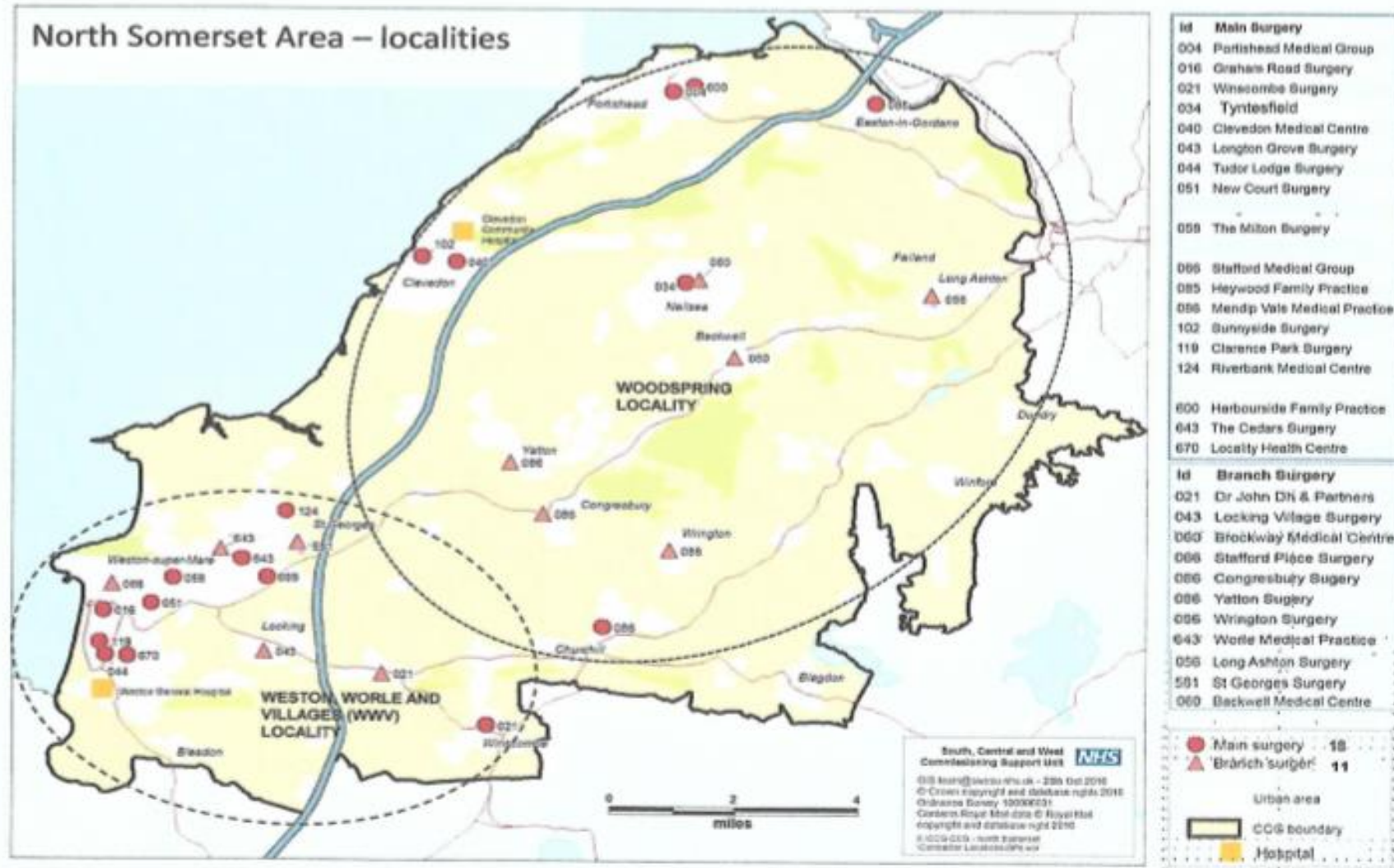


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Map and Location of GP Practices in North Somerset



Executive Summary

Healthwatch North Somerset receives a great deal of feedback from the public relating to experiences of GP Practices.

Generally, the feedback gathered shows more positive feedback is given than negative.

When reviewing the feedback received, the Healthwatch North Somerset Prioritisation Panel recommended further investigation into General Practice with a focus on good practice and improvements made following patient feedback.

The purpose of the Enter and View visits was aimed at outlining what was observed and recognising, highlighting and sharing of good practice and making any suitable recommendations for improvement.

The role of the Enter and View Representatives was to observe each Practice as if they were new patients entering the Practice for the first time and locating information.

Standard Enter and View procedures were reviewed and adjusted to accommodate this work which required a different observation technique than other Enter and View visits. Relevant training and processes were put in place to ensure the Authorised Representatives were prepared for the visits.

When attending the local Practice Manager's Forum, to outline the project, a request was made that no direct approach would be made to patients during the Enter and View visit. The visit would be observation only and a further request was made that Authorised Representatives did not Enter and View the Practice at which they were registered.

Individual GP practices were visited from November 2017 to end April 2018, in total 28 sites had Healthwatch North Somerset Enter and View visits and reports created for each visit.

Over 150 recommendations in total were made in the Reports including:

- Displaying Practice staff names
- Comments/Concerns/Complaints
- Patient Participation Group (PPG)
- Access to buildings
- Access to and provision of information
- Providing water for patients
- Waiting room chairs
- Privacy
- Mission Statements
- Hearing Loops
- Cleanliness/safety
- Carers
- Dementia Friendly

A mystery shopper exercise was undertaken alongside the Enter and View visits. The "mystery shopper" reviewed information about out-of-hours services, complaints, catchment areas and registering as a new patient.

The Mystery Shopping exercise demonstrated the experiences patients would have when accessing the websites including seeking information should they wish to make a complaint. Only four of the Practice websites provided an adequate level of information and access to policy/forms.

The Enter and View Representatives also looked at the process of registering as a new patient and how patients can find out if their address was in the right catchment area eg there were a number of ways patients could register, however many Practices had little information about catchment areas and relevant forms were not available to download.

In providing this report Healthwatch North Somerset seeks to highlight, share and acknowledge the good practice that occurs in GP Practices throughout North Somerset.

Acknowledgements

Healthwatch North Somerset wish to thank the Practice Managers, Practice staff and patients of North Somerset who without their invaluable input we would not be able to complete this report.

Healthwatch North Somerset Authorised Enter and View Representatives

Anne Skinner
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Jane Towler
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Karen MacVean
Vicky Marriott
Gill Auden
Maisy Griffiths

In addition, we would like to thank Vision North Somerset and Dementia Support (Alzheimer's Society) for information provided on specific areas of best practice to support patients, from the observations made in the Enter and View Reports. The work of Sue Stone, Healthwatch North Somerset volunteer, acting as a co-ordinator enabled this project to be completed and is thanked for her vital contribution.

Background

Healthwatch North Somerset decided to visit GP Practices and take the opportunity to look at the patient environment to gain a comprehensive knowledge of good practice and improvements made from public feedback. As the first point of access for most patients and the most commonly accessed Primary Care service feedback about patient experiences and access to GP Practices are themes frequently identified in the intelligence gathered by Healthwatch North Somerset and discussed at the quarterly Prioritisation Panel meetings.

Healthwatch North Somerset has published several previous reports which have covered many aspects of General Practice in North Somerset:

- ➊ Good Practice: GP Services in North Somerset (June 2014)
- ➋ GP Practice Website Review (August 2014)
- ➌ GP Practice Survey Report (March 2015)
- ➍ Report on GP Practice: Public Feedback (January - September 2015)

- Missed GP Appointments (October 2016)
- Access to GP Appointments (December 2016)

Healthwatch North Somerset Reports can be accessed through the Healthwatch North Somerset website www.healthwatchnorthsomerset.co.uk/about-us/our-work/. *If you wish to receive the Reports in alternative formats please contact Healthwatch North Somerset.*



Healthwatch North Somerset receives from local people a lot of positive and negative feedback, alongside individual examples of good practice on a Practice by Practice basis.

This set of Enter and View observations allowed Healthwatch North Somerset to gather together the findings in one report and provide information on good practice for sharing with the wider community and service providers and commissioners.

This document provides the methods and summary of the observations made and information gathered by Healthwatch North Somerset when undertaking Enter and View Visits in General Practice.

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).

Aims and Objectives

The purpose of the Enter and View visits of GP practices was aimed at outlining what was observed and recognising, highlighting and sharing good practice and making any suitable recommendations for improvement, both on the day and within the report. The role of the Enter and View Representatives was to observe as if they were new patients entering the Practice for the first time and locating information.

This report combines the feedback and examples of good practice from each of the contacts made during the visits and feedback during the 28 GP Practice Enter and View visits.

There was an initial meeting with Practice Managers at their Practice Manager Forum to discuss the proposed Enter and View visits and agree the parameters which would include observing access, patient interaction, facilities and the general environment, availability of complaints procedures and systems for calling patient to appointments. In addition, working with the individual Practices assisted in building relationships and a greater understanding of each Practice.

Methodology/Planning

Initially the Healthwatch North Somerset team met to discuss and agree how to undertake a recommendation by the Prioritisation Panel for a review into General Practice services from a patients' perspective.

The team agreed to develop the proposal as an opportunity to 'get to know' each individual Practice through a series of observational Enter and View visits with a view to identifying best practice. The project would entail a great deal of work to run alongside the day to day work undertaken by the team and it was agreed that additional support was required. It was agreed to seek that support and help to coordinate the work from Healthwatch North Somerset volunteers who had a special interest in primary care.

Staff reviewed the Enter and View processes and standards to accommodate this work and ensure the relevant training and processes were in place. During the meeting with the Practice Manager's a request was made that no direct approach would be made to their patients during the Enter and View visit, the visit would be observation only.

Agreement between the staff was made regarding the aspects of the role the Enter and View Co-ordinator could take up. The Engagement Officer remained the Enter and View Lead, the Volunteer Co-ordinator would continue to manage the Enter and View Representatives and make the first contact when dates became available for the visits.

- The Volunteer Enter and View Co-ordinator was provided with a Healthwatch North Somerset email address to ensure all contact was recorded.
- An Enter and View log was developed to record all activity for the project. This was provided in an accessible cloud-based folder to enable access and shared updating.
- A series of standardised templates and letters were agreed for use in all GP Practice Enter and View activities.
- A pilot was undertaken during November/December 2017, comments were received about the process and these were noted and adjustments made as the visits continued from January 2018.

All the visits conducted by the Enter and View Representatives were announced visits. The individual GP Practices were initially contacted by the Volunteer Enter and View Co-

ordinator. Once a date and time for the visit was agreed with the Practice, the Healthwatch North Somerset office confirmed the visit in a letter enclosing posters and leaflets to inform patients, relatives, carers and staff about the Enter and View visit and about the role of Healthwatch North Somerset.

As part of the planning prior to each visit the Enter and View Representative did some background research - to view the information provided to patients online and the phone message for patients who called the surgery out of hours.



The Enter and View Visit

Healthwatch North Somerset trained and Authorised Enter and View Representatives carried out the Enter and View visits. This usually involved one representative however on some occasions two attended, to provide support to a newly trained Representative. The representative/s would meet with the Practice Manager at the start and at the end of the visit. Following the initial meeting, the Representative would then move onto the observation of the premises and observation of the interaction between the staff and patients.

Enter and View usually includes Representative talking to patients, staff and carers, but for this project the Practice Managers had asked for the representatives not to approach patients directly. One Practice however gave permission and the Representative was able to speak to several patients using a structured format, this was reflected in the report for this Practice. Otherwise patient contact was gauged from anecdotal comments made to the Enter and View Representative whilst looking at the premises they were reporting on.

The information and evidence detailed in each individual Practice report was collated from speaking to Practice staff and patients and the Enter and View Representative's own observations.

Each 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 eg how is easy was it to find information if a patient needed to raise a concern, and details about catchment areas/registering as a new patient.

How Were the Findings Recorded?

The four templates used were “*Getting to know your Practice; Observation Sheet; Conversation based Questionnaire and Mystery Shopper*”. Comments and quotes were recorded by the Enter and View Representative whilst observing the Practice and engaging with the Manager of the Practice.



The templates were used to make notes, record observations and as an aid to writing the report. The report was compiled and written based on these notes.

The templates were developed to reflect and achieve the aims and objectives for the Enter and View visits in General Practice.

Reflections

What Have We Learnt About The Process?

- Although comments were made about timings of visits - ie attending the Practice early to catch if there is a queue, it proved difficult to recruit Representatives willing to undertake an early start
- Coordinating the visits. Although two weeks' notice was given to each Practice, Enter and View Representatives wanted more notice
- Representatives were asked to write the report after the visit using a template provided. This required a substantial expectation of volunteer time for the visit and writing the report which was on average 14 pages per report. Some Representatives were more comfortable than others in report writing.
- During the pilot phase it was clear that there was a need to factor in breaks in the bookings to allow catch up in the process.
- It is important to understand the Representatives interests - some may not be comfortable with format for GP however happy with group visits such as a care home
- Clarity about the commitment required for and Enter and View Representative.

What the Volunteer Enter and View Co-ordinator learnt

- Don't expect to speak to your contacts straight away, factor in the best times to speak to busy Practice Managers
- Ensure able to have uninterrupted time working from home
- Be prepared to explain the process and role of Healthwatch North Somerset as some of the contacts may not be aware of the organisation.
- Ensure key points covered in the conversations: observing the Practice as a patient; a fresh pair of eyes gives another perspective
- Make sure all the Representatives have the technology to open documents and have time to write the reports.
- Availability - matching up the Representatives to the dates of the visits.
- Great help to have Healthwatch North Somerset email and access to cloud-based documents improves communication.

“Getting to know your Practice” speaking to the Practice Managers

The Enter and View Representatives met with the Practice Managers or Deputies immediately before the Enter and View visit. The Practice Managers were provided with three prompt questions and returned their responses prior to the visit. These were used to establish instances of good practice, evidence change occurring because of patient feedback and identify potential improvements. Details of the responses to the prompt questions can be found in Appendix 2 (by question and Practice).

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Question 1

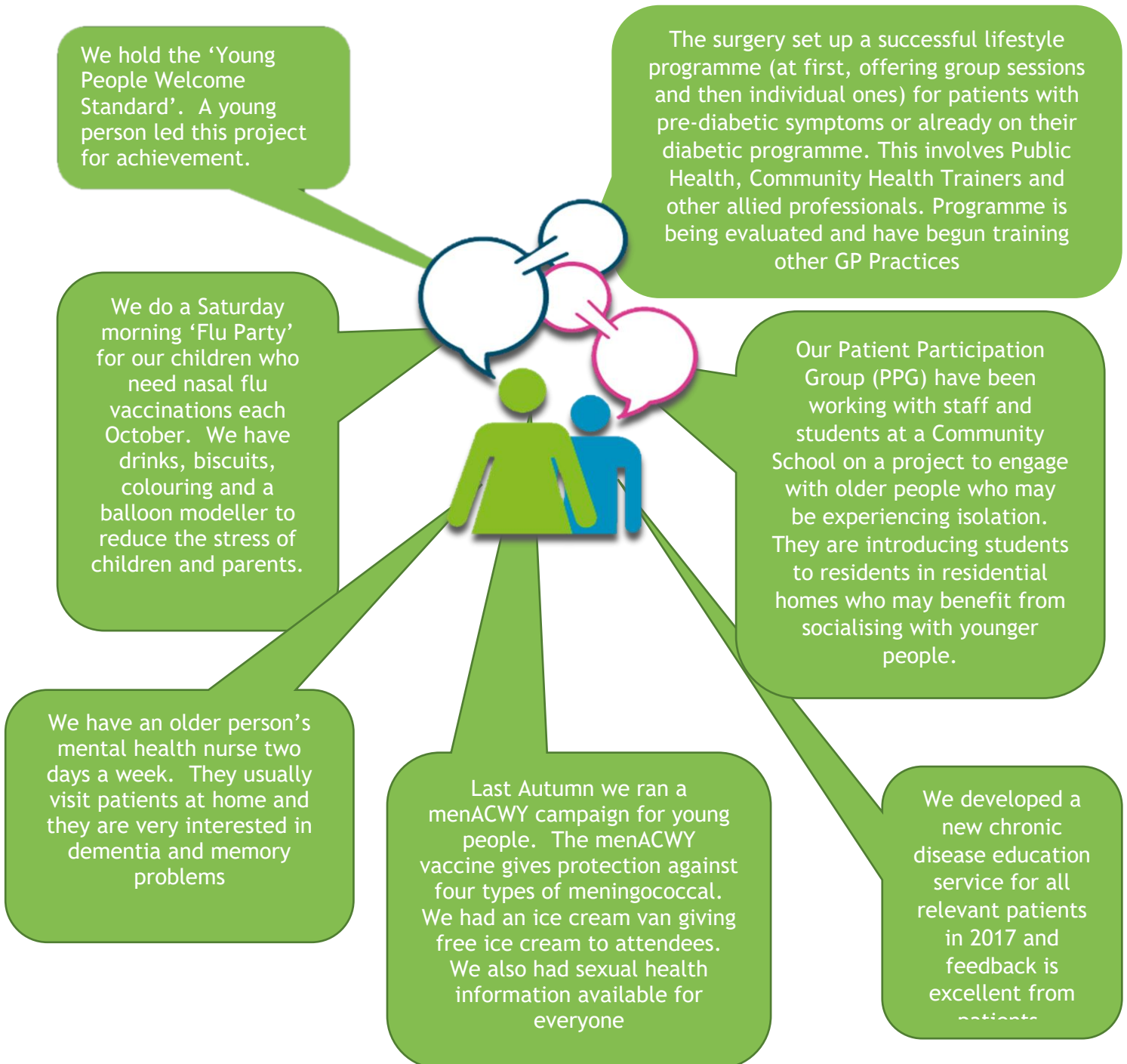
In response to the question

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

The following are highlights of good practice shared with Healthwatch North Somerset Enter and View Representatives.

126

examples of good practice



- Several Practices provided examples of working with their respective Patient Participation Group (PPG). These ranged from meeting topics, meet and greet sessions for patients, newsletters, content of information screens discussed with PPG, patient information evenings and one reporting that their PPG is “fantastic and very active”.
- In relation to appointments, comments were noted in the level of early and Saturday appointments available to patients. Practices also gave examples of text reminders and calls to patients to remind them of their appointment the following day (usually early morning appointments).
- Examples of services available to patients in North Somerset were given such as:
 - Patient led Musculoskeletal (MSK) Physionet service
 - A home visit slot of an hour’s duration in order that a patient with severe frailty or several chronic diseases can be afforded the time for a full review.
 - Chronic disease education, virtual clinics, lifestyle clinics for diabetics (group and individual), diabetic dietician
 - New Clinic for patients with IBS (Irritable Bowel Syndrome) from February 2018. Service includes medical review, medications review, education in IBS and signposting to support services. Once tested the practice aims to follow with Stroke, Coeliac Disease and Diverticulitis.
 - Two Practices have a car service, one provides patients with access to hospital and GP Practice (payment is required) the other provides a service to move patients within their Practice area for their GP/Nurse appointments and specifically for vulnerable patients.
 - Leg Club appointments
 - Minor Operation Clinics
 - Ear Syringing Clinics



Question 2

In response to the question

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



97
examples of
change

The following are the example of changes made after feedback from patients and shared with Healthwatch North Somerset Enter and View Representatives:

We employ a specialist elderly care nurse who manages up to 400 patients in Clevedon's residential/nursing care homes to ensure sufficient support for all patients. Our Doctors conduct regular 'ward rounds' of all care homes on a monthly basis to support care home staff and help avoid unplanned admissions.

We changed our ear syringing policy in response to complaints from patients that they had to wait too long between assessment and the procedure. We now book patients in for the procedure and do a quick assessment at the start of that appointment.

Patients have requested IT support to help them with online access and we will be providing IT support and facilities in the coming months.

We have set up a list of patients with chronic diseases that are **not** covered by the Quality and Outcome Framework (QOF) parameters. The people on this list are reviewed quarterly at our clinical meeting to ensure their conditions are being adequately monitored.

Following discussions at our regular Patient Participation Group meetings, we are looking in to setting up some education sessions for mothers with young children; some would be run by Advanced Nurse Practitioners and some by Dr Yousef who has a special interest in paediatrics. Topics suggested so far include: head lice, threadworms, minor illness in children, paediatric resuscitation and choking.

We have trialled a new system for appointment booking to help prevent queuing in the mornings before we open - this has become too common. We now take requests for appointments throughout the day and prioritise these according to clinical need. This system ensures those who need to be seen are seen. We have had some success with this system and the early morning queues have diminished, however we need to continue to work on this so that people are called back quicker.



Many of the Practices told the Enter and View Representatives that patients had requested changes to the seating in the respective waiting rooms. The patients asked for more chairs with arms/height to help those who had restricted mobility.

Several Practices made changes to reception areas by removing screens. One made structural changes to the entrance to help with access for wheelchairs and buggies. Another installed double-glazing, redecorated and improved flooring throughout the Practice.



There were examples of low-level background music played to ensure confidentiality.

Several telephone systems were changed or modified.



We had examples of newsletters, patient information leaflets

One Practice undertakes regular monitoring of “did not attends” to see if there is a common trend.



Question 3

In response to the question

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

Several ideas were put forward:

THIS WAY

49

recorded comments



Improve patient awareness that reception staff are not being “nosey” or overstepping their mark when asking for a reason for the appointment. They need this information to “signpost” the patient to the most appropriate service/person to deal with their specific problem/query.

Since taking on some additional nursing staff and moving an increasing amount of the SPS workload to LCMC we are rapidly running out of space. We have been in touch with our landlord at LCMC and are negotiating some Practice improvements including converting some of the ground floor admin space to clinical. There is also the possibility of building on two additional consulting rooms. We would have liked to have a lift installed, but apparently this is prohibitively expensive.



We are also considering how we can improve our queuing system at the front desk at Locality Health Centre increasing privacy for patients when they are speaking to our reception team.

All nurses are trained to undertake treatment room nurse duties, with individual nurses trained in a variety of additional specialisms. The Practice would like to encourage individual nurses to develop additional specialisms to improve accessibility of services across all surgeries.



Work flow optimisation - to ensure all post into the practice dealt with efficiently and effectively

More awareness for patients on how to use services more appropriately such as the Minor Injuries Unit at North Somerset Community Hospital in Clevedon and when to use their pharmacy as their first port of call rather than the practice. Use of online information from NHS Choices and Health apps such as HANDi.



- Practices were able to utilise spare room capacity for a range of services including hiring rooms to Positive Steps, Wellspring, Child and Adult Mental Health Service on a regular basis. This gives patients access appointments to additional services without having to travel. For practices that have merged their sites are also offering rooms for the local community.
- Encouraging greater use of Patient On-line (Patient Access), using technology to inform patients about their appointments and test results.
- Regular clinical team meetings to provide continuity across multiple sites.
- A Practice asked for referrals to secondary care to be fast and effective, however stated they had little control over the criteria set by secondary care for patients accessing services or waiting times for those services.
- Discussions with local transport providers to ensure easy access is in place to enable patients to get to the planned new practice building.

Recommendations

The 28 GP Practice Enter and View reports produced by Healthwatch North Somerset contained approximately 150 recommendations. The majority of which were believed to be achievable, affordable and evidence based. Many of the recommendations were actioned shortly after the Enter and View visits by the various Practice/Operational Managers, while others were noted but it was advised they were outside of the control of the provider.



Many of the main recommendations from the Enter and View Representatives focused on

- Identifying Staff** - the Representatives observed that there was a lack of information available for patients when visiting the Practice relating to the GPs and staff, including staff names. Some Practice websites provided this information; however, this was not always available at the Practices visited. An Enter and View Representative noted a concern and past problems of identifying staff who work and living in a small village.
- Signage** - Representatives reviewed internal and external signs. Internal signage to the location of toilets for disabled and baby changing facilities in some Practices was unclear. External signage for patients seeking some Practices could be improved.
- Comments/Concerns/Complaints** -This provides key area of feedback on how services are running and provides a source of information to drive improvements. It was noted that at some Practices there was an expectation for patients to ask for details from reception if they wished to make a complaint. The Representatives found examples of differing information between what was available at Practice level to what was viewed on the websites (*see Review of Websites*). Others could improve by ensuring there were comments forms next to the comment boxes.
- Hearing Loop** - Numerous recommendations were made on the position and visibility of hearing loop signs and / or provision for a hearing loop in a waiting room.
- Patient Participation Groups (PPG)** - there were recommendations made about the visibility and publicity for the Practices' respective PPGs.

- **‘You Said, We Did’ Boards** - inclusion of these boards or using the TV screens was identified as an ideal way to help patients to understand that the surgery is listening to the patients’ voice.
- **Access** - recommendations were made for the provision of automatic doors, widening doorways to consulting rooms, improve communication for a wheelchair user if they were unable to open the door to the surgery, increasing space in a waiting room to ensure manoeuvrability. One other recommendation was to advise people with disabilities where they could park legally and safely nearby to avoid cars blocking the entrance to the surgery.
- **Water** - for those Practices who do not provide a water machine in the waiting room the Representatives asked if signs could go up to let patients know that should they require water to ask the receptionist.
- **Providing Access to Information** - several recommendations centred on giving patients the option to have information provided in other formats/translation.
- **Privacy** - it was noted that in some areas conversations and noise were overheard from reception areas. The Enter and View Representatives suggested the use of background music. Another recommendation was to ask patients waiting to stand back from the reception desk.
- **Waiting Room Chairs** - Many of the Practices reported that they had changed the type of chairs they provided in their waiting rooms following patient feedback. The Enter and View Representatives made recommendations for Practices who had not made the change. Their comments related to both the general condition of waiting room chairs ie renewal/cleaned and providing suitable chairs for those with limited mobility.
- **Out of Hours Information** - the Enter and View Representatives undertook a mystery shopper role to review each of the Practices’ websites. In their findings the recommendations varied from ensuring that patients are made aware that NHS 111 number is free from landlines/mobiles; checking that links on the webpages take the patient onto the correct webpage for NHS 111 (an out of date NHS Direct logo was still on a website). Provide details of walk in centres and local Minor Injuries Unit.
- **Mission Statements** - observation of the Practice mission statements brought a variety of recommendations from the Representatives such as checking the dates, ensuring the statement was on display in waiting areas and not just on the website.
- **Carers** - there were several recommendations relating to information for Carers from putting a notice board up; using the TV screens to promote information for carers; ensuring information is up to date and relevant.
- **Healthwatch North Somerset** - details of the visit were noted however additional information was not available. Recommendations made by the Enter and View Representatives advised the information was available from the Healthwatch North Somerset office and to consider providing a link directly to Healthwatch North Somerset on the Practice website.
- **Cleanliness and Safety** - one Enter and View Representative noted that store cupboard doors were not closed. Regarding cleanliness the focus was on signposting patients to use the sanitising hand gel when booking in and ensuring toilets were cleaned. Improvements were also suggested for one Practice where there were no baby changing facilities. Another representative observed that one branch surgery did not appear to be fit for purpose.

- **Dementia Friendly** - recommendations in relation to Practices becoming Dementia Friendly were made. It was noted by a Practice that this measure was not made at other Practices within the group. In reviewing the recommendations contact was made with Alzheimer`s Society North Somerset on the specific observations. The recommendations made related to flooring, toilet seats and clocks. The advice received are as follows:

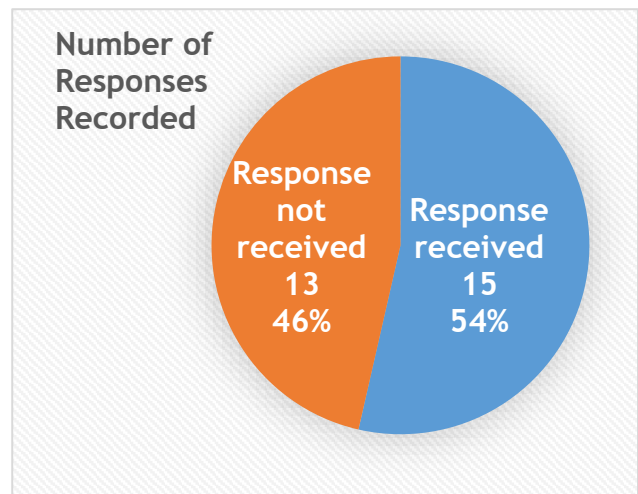
- The flooring was laminate; For people with dementia high shine flooring can look wet and slippery, blue coloured shining floor can look like water and green can look like grass. Matt finish is better.
- The toilet seat should be a contrasting colour to the rest of the toilet also handrails and taps clearly marked hot and cold.
- A more suitable clock would be one showing the day and date and also 24-hour clock

If Practices wish to obtain further information, contact can be made with the Dementia Support Worker or the document¹ *Making your Home Dementia Friendly*, has transferrable information which can be utilised within primary care settings.

Provider Responses

After an Enter and View Report is completed it is forwarded to each service Provider to provide an opportunity to correct any factual accuracies and to provide a response to the recommendations made in the Report. Providers are given 20 days to respond after which a report is published.

- Twenty-seven GP Practice sites were visited where 16 providers deliver services. The chart gives the percentage of responses for each sites/Practice on receipt of their reports, as recorded by Healthwatch North Somerset.
- Following circulation of the reports to respective key stakeholders' further responses were received and these specifically related to
 - Community cars
 - Background music



- One of the Practices which had not provided a response to their individual report, within the 20 days we were pleased to note that the Practice has been using the recommendations and observations as a joint work plan for the Practice and PPG.

¹ https://www.alzheimers.org.uk/sites/default/files/migrate/downloads/making_your_home_dementia_friendly.pdf

Overview of the Observations and Findings

The Enter and View Representatives observed several areas in each of the sites visited. They were asked to observe the external conditions around each site, the internal decoration, cleanliness and furnishings and the location of the surgery.

There are several types of building which house the GP Practices, these vary from converted Victorian houses to purpose-built facilities.

Internal decoration, cleanliness and furnishings were mostly of an acceptable standard. However, some exceptions to this were observed especially in older buildings.

Outside the surgery, the Enter and View Representatives were asked to look at the location and setting for the Practice they were visiting. As previously commented the primary care estate in North Somerset is a mixture of new and old. Several observations and comments were made to and by the Enter and View Representatives in relation to bus stops/services. These focused on where services had been removed from that area, the number of bus changes a patient may have to get to a Practice (one example being three changes) and frequency of services.

The Enter and View Representatives were also asked to observe car parking, access to buildings, the number of and types of doors patients had to negotiate to get into the buildings.

Reception Areas

- There is a mixture of high and low desks with open plan and closed with screens. One Practice told the Enter and View Representative of plans to remove the screens.
- Improving queue management has been discussed to increase privacy.
- We found one Practice that had a door between reception and the waiting room which decreased the possibility of conversations being overheard.
- Hearing loop signs - the Enter and View Representatives found a variety of signs and where



the signs were placed. Most hearing loop kits provide either a blue sign or a burgundy sign. However, if a practice has patients with hearing aids and low vision another sign is available. Black on Yellow is the best contrast to view. Consideration should be given to placing of the signs to ensure patients can see them. Further information is available from Vision North Somerset.

RECEPTION



Waiting Room / Information Boards / Leaflets

WAITING ROOM



➤ **TV screen** - Some Practices still use the JAYEX boards (ticker tape style - red letters on a black background). Several practices now have TV screens in use to inform patients that the GP/Nurse will see them. It is noted that the changes can improve the patient's visual experience with a TV screen with yellow background, black writing and a voice information that gives patient name and room to go to.

➤ **Chairs** - several Practices said that they improved the chairs for their patients with limited mobility following patient feedback. Healthwatch North Somerset was advised there is a set standard for furnishing in buildings less than 5 years old, which does not appear to identify the need for chairs with arms for patients with mobility difficulties.

- **Access to water** - one of the areas of observation was access to drinking water. Health and Safety concerns were expressed by Practices such as slipping on dripped water as reasons for the removal of the water dispensers. However, most Practices advised patients could request water from the staff or reception. Approximately five Practices have water dispensers in place.
- **Carers' Board/information** - apart from 11 practices there was a variety of boards and information being made available to carers. Improved information for carers were one of the recommendations including young carers.
- **PPG Information** - 23 of the sites visited had information relating to the PPG and how to join, although one commented when asked about PPG publicity that they considered it was the responsibility of PPG.
- **Complaint Information** - The level of information and advice to patients varied at Practice level. Enter and View representatives found descriptions of "in house complaints systems" to raise a concern, a patient must speak to receptionist for a form. In addition, at individual Practice level physical information sometimes differed to that on the Practice website. It is recognised that it is better to deal with the issue at Practice level in the first instance however some patients/families may not feel comfortable speaking to the Practice directly. The options that were missing in areas were references to NHS England Customer Services or Independent Complaint Advocacy such as SEAP. In reviewing the observations, it was reported that seven practices did not have any visible complaint information.
- **You said, we did** - the Enter and View Representatives observed seven boards/pieces of information relating to you said, we did. Suggestions were also made to utilise the TV screens in waiting rooms to give the message that Practices are listening to patient feedback through the "you said, we did". Sixteen of the sites visited had no visible information for patients to demonstrate that the Practice was listening to feedback, negative or positive.



Patient Contact

A few Practices agreed for the Representatives to speak directly to patients. The information gathered was fed back within the individual Practice report. Much of the patient contact produced anecdotal evidence that services were well run, staff interaction was positive, several Practices were praised for on the day appointments. One Practice had calming background music, as reported by the Enter and View Representative and patients at that Practice.

Communication with Practice Manager at End of Visit

At the end of each of the visits the Enter and View representatives met with the Practice Managers to clarify any questions or observations they had made. The majority of these were remedied and quickly resolved by the Practices ie signage, use of technology for patient information, cleaning.

Healthwatch North Somerset recognised that some of the recommendations were outside of the control of the Practices when they explained the position in their individual responses. Such an example was road signs giving patients directions to the practice buildings.



Out of Hours

As part of the background research Enter and View Representatives acted as mystery shoppers. This involved phoning the Practices out of hours and reviewing the Practice websites. The Representatives were tasked to identify what information patients were given to contact out of hours service.

- On listening to the messages patients were informed about the services and when to contact, NHS 111 (non-urgent attention that cannot wait until the surgery opens and 999 (life threatening conditions).
- The Enter and View Representatives were asked to check if patients were notified that calls to NHS 111 were free from landlines/mobiles. Each of the Practices visited were called out of hours - 54% informed the callers that NHS 111 was free to call, 46% did not.

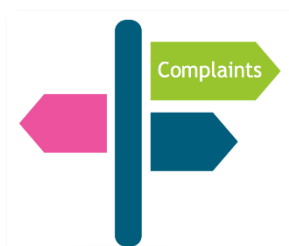
Review of the Practice Websites

As part of the background research the Enter and View Representatives were asked to review the Practice websites using either a laptop/computer or iPad/smartphone.

- The Representatives noted that depending on the equipment used to view the websites they could have a basic information or were able view the full website with one click.
- Following the calls made for out of hours the Representatives were asked to check the out of hours information on the Practice website. Most of the websites viewed had reference to NHS 111 and 999 information, some of these also made the patient



aware that calls to NHS 111 were free. Additional information such as accessing Minor Injury Units and Urgent Care Centres was also seen. However, a few NHS 111 logos did not link to the NHS Choices website where further information is available for patients. The website that had a NHS Direct logo has removed this. Comments by Representatives noted that they had to look in several places to find the information on the individual practice websites.

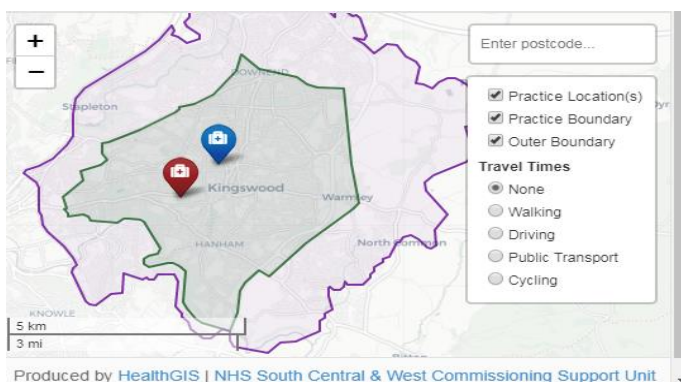


• The Enter and View Representatives were asked to search for information about complaints information. Only four of the Practices had an adequate amount of information and accessible forms for patients to download.

Some Representatives needed to use search functions on Practice websites to find information; others found information by clicking on various tabs.

Examples were found of speaking only to the Practice Manager if a patient had a complaint without other options for support or direction if the patient did not feel comfortable speaking directly to the Practice.

- The key message for patients wishing to raise a complaint or concern is to speak to the practice. However, if they do not wish to do this or are uncomfortable speaking to the practice they can contact NHS England Customer Support Team. Should they require support to make a complaint, this may be available from an Independent Complaint Advocacy such as SEAP.
- Once a complaint has been investigated by either the practice or NHS England and the complainant remains dissatisfied they can go to a second stage which is the Parliamentary and Health Service Ombudsman.
- Both PALS (Patient Advice and Liaison Service) and Healthwatch North Somerset would signpost the contact to the most appropriate organisation.
- Easy access to forms, consent forms and information about complaints on a website would benefit patients.
- Catchment areas and registering as a new patient was the task set for the Mystery Shopper. Many Practice websites had little information about their area and provided static maps, which were difficult to read, and others had a written description.
- A few Practices use interactive maps², which allow the patient to type in their postcode and they are then advised whether they are in the catchment area. This is a benefit to patients in that they do not need to call the



² Reproduced with kind permission of NHS South, Central and West Commissioning Support

Practice to determine if they are in the catchment area. It should be noted that new patients moving to the area may use NHS Choices, which provides a list of Practices in order of mileage. However, these mileages do not necessarily match a Practice catchment area. *(Practices can contact NHS South, Central and West Commissioning Support Unit, HealthGIS for further information about GP Map.)*

- The Representatives found some Practice websites provided downloadable forms. Others expected new patients to visit the Practice to collect forms, which for some new patients may not be possible during opening times.



Appendices

Appendix 1: GP Practice Sites visited

Group	Practice Address	Website
Longton Grove Surgery	Longton Grove Surgery 168 Locking Road Weston-super-Mare BS23 3HQ	www.longtongrovesurgery.co.uk
	Locking Village Surgery Locking Village Hall, Grenville Avenue Locking BS24 8AR	
The Cedars Surgery	The Cedars Surgery 87 New Bristol Road, Worle BS22 6AJ	www.cedarssurgerywsm.com
	Worle Health Centre 125 High Street Worle BS22 6HB	
Mendip Vale Group	Yatton Surgery 155 Mendip Road Yatton BS49 4ER	www.mendipvale.nhs.uk
	Langford Surgery Pudding Pie Lane Langford BS40 5EL	
	Congresbury Surgery Station Road Congresbury BS49 5DX	
	St Georges Surgery 135 Pastures Avenue St Georges BS22 7SB	
Sunnyside Surgery	4 Sunnyside Road Clevedon BS21 7TA <i>Note: from 01/07/2018 merged with Mendip Vale</i>	www.sunnysidesurgery.co.uk
Riverbank Medical Centre	Walford Avenue Worle BS22 7YZ	www.riverbankmedicalcentre.co.uk

Group	Practice Address	Website
Heywood Family Practice	Lodway Gardens Pill BS20 0DL	www.heywoodfamilypractice.nhs.uk
Tudor Lodge Surgery	3 Nithsdale Road, Weston-super-Mare BS23 4JP	www.tudorlodesurgery.nhs.uk
New Court Surgery	168 Locking Road Weston-super-Mare BS23 3HQ	www.newcourtsurgery.nhs.uk
Clevedon Medical Centre	Old Street Clevedon BS21 6DG	www.clevedonmc.nhs.uk
Portishead Medical Group	Victoria Square Portishead BS20 6AQ	www.pmg.org.uk
Harbourside Family Practice (Portishead)	Marina Healthcare Centre 2 Haven View Portishead BS20 7QA	www.harboursidefmp.nhs.uk
Locality Health	Locality Health Centre, Healthy Living Centre 68 Lonsdale Avenue, Weston-super-Mare BS23 3SJ	www.localityhealthcentre.org.uk
	Clarence Park Surgery 13 Clarence Road East Weston-super-Mare BS23 4BP	www.clarenceparksurgery.nhs.uk
	Graham Road Surgery 22 Graham Road Weston-super-Mare BS23 1YA	www.grahamroadsurgery.nhs.uk
Winscombe & Banwell Family Practice	Winscombe Surgery Hillyfields Way Winscombe BS25 1AF	www.winscombebanwellsurgery.nhs.uk
	Banwell Surgery Westfield Road Banwell BS24 6AD	
Tyntesfield Medical Group	Long Ashton Surgery 55 Rayens Cross Road Long Ashton BS41 9DY	

Group	Practice Address	Website
	<p>Tower House Medical Centre Stockway South Nailsea BS48 2XX</p> <hr/> <p>Brockway Medical Centre 8 Brockway Nailsea BS48 1BZ</p> <hr/> <p>Backwell Surgery 15 West Town Road Backwell BS48 3HA</p>	<p>www.tyntesfield.nhs.uk</p>
The Milton Surgery	<p>232/234 Milton Road Weston-Super-Mare BS22 8AG</p>	<p>www.themiltonsurgery.co.uk</p>
Stafford Medical Group	<p>Locking Castle Medical Centre Highlands Lane Locking Castle BS24 7DX</p> <hr/> <p>Stafford Place Surgery 4 Stafford Place Weston super-Mare BS23 2QZ</p>	<p>www.lockingcastlemedical.co.uk</p>

Appendix 2: Responses to “Getting to Know Your Practice”

Question 1: Are there any examples of good practice that you would wish to share with the rest of the primary care community?

Practice Name	Comment
Clevedon Medical Centre	Later in 2018 we will be delivering a new service for stroke patients, modelled on the IBS service.
Clevedon Medical Centre	We developed a new chronic disease education service for all relevant patients in 2017 and feedback is excellent from patients.
Clevedon Medical Centre	The Practise has its own Pharmacist, Paramedic and Physician Associate alongside a team of Advanced Nurse Practitioners. The Physician Associate is a medically trained professional who sees patients with minor illness in the Surgery. Whilst the Paramedic visits patients in their own homes and can assess the urgent medical care needed and if this can be delivered by the practice team or if the patient needs to go to hospital or be referred for community nursing.
Clevedon Medical Centre	We are developing a new clinic for patients with IBS (Irritable Bowel Syndrome) and will be delivering this new service in February 2018. Service includes medical review, medications review, education in IBS and signposting to support services.
Clevedon Medical Centre	We have developed a new dementia clinic for our patients. We provide a dementia review service for the patients and carers’ reviews at the same time, with support from charitable organisations to signpost patients and their carers to relevant support services.
Clevedon Medical Centre	We intend to provide a new service for patients with Coeliac Disease and Diverticulitis, modelled on the IBS service.
Harbourside Family Practice	We have recently relaunched our Patient Participation Group who meet monthly and discuss topics such as communications, clinical services, feedback from patients and the practice environment.

Practice Name	Comment
Harbourside Family Practice	We offer early morning appointments twice a week. This enables our patients to pop into the practice before work. We offer Saturday appointments throughout the year and we have access to other community appointments both at the surgery and the community wound clinic at weekends.
Harbourside Family Practice	We have an information screen in the waiting room that provides health advice and information for patients.
Harbourside Family Practice	We have a kiddie's corner in the waiting room to enable parents to keep their young children entertained whilst waiting for an appointment.
Harbourside Family Practice	We have a very informative newsletter that comes out four times a year which is available in the waiting room and on the website.
Harbourside Family Practice	We hold the 'Young People Welcome Standard'. A young person led this project for achievement.
Harbourside Family Practice	We have been actively involved with the local Rotary and Lions Clubs, hosting a bookshelf in reception. The Lions Club recently purchased some new equipment for us to the value of £1200 as a result of sales from the books.
Heywood Family Practice	The surgery offers improved access appointments on a Saturday. Within this, patients are offered a home visit slot of an hour's duration in order that a patient with severe frailty or a number of chronic diseases can be afforded the time for a full review.
Heywood Family Practice	Gordano cars - this is a service set up with the community. It offers a team of volunteers to take patients to appointments and return them home. To the surgery and to hospital.
Heywood Family Practice	The concept of a duty team - close working between the duty doctors, the nurse practitioner and the trainee doctor ensure that patients with urgent or semi-urgent problems are dealt with by an appropriate clinician. The system also promotes an environment for learning through closely supervised clinical experience.
Heywood Family Practice	The practice has recently joined the Woodspring MSK (Musculoskeletal Assessment Service), this gives GPs the opportunity to send patients for an assessment to 4 venues within BNSSG (Bristol, North Somerset and South Gloucestershire) area.

Practice Name	Comment
Heywood Family Practice	The surgery has skilled up a receptionist to take bloods to maintain a full service to our patients.
Heywood Family Practice	The surgery tried to get a Leg Club up and running with some other local surgeries in the cluster area, however patients advised that they preferred to have their care at the practice rather than travel.
Heywood Family Practice	There is a local receptionist who understand surgery patient's needs.
Graham Road Surgery	The surgery supports an active PPG group and encourages health talks to our patient groups.
Graham Road Surgery	The surgery offers Improved Access clinics on a Friday
Graham Road Surgery	A Saturday morning clinic is offered every other week in rotation with Locality Health Centre.
Graham Road Surgery	The surgery offers a Minor Operations clinic.
Graham Road Surgery	There is a diabetic dietician available who works across the three surgery sites.
Graham Road Surgery	Main reception has two people and there are another four receptionists that work upstairs taking telephone bookings.
Clarence Park Surgery	There are three active Patient Participation Groups (PPG) which the Practice supports and have previously provided health talks to our patient groups.
Locality Health Centre/Graham Road	Locality Health Centre and Graham Road Surgery are now offering Improved Access clinics on a Monday at Locality Health Centre and a Friday at Graham Road Surgery. Both sites also offer a Saturday morning clinic in rotation for patients outside of our core hours.
Graham Road/Locality Health Centre	In addition, we provide a minor ops clinic at Graham Road Surgery, a well women clinic at Locality Health Centre and we have a Diabetic Dietician working across our three sites.
Locality Health Centre	Locality Health Centre is a community focused centre and provides supportive functions throughout the year. It incorporates Graham Road Surgery and Clarence Park Surgery in Weston Super Mare.

Practice Name	Comment
Locality Health Centre	There are two active Patient Participation Groups (PPG), one at the Locality health Centre and the recently combined Clarence Road and Graham Road surgeries. All the Practices fully support the Patient Participation Groups and have previously encouraged health talks.
Locality Health Centre/Graham Road	The Locality Health Centre and the Graham Road Surgeries are now offering Improved Access clinics on a Monday at Locality Health Centre and a Friday at Graham Road Surgeries. Both sites also offer a Saturday morning clinic in rotation for patients outside of our core hours. In addition, there is a minor ops clinic at Graham Road Surgery, a Well Women Clinic at Locality Health Centre and we have a Diabetic Dietician working across our three sites.
Longton Grove/Locking Village	The surgery has low levels of patients using out-of-hours services - as a result of the continuity and access as above.
Longton Grove/Locking Village	The surgery has worked to establish high levels of continuity for patients. This is one of the surgeries core values and the GPs hold personal patient lists and reception staff encourage patients to see their own doctor. This means the doctors can run their appointments systems more efficiently.
Longton Grove/Locking Village	The purpose-built site has provided rooms for additional services and clinics for other patients, as well as the surgery patients. They offer retinopathy, a dietitian, AAA screening, Minor Operations, Leg Club, Midwifery and Positive Step.
Longton Grove/Locking Village	The surgery is offering an Ear Syringing clinic, instead of individual appointments with a GP for this. They can provide the service for more patients this way and the appointments can be shorter and more efficient.
Longton Grove/Locking Village	The surgery has been leading in the locality on improving diabetic care. Using the services of a Chronic Disease Nurse, Consultant Endocrinologist and a GP they have been running virtual clinics to upskill other practices to improve care.
Longton Grove/Locking Village	The surgery offers high levels of access to GP appointments which is again one of the surgeries core values. The reception will only book appointments up to two weeks in advance which they say reduces the wait for an appointment.

Practice Name	Comment
Longton Grove/Locking Village	The surgery set up a successful lifestyle programme (at first, offering group sessions and then individual ones) for patients with pre-diabetic symptoms or already on their diabetic programme. Dr Haggerty was responsible for involving Public Health, Community Health Trainers and other allied professionals. They are now evaluating the programme and have begun training other GP Practices to carry out this kind of programme.
Longton Grove/Locking Village	The surgery works hard to create a happy staff culture and has low staff turnover. The staff are therefore familiar faces to patients, are experienced, well trained and morale is high.
Congresbury Surgery	A Health care nurse is available and there are usually two GPs on site.
Congresbury Surgery	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
Congresbury Surgery	Developed close partnership relationship with Village Agents and local communities.
Congresbury Surgery	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.
Congresbury Surgery	Midwives from Weston General Hospital are available on certain days.
Langford Surgery	A Duty Doctor is available who can review a patient's symptoms and who has flexibility to arrange with an appropriate clinician to carry out a home visits if required.
Langford Surgery	As appointments for emergencies are often available sick children and vulnerable patients can usually be seen the same day.
Langford Surgery	District Nurses are based in Langford and St George surgeries.

Practice Name	Comment
Langford Surgery	Langford Surgery deliver medication to Blagdon Luncheon Club for distribution to patients.
Langford Surgery	Late night or early morning surgeries are available by appointment across the surgeries in the Mendip Vale Medical Practice.
Yatton Surgery	Letters sent to some vulnerable patients to ask how they are getting on.
Langford Surgery	Mendip Vale Medical Practice are a training establishment for doctors and student nurses and receptionists.
Langford Surgery	Mendip Vale Medical Practice engage staff in decision making and reward staff performance through the certificated 'Living the Values' award.
Sunnyside Surgery	Our Patient Participation Group (PPG) have been working with staff and students at Clevedon Community School on a project to engage with older people who may be experiencing isolation. They are introducing students to residents in residential homes who may benefit from socialising with younger people.
Sunnyside Surgery	Our practice was involved with setting up the Leg Club for the town. Patients go to St Andrews Church on Monday mornings to have their leg ulcers dressed, along with enjoying the social aspect of having tea and cake with other members. We provide clinical trained nurses who work alongside the District Nursing team.
Langford Surgery	Patients can access any of the five surgeries in the Mendip Vale Medical Practice group, which means patients can be seen by a GP fairly quickly.
Congresbury Surgery	Patients can access any of the five surgeries' in the Mendip Vale Medical Practice group.
Yatton Surgery	Patients consulted on whether they want a radio playing in the background in the surgery.
Langford Surgery	Practice care nurses and health care assistants/phlebotomists are available.
Langford Surgery	Practice staff try to attend parish and parish council meetings.
Langford Surgery	Private physiotherapists are available.
Congresbury Surgery	Private physiotherapists use the surgery to see patients.

Practice Name	Comment
Yatton Surgery	Separate area for children in the waiting room.
Yatton Surgery	Surgery car available to pick up vulnerable patients who are referred by the GP, to bring them into the surgery to see the GP or for tests/treatments.
Congresbury Surgery	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).
Langford Surgery	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 Practice' group formed the rest of surgeries in the group adopted the system), Midwives and Health Visitors provide services on-site.
Langford Surgery	The Patient Participation Group is 'fantastic and very active'.
Langford Surgery	The phone and computer system is linked for all five Surgeries in the Mendip Vale Medical Practice. Calls to any Surgery are answered by the first available receptionists from across the five Surgeries. This reduces patient call waiting times. The volume of calls and the call wait times are monitored continuously throughout the day by the General Manager, so in busy periods other staff can be diverted to answer calls.
Congresbury Surgery	The Practice has developed skills in supporting the local travelling community to aid access to health care
St Georges Surgery	The surgery facilitates eye examinations provided by an external provider following referral by the GPs.
St Georges Surgery	The surgery uses a call back service for telephone enquiries. Details of the patient's call are passed onto the Duty Doctor who telephones the patient.
Congresbury Surgery	There are District Nurses based in Langford and St George surgeries to cover area.
Langford Surgery	There is a dispensary on-site.
Langford Surgery	There is a practice car and driver available for all Mendip Vale Medical Practice surgeries. This transport is accessed through clinical staff referral (mainly GP) to transport patients who would otherwise struggle to get there, to the surgery.

Practice Name	Comment
Congresbury Surgery	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.
Langford Surgery	There is flexibility of staff cover from across the group which means the Practice do not have to use locums
Sunnyside Surgery	We have a deep clean of the Surgery carried out every six months.
Sunnyside Surgery	We have dedicated GP's within the practice who have an allocated nursing/residential home. They carry out fortnightly ward rounds in the homes. We feel this provides continuity to the patients and builds a good relationship between home staff and the surgery.
Yatton Surgery	Well-advertised thorough consultation with local people over the new premises.
Milton Road Surgery	We meet locally every month with several other practices in Weston as part of the Healthy Weston Project. We are currently working on a number of projects to bring consistency across Weston practices. These meetings also allow us to exchange good practice.
New Court Surgery	We have a Blood Pressure machine and scales in the waiting room for the patients use.
New Court Surgery	We produce a quarterly letter with the PPG.
New Court Surgery	We employ a Reception Manager to enable the smooth running of the reception and waiting room.
New Court Surgery	We ensure the waiting room meets health and safety standards - e.g blinds have hooks to tie up, aisles kept clear.
New Court Surgery	We have an active PPG who are planning a meet and greet session for patients.
New Court Surgery	We have TV screens to call patients and deliver messages.

Practice Name	Comment
Portishead Medical Group	We have an information screen in the waiting room which provides health advice and information for patients. We also review the content of this with our patient group as a standing item in patient group meetings.
Portishead Medical Group	We have a dedicated visiting GP every day which enables us to get out and see sick patients early in the morning, rather than having to wait until the end of morning clinic.
Portishead Medical Group	We hold monthly multidisciplinary team meetings, involving district nurses, midwives and the community matron - this provides an opportunity to discuss frail patients or those that need some extra support.
Portishead Medical Group	We are one of the highest users of online services in the country, enabling patients to book appointments, view their clinical record and request repeat prescriptions online or via the Patient Access app. We also hold an email communication list which allows us to send general information (such as our newsletter) to patients.
Portishead Medical Group	We have a children's area in the waiting room with Duplo which is washed every day to keep it clean.
Portishead Medical Group	We have an active Patient Participation Group, meeting 3 times a year and discussing items such as hot topics, communications, clinical services, feedback from patients and the patient information evenings.
Portishead Medical Group	We host two to three patient information evenings every year. These are held on Monday evenings at Gordano School and are open to the entire population of Portishead. We advertise these in the local press and by posters, emails and text messages. Our patient group choose the topic for each meeting and provide on-site support. The presenters are our own GPs and Advanced Nurse Practitioners and we invite local organisations/support groups and the CCG to come along to provide additional information. Healthwatch North Somerset have been involved in the sessions, both from Healthwatch North Somerset members within our patient group and also by attending during the evening to provide information to patients and collect feedback from them.
Portishead Medical Group	We offer drop in blood pressure clinics every Thursday afternoon. These provide the opportunity for patients to drop in and have their blood pressure checked and to ask any questions/receive health advice. We also suggest to new patients that they could drop into one of these afternoon sessions for a new patient health check.

Practice Name	Comment
Portishead Medical Group	We offer weekend appointments once a month - these are booked via reception. We also have access to other community appointments - both other surgeries and community wound clinics at weekends.
Riverbank Medical Centre	Recall system set up using a comprehensive set of searches on EMIS Web. Patients with chronic diseases such as asthma, diabetes, CHD are called up by the month of their birth. This has created one single point of communication with the patient rather than multiple letters for each separate chronic disease they may have. When contacting the practice for their appointment the patient is directed to an initial appointment with a Health Care Assistant to undertake a work-up - blood tests another condition related tests and follow up, where necessary, with the most appropriate health professional e.g. specialist Practice Nurse. Interest for this recall system has been expressed through the EMIS Web Facebook page with dozens of practices nationwide having expressed an interest and requested further information.
Riverbank Medical Centre	Re-introduction of the patient led Musculoskeletal (MSK) Physionet service. Patients can choose option 0 on the surgeries phone system when they call if they have an MSK related problem. The Receptionist is then able to take the patient through a set questions and, if they meet the criteria, can be booked directly into an appointment with a Physiotherapist. Generally, appointments are available within two working days which demonstrates much shorter waiting times for these patients. Current waits for GP referral to MSK/Physiotherapy not using this service is approximately 12 weeks.
Riverbank Medical Centre	Text messaging of results - Consent is currently being sought from all patients for who the practice holds a mobile telephone number. This is to enable future plans to text test results to patients.
Locking Castle Medical Centre	We have set up a controlled drug audit book so we can track all Controlled Drugs.
Locking Castle Medical Centre	For patients who cannot manage a monthly or longer prescription (for whatever reason - mental health, addiction, and social problems) we have set up a system to take over the repeat ordering of the medication.
Locking Castle Medical Centre	We do a Saturday morning 'Flu Party' for our children who need nasal flu vaccinations each October. We have drinks, biscuits, colouring and a balloon modeller to reduce the stress of children and parents.
Locking Castle Medical Centre	We have dedicated prescription clerks covering 8.30am-5.30pm, Monday to Friday - they ease the job of the receptionists as they can pass prescription query phone calls of any sort to the prescription clerks who will deal with the problem or pass the information on to the appropriate person.

Practice Name	Comment
Stafford Place Surgery	We have made available a list of pharmacies who deliver medication to housebound patients
Locking Castle Medical Centre	We have six face to face slots each day (three in the morning and three in the afternoon) which are reserved for 'unwell children under five' - these can be directly booked by the reception staff and we have found that they help reduce the anxiety of parents.
The Cedars Surgery/Worle Health Centre	The surgery strives to provide excellence in all areas, while at the same time treating patients (and staff) as we would like our friends and family to be treated. Each of our clinician groups has regular meetings to discuss any issues ensuring patient care is treated as our top priority.
Tudor Lodge Surgery	We have run Dementia Friends Sessions in the Surgery - led by our PPG Chair who is a Dementia Champion. Further sessions are in the pipeline.
Tudor Lodge Surgery	Last Autumn we ran a menACWY campaign for young people. The menACWY vaccine gives protection against four types of meningococcal. We had an ice cream van giving free ice cream to attendees. We also had sexual health information available for everyone.
Tudor Lodge Surgery	We have an older person's mental health nurse two days a week. They usually visit patients at home and they are very interested in dementia and memory problems
Tudor Lodge Surgery	We have a full time mental health nurse who helps those with low mood, depression and anxiety.
Backwell Medical Centre	We are a newly merged organisation starting to work together to standardise our policies and protocols and share good practice across all sites. We have a new joined up telephone system which has proved to be invaluable. In the last month we were able to continue to offer a good service to all our patients across all sites as telephone calls can be taken at any site when needed. With the bad weather and a power cut putting one of the surgeries out of action, there was minimum disruption to our patients.
Backwell Medical Centre	We keep our patients up to date with waiting times by advising them of how many patients are in front of them and announce in the waiting room if we have problems.

Practice Name	Comment
Brockway Medical Centre	Tyntesfield Medical Group was recently formed and consists of four Practices. We all use the same computer and telephone systems, and this allows us to work together to provide a service for patients in difficult situations. Examples recently have been the extreme weather conditions, power cuts and suspected gas leak requiring evacuating a surgery. Calls can be taken from any of the surgeries, staff and clinicians can be transferred to other sites. Appointments can be made, results given, urgent calls dealt with.
Brockway Medical Centre	Although a merged Practice it was important to continue to offer our patients individual care from Brockway, we continue to see our own patients and patients have a named GP.
Brockway Medical Centre	Regular meetings are held for Tyntesfield Medical Group and individual surgeries.
Long Ashton Surgery	GPs working across sites and integrated systems means telephone calls can be taken at other surgeries.
Long Ashton Surgery	During the recent evacuation of Long Ashton Surgery, GPs were accommodated at Backwell Surgery, nurses at Nailsea Family Practice and the rest of the staff in the other surgeries. As our systems were merged, there was no break in service for the patients. Within an hour, patients were being seen at the other surgeries.
Long Ashton Surgery	During the recent snow there was an appeal for 4x4 drivers. The support provided enabled clinical staff to be brought in and bloods to be taken to hospital labs. This worked successfully. With this support the surgery was also able to provide some home visits.
Long Ashton Surgery	Good relationship with Patient Participation Group (now merged) - this has involved working with the PPG on mental health events at local schools and locally to cover the different age groups.
Long Ashton Surgery	Our EMIS, telephone and secretarial systems are all merged and provide a background continuity of service during times of vacancies, sickness and annual leave.
Tower House Medical Centre	Recently there has been heavy snowfall. We used social media to contact people who we knew had 4x4 vehicles.

Practice Name	Comment
Long Ashton Surgery	Tyntesfield Medical Group also runs a Prescription Hub for all repeat prescriptions. This has taken the pressure for repeats off the receptionists, the script clerks and the GPs.
Tower House Medical Centre	We also used the electronic appointment reminder system 'mjog' to notify patients of the bad weather, possible impact on surgeries and appealed for patients with 4x4 vehicles to assist if possible.
Long Ashton Surgery	We operate a Patient Niggles spreadsheet whereby if a patient expresses some discontent about something it is passed onto the Support Services Manager or the Operations Manager at the surgery and it is addressed and logged. Staff know that if someone is complaining about something they can contact the Support Services Manager or the Operations Manager about something and we will either meet the patient immediately or phone them back if management is unavailable. Our ethos is that it is much better to address complaints at the outset.
Long Ashton Surgery	We phone and remind our patients of their early morning appointments; reception staff contact the patients the evening before their appointment.
Tower House Medical Centre	We used our joined-up telephone system to ensure that we had staff available to deal with all calls - even if they couldn't get in to their normal place of work.
Winscombe & Banwell Family Practice	We are still small enough at each surgery to be able to call patients through on a personal basis, rather than an automatic 'call board' or TV screen such as one sees in many practices. We feel this gives a more personal touch and patients value this

Question 2: Do you have any examples of how the Practice made changes following feedback from patients?

Practice Name	Comment
Clevedon Medical Centre	We employ a specialist elderly care nurse who manages up to 400 patients in Clevedon's residential/nursing care homes to ensure sufficient support for all patients. Our Doctors conduct regular 'ward rounds' of all care homes on a monthly basis to support care home staff and help avoid unplanned admissions.
Clevedon Medical Centre	Patients have requested IT support to help them with online access and we will be providing IT support and facilities in the coming months. GP
Clevedon Medical Centre	Patient feedback from our weekly Saturday morning 'Improved Access' clinics has been so positive, we have been able to extend the range of services available. Patients specifically wanted to be advised of their position in the telephone queue, so when we switched our telephone service contract, we made sure this functionality was maintained.
Clevedon Medical Centre	Patient feedback for Clevedon Leg Club patients has been very positive and so the Practice continues to support the weekly clinic with staff.
Clevedon Medical Centre	We have produced many patient leaflets which inform patients about specific services and help them to access healthcare. We also produce regular Patient Newsletters which are available in the waiting rooms and on our website. Leaflets and newsletters were produced as a result of patient feedback.
Clevedon Medical Centre	Our patient population is approximately 16,000 patients and in North Somerset, we have the highest percentage (23%) of patients in the age range 65+. Many of our patients have complex needs and multi-morbidities. It is therefore important that they have continuity of care and sufficient time in appointments. We support these patients by providing sufficient acute care 'on the day capacity' to ensure enough routine appointments are available to pre-book, and in December 2017, we moved all our GP appointments over to 12 minutes from 10 minutes.
Clevedon Medical Centre	We also identify 'palliative care' and patients in crisis as 'gold standard' so that when they contact the medical centre to access services we ensure their needs are accommodated on the day. This helps to ensure patients do not need to go to A&E or have an unexpected, unplanned admission to hospital.

Practice Name	Comment
Clevedon Medical Centre	Finally. Our acute care 'on the day' service enables the vast majority of patients to access care, and not be worried that they will not be seen or helped on the same day. We have an extensive minor illness clinic to support the GP's in this service.
Heywood Family Practice	Feedback on NHS Choices website saying that the practice was rude and unwilling to refer patients. This was discussed, and reception staff were booked onto frontline customer service training and care navigation training.
Heywood Family Practice	Referrals, as a practice they are happy to refer patients, but this must be within the guidelines for referrals. Patients need to be aware of the guidelines, so the GP will speak with the patient when they are discussing any potential referral.
Heywood Family Practice	Patient suggested could have an email facility whereby patients could email the GP. This was discussed at the Patient Participation Group meeting, however the GPs felt that they do not have the resources. Recent studies have shown that most of this type of contact end up in a face to face appointment.
Heywood Family Practice	Patient unhappy with new answerphone and message when booking an appointment. Discussed with the patient and message amended to make it clear.
Heywood Family Practice	The practice now has a face to face Patient Participation Group, previously it was virtual.
Heywood Family Practice	Chair of the Patient Participation Group, suggested having a comment slip in reception. Poster and slips implemented.
Longton Grove/Locking Village	Waiting rooms chairs with arms have been provided in response to patient feedback
Longton Grove/Locking Village	The surgery is starting a newsletter for patients.

Practice Name	Comment
Longton Grove/Locking Village	The surgery has increased turnaround of prescriptions to 72 hours and has worked to cut down concerns over repeat prescriptions and volume issues.
Longton Grove/Locking Village	The surgery are hoping to bring in text messaging through the EMIS system to remind patients of their appointments.
Longton Grove/Locking Village	The Patient Participation Group meets quarterly.
Longton Grove/Locking Village	Feedback forms and a drop box asking patients to 'give us an idea' are positively received.
Longton Grove/Locking Village	Waiting rooms chairs with arms have been provided in response to patient feedback
Sunnyside Surgery	Offer late and weekend appointments to patients by GP, nurse and health care assistant.
Sunnyside Surgery	Very proactive PPG and with the help of the chairperson we have our own version of the friends and family questionnaire which can capture feedback comments.
Sunnyside Surgery	Regular monitoring of "did not attend" to see if there is a common trend.
Sunnyside Surgery	Send reminder text to patients of when their appointments are taking place
Langford Surgery	The Practice car is available to transport vulnerable patients who would otherwise struggle to get to the surgery. This was an issue raised by patients in the past.
Langford Surgery	Rapid access to GPs with flexibility in place for patients to access all five surgeries in the group and the Duty Doctor.
Langford Surgery	Extended opening hours at the different Surgeries for example, Saturday Morning Surgeries at Langford and alternate Saturdays at St George. There are also late or early surgeries available by appointment across the Mendip Vale Medical Practice.
Langford Surgery	An on-line patient access system can be used to book appointments.
St Georges Surgery	There were no specific examples of this, but a poor inspection report issued by the CQC was caused by a lack of documented evidence of activity.

Practice Name	Comment
St Georges Surgery	The Surgery Manager considered that there are too many forms although accepts this this is not a specific problem for this surgery but generally in the NHS.
Congresbury Surgery	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.
Yatton Surgery	Background music was turned off
Congresbury Surgery	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.
New Court Surgery	Patient confidentiality- radio playing, queuing system introduced
New Court Surgery	Reception manager employed to ensure reception runs smoothly
Portishead Medical Centre	The topics for our information evenings are chosen by patients and our patient group, using feedback forms from prior information evenings and discussions in the patient group meetings.
Portishead Medical Centre	We also discussed matters of organisation with our patient group, for example, we have recently reviewed online booking, the promotion of online services and management of appointment DNAs.
Portishead Medical Centre	We log all compliments, grumbles and complaints received and monitor these in regular meetings. Clinical concerns and complaints are reviewed with GPs and a monthly clinical meeting and all others are reviewed quarterly in a management team meeting. In addition, we discuss all feedback received from friends and family test feedback forms and information evening feedback forms with our patient group.
Portishead Medical Centre	As mentioned above, content for our waiting room information screen is reviewed and suggested by our patient group.
Portishead Medical Centre	We have recently completed an "improving practice questionnaire" which has provided us with a practice level report. We are planning a meeting in January with volunteers from our patient group to review this in detail and identify actions and changes accordingly.

Practice Name	Comment
Portishead Medical Centre	We changed our ear syringing policy in response to complaints from patients that they had to wait too long between assessment and the procedure. We now book patients in for the procedure and do a quick assessment at the start of that appointment.
Portishead Medical Centre	We discussed the organisation of our drop-in blood pressure clinic with the patient group; our proposal was to introduce timed appointments to aid planning but the patient group felt that it should stay as a drop-in clinic.
Portishead Medical Centre	Following a complaint that a patient was uncomfortable due to being unable to sit on the chairs in the waiting room, we have ordered to chairs with raised seats for patients with mobility problems.
Stafford Place Surgery	Some patients found it difficult to collect their medication from Stafford Place Surgery as we are now closed in the afternoons. We are actively encouraging patients to nominate a pharmacy so that prescriptions can be both sent electronically and collected by the pharmacy and the patient can collect from their chosen destination.
Stafford Place Surgery	With an older population at Stafford Place Surgery we found an increasing number of enquiries about what was available for Carers. Our Carers Lead has set up a special folder of information at Stafford Place Surgery as patients from Stafford Place Surgery might find it hard to access the Locking Castle Medical Centre resource.
Stafford Place Surgery	Patients often ask about buses in the area of Stafford Place Surgery so we have put up a poster saying we are happy to go on line and find the most up to date information for them.
Stafford Place Surgery	We respond to items raised on NHS Choices.
Locking Castle Medical Centre	We have increased the number of phlebotomy appointments.
Locking Castle Medical Centre	We have a small stool in the disabled toilet to help toddlers use the facilities.
Locking Castle Medical Centre	The reception staff are happy to provide a cup of water on request as we felt a water cooler/dispenser might cause a spill hazard.

Practice Name	Comment
Locking Castle Medical Centre	We have set up a list of patients with chronic diseases that are not covered by the Quality and Outcome Framework (QOF) parameters. The people on this list are reviewed quarterly at our clinical meeting to ensure their conditions are being adequately monitored.
Locking Castle Medical Centre	Following discussions at our regular Patient Participation Group meetings, we are looking in to setting up some education sessions for mothers with young children; some would be run by Advanced Nurse Practitioners and some by Dr.Yousef who has a special interest in paediatrics. Topics suggested so far include: head lice, threadworms, minor illness in children, paediatric resuscitation and choking.
The Cedars Surgery/Worle Health Centre	We have a Patient Participation Group (PPG), which meets quarterly. The GP Partner, Practice Manager and Deputy Practice Manager try to attend to ensure all feedback can be actioned as promptly as possible.
The Cedars Surgery/Worle Health Centre	When the Practice started offering online services we had a lot of patient feedback regarding how complicated it was to activate an account. One patient was speaking to the Practice Manager about this and together with the patient, the Practice formulated some step-by-step instructions to hand out with the log-in details. Difficulties seem to have lessened considerably since this. The patient that helped us with this issue went on to be an active member of our PPG.
The Cedars Surgery/Worle Health Centre	We have had a recent comment during a PPG meeting regarding the lack of seats by the reception desk making it very difficult for our elderly population if there is a queue at the front desk. We now try to ensure there are always three members of staff at the desk at busy times and they organise some chairs for people to sit down if needed.
Long Ashton Surgery	We have early and late appointments for our patients 07:30 to 19:30.
Long Ashton Surgery	Patients did not want to wait on the phone for simple appointments and we have now introduced and driven more information for patients so they know they can book on-line for their appointments.
Long Ashton Surgery	We have recruited more receptionists to deal with the demand on the phones.
Long Ashton Surgery	At Long Ashton Surgery we are creating a lifestyle corner, this is building on from the suggestion to have scales in the waiting room.

Practice Name	Comment
Long Ashton Surgery	Higher chairs for elderly patients - these are now being put in all the surgeries waiting rooms.
Long Ashton Surgery	More chairs with arm rests.
Long Ashton Surgery	We have a 'you said, we did' section on notice boards in the waiting room
Tower House Medical Centre	Patients requested high chairs for those who found it difficult getting out of the lower chairs - three chairs were purchased, two for the ground floor and one for the first floor.
Tower House Medical Centre	Patients suggested adding the 13.30 pickup / drop off time for samples to the ample instruction sheet. The form has been amended to include these times.
Locality Health Centre/Graham Road/Clarence Park	As a result of our patient survey, it became apparent that our patients would like the option to book an appointment outside of core hours. Evenings and weekends are very popular among our working population.
Locality Health Centre	Our Patient Participation Groups also asked that our Practice websites were updated to include our clinicians and more specifically, which patients our Advanced Nurse Practitioners (ANP), Treatment Nurses and Health Care Assistants (HCA) were able to see. We have also included our boundary maps which are helpful to patients who are registering.
Clarence Park Surgery	In addition, we have upholstered the seats in the waiting room at Clarence Park Surgery and removed the glass screen on reception at Clarence Park Surgery. We feel that this is more patient friendly on arrival at the Practice.
Graham Road Surgery	Following their patient survey, the surgery identified that patients would like the option of an appointment outside core hours and began offering a Friday evening and alternative Saturday morning clinic
Graham Road Surgery	Follow a PPG request the surgery added to their website details including the names of Clinicians and the treatments offered by the Advanced Nurse Practitioners, Treatment Nurses and Health Care Assistants at the surgery.
Graham Road Surgery	Following feedback, a boundary map was added to the website to provide information for new patients seeking to register with the surgery.

Practice Name	Comment
Clarence Park Surgery	Our PPG groups also asked that our Practice websites were updated to include our clinicians and more specifically, which patients our Advanced Nurse Practitioners, Treatment Nurses and Health Care Assistants were able to see. We have also included our boundary maps which are helpful to patients who are registering.
Riverbank Medical Centre	Improvement made to telephone access to surgery, giving options to patients to direct their calls using “options” such as option 0 for the MSK service. A practice audit had revealed that some calls were running for over 20 minutes and that as a result were preventing other calls from entering the system. Directing calls more appropriately has seen a considerable drop in the time taken to deal with a call.
Riverbank Medical Centre	Use of Health Apps - example given of the Bristol Children’s hospital HANDi App offers simple and straightforward advice on what to do and who to contact when a child is unwell. It includes illness-specific home assessment guidelines for six common childhood illnesses.
Riverbank Medical Centre	Active PPG, every Friday AM have a stand in the foyer at the practice. The PPG has raised money for the practice to purchase equipment to benefit the patients.
Riverbank Medical Centre	The PPG will be taking over the management of the noticeboards within the practice to maintain the information available to patients.
Riverbank Medical Centre	The practice is currently going through a merger process with a larger group and are unable to make larger scale changes.
Tudor Lodge Surgery	We have trialled a new system for appointment booking to help prevent queuing in the mornings before we open - this has become too common. We now take requests for appointments throughout the day and prioritise these according to clinical need. This system ensures those who need to be seen are seen. We have had some success with this system and the early morning queues have diminished, however we need to continue to work on this so that people are called back quicker
Tudor Lodge Surgery	We have enabled people to email requests for appointments and have ‘on-line requesting’

Practice Name	Comment
Tudor Lodge Surgery	We are also keen to continue patient specific clinics such as we did for menACWY as the feedback was so positive from the young people who attended, they said how welcoming and relaxed the session was
Harbourside Family Practice	We have a proactive PPG and you can see from our past meeting minutes that actions have been taken by the Practice in response to feedback raised by members of the PPG.
Harbourside Family Practice	We have a 'You said, We did' board in reception. We frequently had patients complaining about how hard it is to get through to the Practice on the telephone so we recently installed a brand-new telephone system on 21 st February 2018.
Harbourside Family Practice	We have had feedback that as it is hard to get through to the Practice on the phone we have made sure that we update our website more frequently with up to date information for our patient. We have also updated our waiting room electronic screen with more up to date information about the services we offer.
Harbourside Family Practice	We have recently designed a 'patient satisfaction questionnaire'. Some members of the PPG have agreed to survey our patients next month to find out what improvements we can make in the future.
Milton Road Surgery	We have installed a new patient call system replacing the old tannoy system which some patients found difficult to hear.
Milton Road Surgery	We have changed our appointment system to allow pre-booking
Milton Road Surgery	We have replaced all windows (now double glazed) and are in the process of redecorating and replacing all the flooring throughout the Practice.
Milton Road Surgery	We have replaced our phone system.
Backwell Medical Centre	Our patients requested new seating in the waiting room and some chairs to help patients with mobility problems.
Backwell Medical Centre	Patients with walking aids and prams found that there were a lot of doors to negotiate before arriving at the doctor's surgery. The entrance into the surgery has been opened up to allow better access
Brockway Medical Centre	We have a Patient Participation Group.

Practice Name	Comment
Brockway Medical Centre	New chairs have been purchased.
Brockway Medical Centre	Information Talk evenings have been arranged (Diabetes and Urology).
Winscombe & Banwell Family Practice	Music (soft) playing in waiting room to protect confidentiality
Winscombe & Banwell Family Practice	Replacement of Reception metal sliding windows at Banwell to reduce irksome scraping noise
Winscombe & Banwell Family Practice	Replacement of Reception wooden screens at Winscombe Reception to feel more 'welcoming' for patients (and better sightlines)
Winscombe & Banwell Family Practice	Hook behind doors on patient toilets

Question 3: From the surgery's perspective, are there any changes or recommendations you would make to improve access to services at the Practice for patients?

Practice Name	Comment
Clevedon Medical Centre	We are trying to encourage more patients to have online access to book appointments and order repeat prescriptions. Supported by our Patients Participation Group members, we will deliver IT support for patients shortly.
Clevedon Medical Centre	In 2018 we are developing a new 'Results by Text' service for the 70% of all test results which are positive for our patients. We hope this service (which is going to be offered to patients for them to opt into) will reduce the need for them to phone the surgery to discuss 'normal results'. The text message results service will be sent to a patient by the clinician (GP or Nurse).
Clevedon Medical Centre	We would like to encourage more patients who are at work Monday-Friday to access their healthcare on Saturday mornings when it may be more convenient for them. We offer routine GP appointments, chronic disease, sexual health and baby checks
Harbourside Family Practice	We would like to improve the reception area to improve confidentiality for our patients. We are looking into purchasing some screens to provide more privacy around the reception desk and we are also looking at purchasing a system that enables us to play background music in the waiting area to improve confidentiality.
Harbourside Family Practice	We are trying to encourage more patients to have online access to be able to book appointments and order repeat prescriptions.
Heywood Family Practice	More money into general practices not on wasted initiatives.
Heywood Family Practice	The clinical staff provides fantastic care and access. This is evidenced by recent Client Forward Evaluations programme survey, which has been discussed with the patient group. 91% good, very good and excellent. The only criticism of the system is the lack of appointments for patients that don't consider themselves urgent and not routine. At present this is managed by providing on-the-day telephone triage to give advice to those patients who don't feel their problem is urgent but equally don't feel that they can wait for a routine appointment. There are limited resources and the way around this would be to make Primary care an attractive place to work for new doctors.

Practice Name	Comment
Heywood Family Practice	Text reminders to patient re their appointments.
Heywood Family Practice	More funded doctor time.
Graham Road Surgery	Redevelopment is planned at Graham Road Surgery which will include the pharmacy and waiting area as well as offering two additional consulting rooms.
Locality/Graham Road/Clarence Park	We now have a regular clinical team across our three sites that provide continuity for our patients.
Locality Health Centre	We are also considering how we can improve our queuing system at the front desk at Locality Health Centre increasing privacy for patients when they are speaking to our reception team.
Graham Road Surgery	A building extension and improvement plan will get underway in May 2018 to extend the reception and waiting room areas. It will also separate the waiting area from the pharmacy. There will be two new consulting rooms created.
Graham Road Surgery	A regular clinical team is being provided to improve continuity for new patients across the three sites.
Longton Grove/Locking Village	The surgery would like their referrals to secondary care to be fast and effective but they have little control over the criteria set by secondary care for patient accessing services or waiting times for those services.
Longton Grove/Locking Village	The surgery provides access to a wide range of additional services already (see above)
Sunnyside Surgery	We are currently in the process of a potential merger with Mendip Vale Medical Group. This will enable the surgery to offer more services and flexibility to patients to see a GP either at Sunnyside Surgery or across the other five surgeries within the group.
Langford Surgery	To provide more access available to Practice nurse services; currently recruiting for this.
Langford Surgery	All patients have access to same day appointments with GP or the option to book an appointment in advance for non-urgent matters within 2 weeks.

Practice Name	Comment
Langford Surgery	All nurses are trained to undertake treatment room nurse duties, with individual nurses trained in a variety of additional specialisms. The Practice would like to encourage individual nurses to develop additional specialisms to improve accessibility of services across all surgeries.
Congresbury Surgery	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
Congresbury Surgery	Discussions with local transport providers to ensure easy access is in place to enable patients to get to the new Surgery.
Yatton Surgery	The proposed new purpose-built building
Milton Road Surgery	We continue to test new ways to improve our services to patients
New Court Surgery	We are currently looking at our current telephone system and appointment booking system.
New Court Surgery	We are signing up to MJog (messaging system provider) for texting reminders and health messages
New Court Surgery	Work flow optimisation - to ensure all post into the practice dealt with efficiently and effectively
Portishead Medical Centre	The size of our building constrains us - in order to obtain a bank loan to increase the size we would need a commitment from NHS England that they would pay notional rent for the increased footprint. We are unable to get this commitment.
Portishead Medical Centre	The other issue that we grapple with is the availability of GPs - we currently have a vacancy for a GP but have had no applications. We are doing our best to monitor demand and find other ways to provide care.
Riverbank	Improve patient awareness that reception staff are not being “nosey” or overstepping their mark when asking for a reason for the appointment. They need this information to “signpost” the patient to the most appropriate service/person to deal with their specific problem/query.

Practice Name	Comment
Riverbank	Prevention of potential conditions through accessing an NHS Health Check
Riverbank	With the merger progressing explaining the opportunities and changes for the patients currently registered at the practice. Key themes for the patients at Riverbank were around: General Transport/Bus Service/Traffic - Seeing the same G.Ps /Staff - Availability of Appointments / Parking / General concerns around prescriptions, online services, not having to travel to other sites, keeping full service and reputation, does not become too impersonal/bigger is not always better etc
Riverbank	The opportunities of the merger: Resilience / Sustainability / Call on a greater number of clinical and supporting staff / Greater range of services / Larger, more up to date premises and equipment
Riverbank	More awareness for patients on how to use services more appropriately such as the Minor Injuries Unit at North Somerset Community Hospital in Clevedon and when to use their pharmacy as their first port of call rather than the practice. Use of online information from NHS Choices and Health apps such as HANDi.
Stafford Place Surgery	We have struggled with recruitment in the past but have recently taken on a new salaried GP which has eased the situation. We are also in negotiations with a doctor who was previously a regular locum but is now on maternity leave - she should be joining us as a salaried GP later on this year.
Stafford Place Surgery	We want to close Stafford Place Surgery - we feel it is no longer suitable to provide healthcare in 2018. We have the support of our PPG who understand that having to run two buildings is really stretching our resources. We are planning to re-apply to the CCG and NHS England soon - following some further consultation with patients. We feel strongly that we can provide a much better service to patients at Locking Castle Medical Centre.
Locking Castle Medical Centre	We have struggled with recruitment in the past but have recently taken on a new salaried GP which has eased the situation. We are also in negotiation with a doctor who was previously a regular locum but is now on maternity leave - she should be joining us as a salaried GP later in the year.
Locking Castle Medical Centre	We want to close Stafford Place Surgery - we feel it is no longer suitable to provide healthcare in 2018. We have the support of our PPG who understand that having to run two buildings is really stretching our resources. We are planning to re-apply to the CCG and NHSE soon - following some further consultation with patients. We feel strongly that we can provide a much better service to patients at Locking Castle Medical Centre.

Practice Name	Comment
Locking Castle Medical Centre	Since taking on some additional nursing staff, and moving an increasing amount of the SPS workload to LCMC we are rapidly running out of space. We have been in touch with our landlord at LCMC and are negotiating some Practice improvements including converting some of the ground floor admin space to clinical. There is also the possibility of building on two additional consulting rooms. We would have liked to have a lift installed, but apparently this is prohibitively expensive.
Locking Castle Medical Centre	We will also be investigating using the building after 6.30pm and on Saturday mornings to become an active of Advanced Access.
Locking Castle Medical Centre	We were very happy to be given a 'Good' rating by the CQC last November and are working to improve on this next time.
The Cedars Surgery/Worle Health Centre	There are many services we would like to offer to our patients that we currently can't. We have two sites; both sites function at full capacity. We would like to provide a more universal service to the Worle community, for example services such as leg ulcer clubs and offer more support to our patients with chronic disease, but currently we cannot accommodate this.
Tudor Lodge Surgery	I would like to see more national advertising to help direct patients to the pharmacy in the first instance - for minor ailments such as coughs and colds. There are still so many patients who feel they need to see the GP for common ailments that they could self-care for.
Backwell Medical Centre	I feel we offer a good range of services including hiring rooms to Positive Steps, Wellspring, Child and Adult Mental Health Service on a weekly basis. This allows local patients to access appointments without having to travel. It would be nice to increase this type of help with more outpatient clinics but we use our rooms to the full so this would involve building work. However, the other sites are also offering rooms for the local community.
Brockway Medical Centre	Fortunately, our access is very good and the feedback from patients is they can generally get an appointment, either by pre-booking or ringing on the day.
Brockway Medical Centre	Saturday surgeries will be increasing in the near future.

Practice Name	Comment
Brockway Medical Centre	Hopefully across four sites we may be able to offer more outreach clinics to patients to save travelling in addition to those already available NHS and Private, (mental health, wellspring counselling, obstetrics, retinal eye screening, AAA, Physio and Continence).
Long Ashton Surgery	Create more awareness with our patients regarding on-line access
Winscombe & Banwell Family Practice	We need to re-organise the car park at Winscombe to make better use of the space available and provide a better location for the Disabled spaces.

Useful Information

Alzheimer's Society North Somerset

Sedgemoor Auction Centre, Market Way, North Petherton, Somerset TA6 6DF
Helen Harvey-Foster, Dementia Support Worker
Email: h.harvey-foster@alzheimers.org.uk
T: 01278 663927 (Office)
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Vision North Somerset

Vision North Somerset, 3 Neva Road, Weston super Mare BS23 1YD
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Email: info@visionns.org.uk
Open from Monday to Thursday 10am to 1pm

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About Healthwatch North Somerset

Healthwatch North Somerset is an independent watchdog that gives the people of North Somerset a voice to improve, shape and get the best from local health and social care services.

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