

Banbury Cross Health Centre

Enter & View Report



May 2022

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1. Introduction

1.1 Details of Visit

Details of visit:	
Service Address	Banbury Cross Health Centre South Bar House 6 Oxford Road Banbury OX16 9AD
Service Provider	Principal Medical Ltd (PML)
Date and Time	Wednesday 11 th May 2022, 2:00 – 5:30 pm
Authorised Representatives	Carol Ball and Emma Teasdale
Contact details	01865 520520

1.2 Acknowledgements

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

1.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

2. What is Enter and View?

Part of the local Healthwatch Oxfordshire programme is to carry out Enter and View visits. Our authorised representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families, and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies.

Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first-hand.

Healthwatch Oxfordshire Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the CQC where they are protected by legislation if they raise a concern.

2.1 Purpose of Visit

- To observe how the facility operates and provides its services.
- To collect views from patients, volunteers, and staff on services.
- To identify 'Best Practice' and highlight any areas of concern.

2.2 Strategic drivers

The Enter and View visit to the Banbury Cross Health Centre was part of a project on the health and social care experiences of people living in and around Banbury. We wanted to hear what is working well as well as where things could be improved.

2.3 Methodology

The pre-planning for this visit was carried out by email and telephone with the Practice Manager, Helen Murphy. We carried out a risk assessment before the visit and liaised with the practice manager to ensure we followed any Covid 19 protocols the practice had in place at the time of our visit.

We used anonymous questionnaires to capture patients' experiences of using the health centre and asked them if they had any further issues or comments. Also used were observation sheets to capture health and safety issues, interaction between patients and staff, accessibility, and any other comments about the environment. There were also staff questionnaires, which asked questions about their work environment, what they enjoyed about their job and challenges they faced.

On arrival at the Banbury Cross Health Centre, we were welcomed by the Practice Manager, Helen Murphy, the Call Centre Manager James Kite and the Business Support Manager, Jennifer Nichols. We were given information about the size of the practice, how it currently operates, the services on offer and the range of staff who work at the practice.

2.4 Summary of findings

Please note these findings represent a portrayal of the experiences of the service users and staff on the day that we visited.

- The health centre is run by a dedicated administrative staff team whose aim is to deliver excellent patient focused care.
- Every patient we spoke to felt listened to by the medical professional they consulted.
- The services offered by the practice are impacted by staff shortages due to the practice being unable to recruit, for example the practice is short of GP's, Physiotherapists, Pharmacists and Mental Health Nurses, amongst others.
- Staff were accessible and friendly to patients and easy to talk to.
- Comments from patients about the environment and efficiency of the services, and the attitudes of staff were generally very positive.

- Improving communication with patients may help them to engage with the practice and enable them to give timely feedback.
- Patients felt frustrated by the waits on the telephone when calling for an appointment.

3. Results of visit

3.1 About Banbury Cross Health Centre

Banbury Cross Health Centre is run by Principal Medical Limited, a not-for-profit organisation managed by GPs from Oxfordshire and South Northamptonshire. The practice is also a Primary Care Network (PCN) in its own right. PCNs receive additional funding to build on existing primary care services and to work with other organisations to develop more integrated health and social care for people close to home.

The practice operates over two sites South Bar House and Bridge Street, Bridge Street is temporarily closed due to Covid 19. The practice cares for about 40,000 patients living in Banbury and the surrounding villages, some of the areas have high levels of deprivation. The Oxfordshire Joint Strategic Needs Assessment 2019¹, Health and Wellbeing Assessment for Banbury reported that the largest groups of non-UK born residents living in Banbury were from Poland, Pakistan and India.

At the time of writing this report, the practice has 19 salaried GP's and 8 locums. The practice has made use of Livi² to relieve the pressure on GP services however, this is their third preference. The practice employs around 200 people and faces challenges in recruitment. Currently the practice has vacancies for GP's, Physiotherapists, Physician Associates, Pharmacists, Mental Health Nurses and Practice Nurses, in particular specialist nurses trained in long term conditions e.g. diabetes.

¹ <https://insight.oxfordshire.gov.uk/cms/system/files/documents/BanburyJSNAprofileNov19.pdf>

² <https://www.livi.co.uk/about/>

The practice at South Bar House is run over three floors with a reception desk on each floor. There is a pharmacy on the ground floor, but this is an independent pharmacy and is not part of the practice. The practice restructured its reception team in 2021, splitting it into three teams. There is a call centre team where staff are fully trained to carry out patient triage, a reception desk team who are always available to answer queries regarding services and assist patients with non-clinical queries. They are also able to signpost patients to services appropriate to the patient needs such as in house teams consisting of Pharmacists, Social Prescriber and a pharmacy/prescription team. The practice does not offer patients the option to book routine GP appointments in advance. However, nursing and healthcare assistant appointments can be made in advance. The practice believes that operating an on the day booking system enables it to better manage their resources.

The practice phone lines deal with 800-1,000 calls per day with the option of a call back if more than four patients are in the queue. The phone lines operate in such a way that each option is only available at specific times during the day. For example, on the day appointments are option 0, which is available between 8am-6.30pm. If you require a fit note, then this would be option 3 with the line open between 11am-6.30pm.

3.2 The environment

The two Healthwatch Oxfordshire Authorised Representatives spent some time looking at the environment and the information displayed for patients.

The ground floor reception was in a well-ventilated room with doors to the outside at either end, hand gel and masks were available for patients to use. We observed the reception team on the ground floor helping a patient with an enquiry and they did so in a calm, friendly and professional way. We were asked to sign in, given visitor ID badges and advised to register our car registration numbers using the electronic system based on the first floor.

The reception staff on both the first and second floor were equally as friendly and welcoming. There was a lift on the ground floor and there were wheelchairs

	Main Menu	Opening Hours
1	COVID Vaccinations	11am-6.30pm
2	FLU Vaccinations	11am-6.30pm
3	Sick Note Requests	11am-6.30pm
4	Prescriptions	8am-6.30pm
5	Test Results	11am-6.30pm
6	Referrals	11am-6.30pm
7	Blood Tests	11am-6.30pm
8	Treatment Room	11am-6.30pm
9	Long Term Conditions Invites	11am-6.30pm
0	On The Day Appointments	8am-6.30pm
#	Health or Social Care Worker	8am-6.30pm
*	All Other Queries	11am-6.30pm

available at the side of the lift. The decoration in all the areas we observed was clean and tidy. This included the stairwell, the lift, and toilets.

The first floor waiting room was very spacious with windows open for ventilation. The toilets on this floor as on all other floors included a disabled toilet. When we reported a problem with one of the toilets it was dealt with by a member of the reception team promptly. The chairs in the waiting rooms were in good condition, they were mostly single with the occasional couple of chairs together.

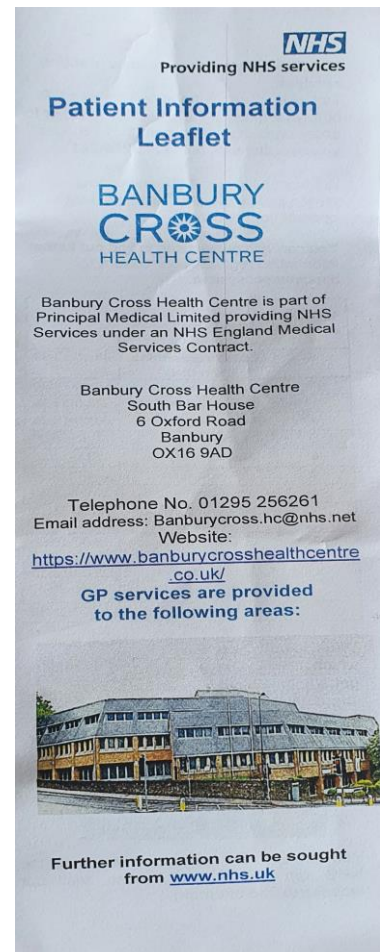
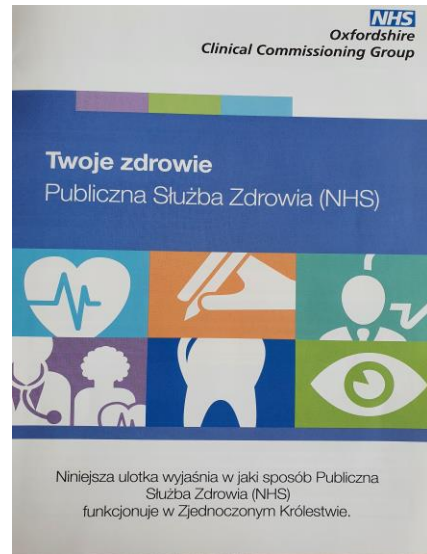
Clinicians came out of their rooms to call patients in to their appointment. On the day we visited there was a Covid 19 vaccination clinic running for over 12-year-olds. A volunteer was supporting the running of this clinic and was friendly and reassuring to the patients.

The signage directing patients around the building was clear; and information relating to the practice opening times is displayed on the entrance doors to the building. We found information on boards and handouts indicating opening times for the telephone line.

There was a sign on one reception desk advising patients to speak to reception if they had been waiting for their appointment for over 10 minutes. However, a white board with similar information stated a time of 15 minutes.

There was a note on each staircase indicating that the staircase is closed after 6pm and after this time patients must use the lift.

We found information about Language Line (translation service) on a table in the ground floor reception. However, this was not prominently displayed. We saw one general NHS leaflet in Polish on display. We did not see any other translated leaflets or posters around the building.



The complaints procedure was on a poster on a wall on the first floor and on a table in the ground floor reception. There was a Friends and Family Test feedback box on the second floor.

We saw the patient information leaflet which provided detailed information about the practice; however, it did not have information about areas in which the GP services were provided. The leaflet directed patients wishing to give feedback to the practice website.

We did not find any information about the GP practice's Patient Participation Group.

3.3 Staff Feedback

Staff told us that individually they handle up to 80 calls per day in the call centre and that people are only able to book appointments on the day. Patients can pre-book for the nurse and social prescribers but only after 11am.

We spoke to 6 members of staff, all of whom were administrative. We did not speak to any clinicians as they were fully occupied. All the staff we interviewed enjoyed team working and felt there was a really good team ethos across the practice. The majority of staff said they got satisfaction from their job, enjoyed the challenges they faced day to day and always tried to get the best possible outcome for the patients.

We heard frustration about the impact of GP and other staff shortages on the day to day running of the practice and of having to ask patients to call back on another day.

We heard about the impact of negative social media feedback on the staff, which we were told was, in a lot of cases, historic and in some cases, unfounded.

The challenges we heard about included dealing with aggrieved complainants and when it was just not possible to give a patient what they wanted. We were told that the triage process was sometimes challenging due to communication barriers, however, the practice used Language Line and text messaging. Some staff felt that communication was a challenge both within the team and with the patients.

We heard suggestions that the practice should consider developing innovative ways to recruit and retain staff due to the impact of staff shortages on existing

staff. We were told that staff absences due to Covid 19 increased pressure on other members of the team.

Every member of staff we spoke to felt fully supported in their role and said they were comfortable raising any issues or concerns with their managers. We heard that there was a suggestion box for staff and that sometimes suggestions are acted upon.

Staff told us they were really happy working at the practice, a couple of staff mentioned the word 'family', telling us "*Everyone is really caring, it is like a family*".

3.4 Patient Feedback

During our visit we spoke to ten patients across two floors. All ten patients had been to the practice before, although one patient said that this was the first time they had been to South Bar House.

Making an appointment

All the patients told us they had made their appointment by phone, with two contacting the practice in response to a letter/text from the surgery asking them to make an appointment.

Three patients told us it had been easy to make an appointment and one patient said they had today phoned for an appointment. Six patients said they found it difficult to get through on the phone, with one saying it had taken them three days to get an appointment. A comment was made about the confusing number of options on the telephone answering service.

Patients said when they called they were asked the reason they wanted to see a GP, and most were happy to tell the triage team the reason. However, some patients said that whilst they were generally comfortable doing this, they would sometimes prefer not to tell the reason for their call.

One patient said they felt the triage team were stand offish and not always friendly.

Visiting the Health Centre

The patients overwhelmingly felt the staff at reception were very helpful and responsive to their needs.

However, some patients reported that they were not always told if appointments were running late unless they asked.



All the patients we spoke to said the clinical staff were responsive to their individual needs and that they felt listened to. They felt that the clinical staff took any concerns seriously.

The patients we spoke to said that the large waiting room was clean and airy and that it was good to have some music. However, the patients in the first floor small waiting room felt it lacked privacy and that perhaps some music would help to mask some conversations. Patients felt Covid safe as the chairs were spaced out and were reasonably comfortable.

After the patient's appointment

Patients were asked if they were always clear what to do next, for example: how to get a repeat prescription. The majority knew what to do next with just two patients saying that they did not know how to order a repeat prescription.

Listening to patients

We asked the patients if they knew how to give feedback to the practice (see table below). Only one patient we spoke to knew what the Patient Participation Group was. The majority did not know how to complain - however, one patient said they would ask at reception should they ever need to complain. One third of people we spoke to had heard of the friends and family test.

How to feedback	Yes	No
Patient Participation Group	1	8
Complaints Procedure	2	7
Friends and Family Test	3	6



4. Recommendations

- Update practice leaflet to include details of:
 - The practice boundary
 - How to complain including information on how to do this for those people who are digitally excluded.
- Provide information including translated materials on all floors to inform patients on how to feedback to the practice, such as:
 - Patient Participation Group information
 - How to compliment/complain
 - Information about Language Line
- Place the practice opening hours in a prominent position on all main entrances
- Update the sign on the stairwell to advise patients what to do if they are unable to use the lift after 6pm.
- Allow patients to order repeat prescriptions by telephone. Currently patients can only order repeat prescriptions online or in person, this disadvantages those who are digitally excluded and are unable to physically get into the practice.
- Improve privacy in the small waiting room such as playing some music to help mask conversations.
- Inform patients at check in or as soon as the reception team are made aware if their appointment is going to be delayed.
- Review the telephone system to improve patient access and experience of contacting the GP practice
- Enable those patients who for example find using telephone difficult e.g. hard of hearing, language barriers, do not have access to a phone or do not have enough credit on their phone to wait in a queue, to call into the practice in person to either arrange a telephone call or be triaged in a private space.
- Review the two-way communication between the staff team and the PML board.
- Improve internal communications so that information is rolled out across all staff teams at the same time.



5. Service Provider Response

We enjoyed welcoming Healthwatch to Banbury Cross Health Centre (BCHC) and were proud to share our Practice with them during their visit.

With regard to the report, we would like to make the following comments:-

- Patients are sent the Friends and Family Test (FFT) link via text message following a face to face appointment.
- We have an active Patient Participation Group (PPG) who we meet with face to face every month. Information about this in our waiting areas and lifts.
- We communicate with our patients via text message, telephone calls, Facebook and our website. Our website is access friendly and can be translated into other languages. The website also has other accessibility functions including a dyslexia friendly option.
- We welcome and actively encourage feedback from our patients. We have a feedback email address – feedback.bchc@nhs.net – and Patients can also feedback via our website or ask reception for a form to complete. We also accept feedback via post and face to face appointments can be arranged too.
- We understand and acknowledge that call volumes to the Practice are high. We are working on ways to improve online accessibility to appointment booking whilst still operating a triage process to ensure patients are booked with the most appropriate clinician. There are options on the phone system to ensure patients get the help they need from the relevant department. We try and educate our patients to use our online services wherever possible and check our website for any queries they may have.
- Patients speak highly of our call back function which negates the need to wait on the phone during busy times. This function kicks in when there are more than four patients in the queue. If the call back is missed, then when the patient calls back, they are diverted to the front of the queue.
- Patients should let reception know if they have been waiting for their appointment for more than 10 minutes. Information on our whiteboards and posters have been amended to make this clear and reception staff actively monitor how long patients have been waiting too.



- With regard to repeat prescriptions, the CQC have issued guidance stating that repeat prescription orders should not be taken via telephone due to the increased risk of errors. The easiest way to order repeat medication is via the NHS App or Patient Access app. Patients who do not have the app can order via our website, in person, using the post box in the main foyer or via post if unable to attend the practice. Some pharmacies also reorder prescriptions on behalf of patients.
- With regard to the waiting areas, we have radios, and we are looking into a media upgrade which would allow the TV information display units to play sound too. We work hard to ensure patients information is kept confidential.
- We continue to work on improving communication between all staff, especially now we are such a large team. Every team in the practice meets regularly and there is a brief 8.15am Teams meeting every Monday and Friday morning for all staff, chaired by our Clinical Lead Dr Rogers. In addition, there are regular management meetings and 10 protected learning events every year where all staff get together to discuss topical issues and receive training. Dr Rogers also sends a weekly all staff communications to share information and PML send monthly updates too. PML has a meeting structure that ensures information is fed up the PML Board as appropriate.
- Recruitment to primary care is highly competitive and there is a national shortage of GP's. We hold weekly meetings to discuss and action the recruitment and retention of staff and we are committed to doing everything we can in this area. We are glad to note that our staff told you how happy they are working at BCHC, and that family was a word mentioned frequently to describe the environment. We are very proud of all our staff at the Practice, all of whom work with a real sense of dedication and commitment to patient care.

By email on 19th July 2022 from:

Jennifer Nichols

Practice Manager

Banbury Cross Health Centre



6. Demographics

On the day of our visit, we captured the following demographic information from patients.

