

Dr Mathew's Surgery Enter and View Report April 2022



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Report Details

Address	Dr Mathews' Surgery Stirling Medical Centre 65-69 Stirling Street Grimsby North East Lincolnshire Grimsby DN313AE
Service Provider	
Date of Visit	27 th April 2022
Type of Visit	Announced (See Methodology on page 4)
Representatives	Lauren Gregory, Helena Hancocks.

Acknowledgements

Healthwatch North East Lincolnshire would like to thank the management, patients, staff and PPG for their contribution to the Enter & View Programme, and for allowing us to trial our new approach on this visit. The findings from this visit will help us in refining and improving our approach moving forwards.

Disclaimer

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

This report was written by Healthwatch North East Lincolnshire using the information gathered by the Enter and View Authorised Representatives named above who carried out the visit on behalf of Healthwatch North East Lincolnshire and information from patients who completed an online survey.

What is Enter and View?

Part of the local Healthwatch Programme is to carry out Enter and View visits.

Enter and View visits are conducted by a small team of staff and trained volunteers, who are prepared as "Authorised Representatives" to conduct visits to Health and Social care premises to find out how they are being run and make recommendations where there are areas for improvement.

Enter and View is an opportunity for Healthwatch North East Lincolnshire to:

- Enter publicly funded health and social care premises to see and hear consumer experiences about the service.
- Observe how the service is delivered, often by using a themed approach.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Observe the nature and quality of services.
- Collect evidence-based feedback.
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners.

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 services first-hand.

Methodology

Dr Mathews' Surgery was previously visited on the 11th and 26th September 2019 as part of an ongoing piece of work on Primary Care services. Dr Mathew's Surgery covers a diverse area of Grimsby, with patients being registered at the practice from the Willows, Yarborough, and East Marsh Wards.

This visit to the Stirling Medical Centre site was carried out on the 27th April 2022 with two Authorised Enter and View Representatives. This visit was announced, which means HWNEL gave notice to management of our plans to visit, to ensure that a member of staff was available to facilitate our visit on the day. Our visit was facilitated by the Practice Manager, who reviewed previous recommendations from the visit held in 2019, discussed current issues the Practice is experiencing and gave a tour of the Site.

The Practice Manager distributed online surveys to 500 patients via text message and the Practice team. The Practice Manager also completed an online survey. Surveys were also left at the Practice for staff, patients and the Patient Participation Group (PPG) to complete. HWNEL received 81 responses from Patients, 3 responses from the PPG, 6 responses from Staff, and one response from the Practice Manager.

Additionally, observations were made about the environment within the Practice and waiting area during the visit.

Background to Dr Mathew's Surgery

Dr Mathew's Surgery provides Primary Care services to 4236 patients across two sites; Stirling Medical Centre and Cromwell Primary Care Centre. The GP Practice employs 8 members of staff; three Receptionists, one Administrator, one Practice Manager, one Health Care Assistant, one Practice Nurse/Advanced Clinical Practitioner and one General Practitioner/Doctor.

Dr Mathew's Surgery offers a range of services including NHS Health Checks, alongside a number of other services that work from Stirling Medical Centre and offer support and clinics to the patients of the practice such as Sexual health service, AAA Screening, Retinal Screening, Smoking Cessations Service, Community Physiotherapy, Counselling and Podiatry. Dr Mathew's Surgery also offers Extended Access appointments, meaning that Patients who are registered at Dr Mathew's Surgery can now book an appointment to see a range of clinicians on weekday evenings (after 6:30pm) or on weekends and on all English bank holidays. HWNEL were told that they offer a total of ten weekly Extended Access appointments. Additionally, Dr Mathew's GP Practice offers 120 telephone appointments each week. At present, they have 2600 patients who are signed up to the Electronic Prescriptions System and 1650 patients who are signed up to the Enhanced Summary Care Records System.

The Practice experienced a total of 1032 'Did Not Attends' within the last 12 months. 'Did Not Attends' occur when patients fail to attend their appointment without prior cancellation, the appointment is not then able to be made available to other patients and staff time is consequently wasted.

Since April 2020 guidelines to the provision of Primary Care Services have constantly been revised and changes made, this has been for all Primary Care Provision, and especially GP Practices. This was to ensure that staff and patients were kept safe and contact was minimised due to the Covid-19 Pandemic, these guidelines were especially pertinent to those from Ethnic Minorities.

This did not mean that GP Practices closed they just worked in a slightly different way; Dr Mathew's himself had to follow strict guidelines but was at work every day, along with his team. Patients had telephone consultations and online systems were, and still are, in place to allow patients to send in photographs etc. prescriptions were still and are still issued to patients.

Observations

Dr Mathew's Surgery - Stirling Medical Centre

This site is set in a purpose-built building which is shared with three other GP Practices, a Sexual Health Clinic and an adjoining Pharmacy. The car parking availability is minimal, with less than 20 car parking spaces. There is some street parking available surrounding the Practice. There is currently a call button system in place to gain entry into the building, which we were informed was originally put



Upon entry into the building, you enter into a shared waiting area with seating available across the length of the building with proximity to all Practice reception desks. There are various notice boards within the waiting area that are not used to their full potential. There are three notice boards which belong to Dr Mathews Surgery, one of which is set on the wall above the seating area. This does contain some information posters of varying topics such as domestic abuse, drug and alcohol services, COVID-19 advice, and "Why do receptionists ask questions?". There were some small tears on the backing paper and border of the notice board which could be replaced to improve the aesthetic and make the board more enticing for patients. Additionally, the information posters were all A4 sized, and used small text meaning it would be difficult for patients to read the information without standing directly in front of it.

Currently reception is not manned permanently on a Wednesday, due to the GP Practice only having 1 member of staff available for this area, however when this is the case patients are encouraged to press a call button to notify staff that they are waiting, at which point a member of staff will come out to greet them. Masks and hand sanitiser are freely available at the reception desk and patients and visitors are encouraged to use them. HWNEL were asked to sign the visitors' book, which was a result of a HWNEL recommendation from our previous Enter and View Visit. It was observed that the recommendation of a refreshment station and children's play area had not been implemented, which the Practice Manager explained was due to COVID-19 guidelines. The Practice Manager told HWNEL that they may consider implementing this in the future.

It has been observed by HWNEL when visiting the practice for Information and Engagement Stands, that the patient call system the practice operate is a digital text screen which displays the patient's name and the room in which their appointment is in. A small beep is also sounded to alert people that someone has been called for their appointment. Some members of staff prefer to come into reception and call the patient through personally. HWNEL have not received any comments or feedback from patients regarding their experiences of this patient call system.

Dr Mathew's Surgery - Cromwell Primary Care Centre

The site which is located at Cromwell Primary Care Centre is currently open on Monday, Wednesday and Friday's due to issues with staffing levels. Lucy Annis (Practice Manager) has informed us that they are recruiting staff and this is only a temporary measure.

Patient Responses

The following is a summary of the responses received from 81 patients surveyed.



How would you rate this GP Practice? (1 being Excellent, 5 being Very Poor)

A total of 81 patients responded to this question, with 24 patients rating the Practice as 'Very Poor', 15 patients rated the Practice as 'Poor', 15 patients rated the Practice as 'Average', 8 patients rated the Practice as 'Good' and 19 patients rated the Practice as 'Excellent'.

Who is your appointment with today?







Only 58 patients responded to this question, however this may be because this survey was sent out to patients via text message, meaning that this question was not applicable to all respondents.

A total of 16 patients said that their appointment was with the Nurse, 4 responded 'GP', 3 patients answered 'Health Care Assistant', 2 patients said that their appointment was via the telephone and 1 patient said that their appointment was with a Physiotherapist. The remaining 32 patients responded to say that they did not have an appointment.



How do you normally book your appointments?



All 81 respondents answered this question, with the majority (78 patients) reporting that they book their appointments via the telephone. One patient told us that they book their appointments in person, another two patients stating, "I rarely get one" and "I try to book appointments but can never get one".



If you normally book over the phone, what time do you normally call?

The majority of respondents (54 patients) stated that they normally call between 8-10am. A further 8 respondents stated that they normally call between 12-2pm; 7 patients stated they normally call between 2-4pm and 4 patients answered that they normally call between 10am-12pm. Two respondents answered that they normally call between 4-6pm and the remaining 4 patients commented the following:

"Depends on why I am calling."

"Varies depending on issue but you can't book appointments after 11am on any given day which is a nightmare for me." "Between 8am-11am for same day appointments, or after pm for repeat prescriptions." "Anytime during the day."

The GP Practice, in response to this, stated that patients can also use the online system to either speak to the GP, get medical advice or order repeat prescriptions. This system is available after 11am and the GP is available for online consultations.

How easy is it to get an appointment when you want it? (1 being Very Easy, 5 being Very Hard)



The majority of patients (40 patients) responded to say that they find it 'Very Hard' to get an appointment when they want one. A total of 11 patients answered they find it 'Hard', another 11 patients answered 'OK'. A total of 10 patients answered that they find it 'Easy' and the remaining 9 patients answered that they find it 'Very Easy'.

Patients did not indicate when would be the best time for them to attend so further research into this may assist the GP Practice to plan ahead for the future.



How do you prefer to book your appointments?

The majority of respondents (70 patients) stated that they prefer to book their appointments via the telephone. Whereas ten patients told HWNEL that they prefer to book their appointments via the online booking system, another ten

patients told us that they prefer to book appointments face to face. The remaining 3 respondents told HWNEL that they prefer to use the NHS App to book their appointments.

How would you rate the current appointment system? (1 being 'Excellent', 5 being 'Very Poor')



As shown in the graph above, the most common answer was 'Very Poor', with 36 patients stating they believe the current appointment system is very poor. A further 14 patients rated the appointment system as 'Poor', and another 14 patients rated it as 'OK'. A total of 17 patients rated the current system positively, with 5 rating it as 'Good' and 12 rating it as 'Excellent'.

Which type of appointment would you prefer to be offered?

Please note: Respondents were asked to tick all that applied so the total number of responses may be greater than the actual number of respondents.



According to our results, the most popular type of appointment is 'Face to face with GP', with 75 patients selecting this as their preference. In contrast, only 28 patients selected 'Face to face with Nurse' as their preference. A total of 20 patients told HWNEL that they prefer telephone appointments and only 6 patients selected 'Online Consultations' as their preferred type of appointment.

This question asks patients about their preference of choice of appointments, however after the patient is triaged by a Care Navigator it may be deemed that clinically they do not need to see a GP but the patients may still prefer this options. The balance between preference and clinical need may often be very difficult to manage.

Extended Access

A total of 71 patients told HWNEL that they have been offered an appointment within the Extended Access Services. Extended Access appointments are available weekday evenings from 6:30pm, or on weekends and Bank Holidays.

Before the Appointment

Our results show that 52 patients receive a text message reminder before their appointments; 11 patients told HWNEL that they did not receive a text message reminder and 18 patients stated that they 'sometimes' receive a reminder via text message.

HWNEL however, cannot ascertain whether this is due to the patient not receiving the text message or whether the GP Practice does not have the correct mobile phone number to enable this option to be offered.

A total of 24 patients told HWNEL that they are normally seen on time and the remaining 57 who said that they are not normally seen on time stated that on average they usually have to wait ten minutes. However, two patients explained that they have previously waited up to an hour. Most patients answered that they are not informed of any appointment delays by staff, with 66 patients answering 'No' when asked. A total of 15 patients said that they either are always or sometimes informed of appointment delays, and they stated the reasons generally given are that a member of staff is running late or that they are taking a little longer with prior patients.

During the Appointment

Just over half of respondents stated that it is important that they see a particular member of staff, whereas 22 patients said this wasn't important, and 16 said this only mattered sometimes, depending on the issue. The majority of respondents also stated that they do not mind which gender of GP/Nurse they prefer to see.



HWNEL asked patients to think about the last time they had an appointment at their GP Practice. As shown in the graph above, patients were asked if they were given enough time, if they were listened to, if tests and treatments were



explained, if they were involved in decisions about their care, if they were treated with kindness and compassion, and if they feel they received enough time with their clinician. Respondents were able to select more than one option, and so the total number of responses is greater than the number of respondents.

Long Term Illness and Health Conditions

Out of 80 respondents, 46 stated that they live with a long term health condition. Some of the conditions are Asthma, Osteoporosis, PTSD, Asperger's, Anxiety and Depression, Arthritis, Haemochromatosis, Fibromylagia, Diabetes, Stage 4 Cancer and Mixed Dementia.

Of those 46 respondents who stated that they live with a long term health condition, 36 stated that they do not feel the practice helps them to manage their condition well, and exactly half of those stated that their condition is reviewed. Most commonly, those respondents who stated that their condition is reviewed said that their reviews are annually or every six months. Some also elaborated to say that they are reviewed within Secondary Care Services.

When patients were asked if all aspects of their health review were completed as required, 36 patients answered 'No', comments include:

"I am not given enough time to talk about the drugs I am on." "It is impossible to get appointments with the doctor." "I've never had a face to face review."



Are you able to make informed decisions regarding your health?



The majority of patients told HWNEL that they are able to make informed decisions regarding their health, with 67% of respondents answering 'Yes' when asked this question.



Do you feel that your GP Practice provides person-centred care?

As shown in the chart above, there was an equal number of patients who believe the practice provides person-centred care, to those who feel the practice do not provide person-centred care. The remaining 19 patients stated that they believe this is sometimes the case.



Almost half of respondents told HWNEL that they found interactions with staff to be positive and friendly. A total of 23 patients said they found interactions with staff to 'sometimes' be positive and friendly, and the remaining 18 patients said that they do not find staff to be positive and friendly.



Do you feel listened to?



HWNEL asked patients if they feel listened to, and 31 patients answered 'No'. However, 29 patients answered 'Yes' and the remaining 20 said they 'sometimes' feel listened to.

Concerns

Most patients (59%) told HWNEL that they do not know how to feedback their comments or concerns about the practice. The Practice Manager informed HWNEL that patient feedback is obtained via the website, social media, and their complaints/compliments system. HWNEL representatives also noted that there is information displayed next to reception regarding how to share compliments/complaints.

The Practice Manager also told HWNEL, "We try to resolve all complaints with myself via telephone or letter. If not, we advise patients to contacts PALS Service". Almost half of respondents told HWNEL that they feel confident in raising concerns with the practice. However, 27 patients stated that they do not feel confident to do so, and the remaining 14 patients answered 'sometimes'. HWNEL representatives also observed a suggestions box next to the reception, which would enable those who do not feel confident to raise their concerns to do so anonymously. Only 22 respondents told HWNEL that they had previously raised an issue or complaint with the practice in the past; of which, 12 patients said they felt their concern was acted upon.

Patient Feedback

Booking Appointments

HWNEL received a significant amount of feedback regarding issues when booking appointments, relating to the booking system itself and challenges seeing specific clinicians.

The most common theme within the feedback received was that patients feel they are unable to access face-to-face appointments with their GP. One patient told HWNEL, "To be able to see GP it's virtually impossible to get an appointment I haven't seen the GP in two years I've given up trying but on the other hand the nurses are wonderful". Although most patients have commented that they are satisfied when seeing a nurse, they feel that there should be "More GP appointments and less being pushed onto the poor nurses". Patients also commented on the lack of contact with their GP, with one patient saying, "I would like to personally talk to my GP and tell him how I feel and to get an examination if necessary eg: chest problems rather than being stopped at the end of a phone call". Similarly, one patient commented, "It would be nice to see a doctor and not be phoned by receptionist saying you have a prescription sent to chemist, that's what I get when I phone, I haven't seen my doctor for over two years all been done by phone can't get an appointment." Other patients feel that they cannot ever see their GP even if it was necessary, comments include:

"Now trying to ACTUALLY see a Dr.... I assume that Dr no longer works at this practice? Dr Mathews must be the most elusive Dr within the NHS but he's done an excellent job in protecting himself from COVID-19 simply by isolating away from patients."

In response to the comment from a patient, the GP Practice have told HWNEL that during the Covid-19 Pandemic Dr Mathews did follow guidelines and isolate himself, however this was not at the detriment of the patients. Dr Mathews did come into the surgery and work all day, he telephoned patients, answered online consultations and any queries. Prescriptions and repeat prescriptions were issued. Dr Mathews did see patients face to face as deemed clinically appropriate.

"Should be able to see doctor when required and better phone service."

"I feel that I cannot rely on the doctors and nurses at our practice as its like gold dust to see them. They would rather prescribe over the phone. The whole booking experience could be improved."

The GP Practice informed HWNEL that patients are triaged and sometimes it may not be necessary to see a GP face to face as medical issues can be dealt with in other ways. During the Covid-19 Pandemic strict guidelines were in place to protect both patients and staff. This was especially important for a small GP Practices, like Dr Mathews, as staff sicknesses would have impacted greatly on the service they could have provided.

Moreover, HWNEL identified another common theme within the patient feedback provided regarding 'receptionists'. The feedback indicates a lack of awareness amongst patients regarding the roles of Practice team members, particularly 'Receptionists', also known as a Care Navigator. Comments include:

"IF and it's a very big IF you can get through on the phone then comes the receptionist with her PHD in everything other than manners if you're lucky she will put you 'on the list'."

"It would be nice to not have to relay health concerns through the receptionist and receive doctors advice from the receptionist."

"Receptionists think that they are doctors. Cannot see a doctor. Had to take my Son to GP out of hours just to be seen by a doctor. Even the nurse tells me what's wrong with me over the phone even though they haven't seen me it's absolutely ridiculous."

"Not having to tell unqualified staff of my health eg receptionist. Not being advised medically when they have no idea what they are talking about."

Care Navigators have received training that allows them to identify issues that could be dealt with by other members of the GP Practice Team or within another organisation, this system is in place to allow patients more choice and to also allow patients to be seen by the most appropriate person. This process is often quicker and allows for direct referrals, such as a direct referral into the physio therapy service or mental health support.



Finally, it has been identified within the feedback received that patients are struggling to access appointments due to the booking system. This appears to be for a range of reasons such as issues with the telephone, travel, and preferences in the type of appointment. Comments include:

"To be able to get appointments when I need to and not have to travel to the Stirling practice which is two buses away when Cromwell Road is 5 minutes from my home."

"More staff dealing with enquiries via phone and reception, not one doing it all."

"Have face to face appointments and be listened to and not fobbed off."

"They need a better appointment booking facility."

"They put you 'on the list' for a call back and like a complete wally you wait for that call that very rarely comes, so jump back on the phone to be told everyone has gone for the day, better luck tomorrow and the merry go round continues."

"Receptionist asks what's wrong in a room full of people no privacy at all."

<u>Staff</u>

According to the feedback HWNEL received from patients, staff at the Practice are *"excellent"*. Overall, the feedback HWNEL received indicate that patients are satisfied with the staff attitude at the Practice. In particular, HWNEL received a high level of praise regarding Dr Mathews and the treatment he provides. Comments include:

"Staff are excellent and offer high level of service."



"Dr Mathews is a lovely doctor and on every appointment I have I feel I'm listened to, understood and cared for to get the best outcome."

"Dr Mathews is a brilliant Doctor. He always takes the time to listen carefully and gives detailed reasons for his medical recommendation. I always leave feeling completely confident that I am in safe hands. It is sometimes difficult to get a face-to-face appointment, but I imagine everybody wants a face-toface appointment with Dr Mathews because he is so kind, caring and knowledgeable."

"Dr Mathews is an absolutely fantastic GP! All the staff are polite, kind and caring."

HWNEL did receive two comments of a negative sentiment regarding reception staff. However, during a discussion with the Practice Manager during our Enter and View visit, HWNEL were told that there had recently been new members of reception staff trialled who were not successfully appointed.

"Need friendlier reception staff (most are lovely but I got a new lady the other week and she was rude.)"

"Sometimes the reception staff can be quite rude."

Treatment and Care

All comments regarding treatment and care are of a negative sentiment, with patients predominantly commenting on their experience of being unable to access a face to face appointment with their GP. Please see detailed patient experiences below.

"The way I have been treated I am happy with."

"It's the worst experience I've had with a clinic, misplacing documents, creating double records, missing vital information. Zero trust in them and actually looking for a better clinic and GP. I have never met my GP in person, only dealt with the nurse and a therapist which was the only positive thing about that clinic."

"Dr prescribes without having an appointment either by phone or in person."

"What could be improved... a chance to sit and talk with the Dr not just talk to the person on the reception, to pass a message on and to receive a message of some sort. EG: Prescription is waiting... or please send a photo, or no response at all. Eg: spent time in A&E, told I need to speak with Dr face to face to arrange something, no joy instead received a message saying prescription at chemist...Next example, I rang Dr, spoke to person on reception with what I thought was water infection said I may need antibiotics, no appointment was made, just text message saying prescription was at chemist, how can this be? It is so poor I am looking at changing Dr."

"Need to be able to see doctor and not just nurse each time. Can't contact for appointment unless in morning which is hard if work full time. Staff do not listen fully to concerns or agree any rigorous follow up activity to make sure problem has been fully sorted. Want to change surgeries for over two years but not sure how."

"Need access to test results that are not restricted which is on GP's WebV System... or via fault online "facility" which is restricted, also availability of dressings for wounds needing dressing, to avoid further sepsis and provision of finer cannula to aid those with collapsed veins. And the online service where you send pictures of affected parts at £1 per picture sent only to get a message saying it will not immediately be looked at or acted on."

"Terrible practice, not seen my GP now in 3 years. Even with the pandemic ongoing I feel like my GP tries to spread himself too thin. Ie: working at different practices. I'd like to think I'm not a 'poorly person' but I feel like if I needed my GP he wouldn't be available for weeks and that is not good enough... No wonder A&E waiting times are so long with practices like this."

"I would like to see a doctor to discuss my health. The receptionist now seems to act like a nurse, the nurse acts like a doctor and you don't get to see a doctor. So where are they? Very frustrating to be a patient right now. Some things a man needs to discuss, he would prefer to discuss with his doctor and not with a nurse. The option is not given. Always have to see a nurse when you want to see a doctor."

"I don't need a doctor regularly but I called with buzzing in my ears recently and have seen three nurses first to clean my ears then for antibiotics and now are looking into other things for me and blood work, the nurses were kind and caring and listening and offered extra help."

In response to the patient comments, it is difficult for HWNEL to clarify between clinical need to see a GP and patient choice to see a GP. Staff within a GP Practice are trained to carry out a whole range of tasks and often their job title does not fully explain their roles. Many nurses have carried out further training which allows them to prescribe and diagnose certain conditions, this information the patient may not be aware of. HWNEL suggests that more information is given to patients as to why a certain professional can treat them within the GP Practice and the purpose for process. This may help to clarify roles and understanding.

<u>Other</u>

HWNEL received other comments from patients who shared their experiences, relating to issues such as ordering repeat prescriptions, blood test results, greeting at reception, and challenges when booking regular routine appointments.

"Simple tasks like ordering a repeat prescription can be fun. It usually takes a call to the receptionist to place your request and be told prescription has been sent to the pharmacist only to arrive at said and pharmacist and as usual nothing sent through!!!! Several calls later if you're lucky, your prescription may be sent several days after initial request."

"I have been waiting four weeks for a follow up after blood tests."

"For the reception team to be back at the front of house when entering the surgery instead of coming out of the back office."

"I think if you have an ongoing appointment you should not have to ring for the next appointment it should give you your next appointment b12 injections diabetes bloods yes have them but don't call to say yes all ok yes they call to say something is different take you off tablets because not agreeing with you. That was good but next blood test heard nothing. Confusing."

Due to the fact that Dr Mathews GP Practice is a small staff team appointments cannot be offered more than 6 weeks in advance, this is because staff availability cannot be guaranteed 12 weeks in advance. This is a compromise that both patients and staff have made to ensure the services are managed efficiently.

Staff Responses

These findings are based on six responses from the Practice Team, there are only two members of staff who did not provide a response. One of which is the Practice Manager who provided a response separately.

	Yes	No	sometimes
Do you feel there are adequate numbers of staff on	50%	0%	50%
duty in your workplace?			
Are staff absences well managed?	83%	0%	17%
Do you understand the systems in place to safeguard	100%	0%	0%
patients?			
Do you feel confident in raising concerns within your	100%	0%	0%

Responses relating to safety



setting?			
Are your concerns acted upon?	100%	0%	0%

Responses relating to effectiveness

	Yes	No
Do you feel that you had an adequate induction when you first started?	100%	0%
Are your training needs regularly reviewed and updated as necessary?	100%	0%
Are you adequately able to support patients with their needs?	100%	0%

Overall, staff at all three sites felt that they had an adequate induction and that their training needs were adequately met. All staff felt they are able to adequately support patients with their needs.

Responses relating to Caring

	Yes	No	Sometimes
Do you feel that people are treated with kindness and compassion?	100%	0%	0%
Do you feel that you get to spend enough time with patients?	100%	0%	0%

All staff that responded felt that people were treated with kindness and compassion and they felt they got to spend enough time with patients.

When staff were asked to identify what was the most enjoyable part of their job, the following responses were received:

"Being able to help people"

"Patient contact"

"All aspects however the team work makes it enjoyable the most"

"Helping patients and having positive outcomes"

"Time spent with colleagues"

"The teamwork, we work really well for a small team, supporting each other"

Responses relating to responsiveness

	Yes	No	Sometimes
Do you feel that your setting provides person centred care?	100%	0%	0%
Do you feel that you are able to respond effectively to the needs of patients?	100%	0%	0%
Do you understand patient's preferences/choices for end of life care?	100%	0%	0%
Do you feel you fully understand different patient's needs?	100%	0%	0%
Do you feel confident in the use of technology?	100%	0%	0%

All staff whom responded felt that patients were provided with patient centred care. Again, all staff whom had direct contact with patients stated that they were able to understand and effectively respond to patient's needs.

Responses relating to Well Led

	Yes	No	sometimes
Do you feel well supported in your role?	100%	0%	0%
Do you feel the management team are approachable and helpful?	100%	0%	0%
Do you enjoy working in the GP Practice?	100%	0%	0%

All staff felt that they were well supported and that the management team were approachable and helpful. All staff stated that they enjoyed working in the GP Practice.

When asked if there was one thing that they would like to see change, 4 staff members stated that they would like to see higher staffing levels and better retention of staff. However, these responses were caveated with comments such as, **"we are managing this together and our Manager is advertising the positions".** HWNEL asked staff what they think is working well, they gave the following comments:

"Effective leadership and teamwork"

"The team are good and very supportive to each other."

"Most things"

"Triage is working well, more structure to clinics. New staff have brought a new dynamic to the team, more cohesive, enthusiastic, working better as a team."

"We work very well as a team and we are well supported by each other and management."

"We are a team that works well with one another, we care, support and consider each other which enables us to do our job efficiently, together, providing an excellent service to Patients and a brilliant working environment."

When asked if they would like to make any additional comments regarding Dr Mathew's Surgery, the following responses were received from staff:

"Very efficient team"

"Great support within the practice"

"For a relatively small team, I feel we do provide a good service. It can be really stressful, we do get a lot of verbal abuse whist trying to help our client group at times. I have been working here for quite some time now and if it wasn't for the support that I do receive from management and the team as a whole I would find it very difficult. That said I am very happy in my role."

"I feel that anything I am unsure of I can ask management or clinicians advice."

"I have a very capable and supportive Manager. She is understanding, efficient and approachable. I enjoy my working environment. It is lovely to be a part of the Practice Team."

PPG Responses

These findings are based on 3 responses from members of the Patient Participation Group (PPG). HWNEL were told that the PPG meet once every three months.

These members stated they were made aware of the PPG by a notice board advertisement, and invitations via text message and in person. These members told HWNEL that they understand their role within the PPG and feel supported to be an active member.

Responses relating to safety

	Yes	No	unsure
Do you feel adequately supported to help patients raise their views via the PPG?	100%	0%	0%
Is there any additional training you would like to help you in your role on the PPG?	0%	100%	0%

Members of the PPG felt that whilst they felt were in raising concerns, they were unsure if these were acted upon. They were also unsure of any training needs.

Responses relating to responsiveness

	Yes	No
Do you feel the Practice fully understands different patient's needs?	100%	0%
As a patient, do you feel you are treated according to your individual needs?	100%	0%

Responses relating to Well-Led

	Yes	No
Do you feel that the management team are approachable and helpful?	100%	0%
Do you feel confident in raising concerns with the Practice?	100%	0%
Do you feel issues raised are acted upon?	100%	0%



HWNEL asked the PPG members what positive impact they think the PPG has made at Dr Mathew's GP Practice, comments include:

"Many improvements, particularly with telephone times."

"Prior to Lucy's appointment as Practice Manager, there was no enthusiasm. Since Lucy has been Practice Manager, staff are trained correctly, excellent telephone manager and helpful. We are listened to and our queries are actioned accordingly."

"I think the fundraising is a really good idea. We get to see staff perspective which we wouldn't usually see. Criticism is taken well to improve the service.

Overall, it is evident from the responses given that members are fully satisfied with the way the Practice are currently working with the PPG. One member went on to say, "If I have a problem with any situation, I will always speak to Lucy [The Practice Manager] and it is always dealt with". However, all members who responded stated that they would like to see face to face appointments with Dr Mathews start again. They explained that this stopped due to COVID-19 and has not been reinstated. Finally, one member said, "I think Lucy [The Practice Manager] is an asset to the surgery, she works extremely hard and I feel the surgery has improved since her taking over. The staff are pleasant and helpful. We thank our lucky stars that we are with Dr Mathew's Surgery."

Recommendations

Based on our findings, observations, feedback and suggestions from patients, staff, management and the PPG, Healthwatch North East Lincolnshire suggest the following areas can be improved upon to increase the level of patient satisfaction within Dr Mathew's Surgery.

The Practice Manager told HWNEL they would like support with CQC Inspections and feedback to help improve the surgery's access and quality.

	What is the recommendation?
S pecific	Implement Peer supervision to encourage resilience and morale boosting, alongside the managers regular welfare checks to ensure staff are supported and issues are identified early.
	How can you measure progress and know if you have successfully met the recommendation?
M easurable	I feel like I am trying everything possible to encourage resilience and boost staff morale. I have regular welfare chats, appraisals, employee of the month, peer supervision and staff incentives.
	Is the recommendation achievable?
A chievable	I feel that I can try improve this but very limited with ever increasing workload and staff absences etc.
Relevant	Is the recommendation relevant?
Kelevani	Yes
T ime-Bound	When will the recommendation be achieved?
nme-bound	Hopefully by Jan 2023.

	What is the recommendation?
	Make use of the display boards in waiting areas to deliver specific, targeted information, advice and guidance in large fonts around the following areas:
Specific	 Information regarding different roles within the surgery (please see recommendation 3)
Opecia	 Information about Online Services and the benefits to the patient e.g: no waiting in queue on telephone, order prescriptions faster, etc.
	Ensure this information is clear, well-presented and patients are able to read from a slight distance (eg: when sitting rather than standing in front of the display board).
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Yes this will be improved and we will ensure the information is clear, well presented and larger fonts are used.
	Is the recommendation achievable?
Achievable	Yes
Relevant	Is the recommendation relevant?
	Yes
T ime-Bound	When will the recommendation be achieved?
	September 2022



	-

S pecific	What is the recommendation?
	Ensure staff use consistent role titles for Practice Staff such as: Care Navigator, Advanced Clinical Practitioner.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	We are going to try & push the We are Primary Care Programme to ensure consistent use of role titles and share more information on what these roles can do with patients via social media.
	Is the recommendation achievable?
Achievable	Yes
Relevant	Is the recommendation relevant?
	Yes
Time-Bound	When will the recommendation be achieved?
	October 2022

	What is the recommendation?
	Deliver information regarding roles and responsibilities of Practice Staff to patients via the following methods:
	Social Media
S pecific	• Website
	Notice Board displays
	 Short, recorded messages to play when patients are in the queue on the telephone
	Text message

	• PPG
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Yes as above.
A chievable	Is the recommendation achievable?
	Yes
Relevant	Is the recommendation relevant?
	Yes
T ime-Bound	When will the recommendation be achieved?
	October 2022

S pecific	What is the recommendation?
	Care Navigators to ensure a robust signposting system is in place and utilised to provide alternative solutions for patients whose demands or needs cannot be met by the Practice.
Measurable	How can you measure progress and know if you have successfully met the recommendation?
	All staff to go on more robust Care Navigation Training and to be provided with a script to use to help answer questions they may not feel confident on.
	Increase the knowledge of the staff by asking the services to send out information or come and talk to the staff about the services they offer.
Achievable	Is the recommendation achievable?
	Yes
R elevant	Is the recommendation relevant?
	Yes



T ime-Bound	When will the recommendation be achieved?
	August 2022.

	What is the recommendation?
S pecific	Recruit more staff to decrease burden and pressure on existing staff team, as below:
	 Revisit role description and host focus groups/consultations with specific groups (such as Health and Social Care Students) regarding wording of advertisement
	 Put staff photos and a short paragraph about what it is like to work within the team and Practice on social media, website, and notice boards. This could include background, work experience, and examples of career progression and opportunities available.
	How can you measure progress and know if you have successfully met the recommendation?
M easurable	We are able to revisit role descriptions and advertisements and share staff photos on website & encourage more staff.
	Is the recommendation achievable?
A chievable	We are able to recruit more staff and hopefully this will improve the uptake, but we struggle to retain staff due to NHS stresses/ workload and pressure. I am unsure whether this would be achievable.
Polovant	Is the recommendation relevant?
Relevant	Yes
T ime-Bound	When will the recommendation be achieved?
	Hopefully by Jan 2023.



	What is the recommendation?
Specific	Make the sign in reception regarding no tolerance for abuse to staff more visible. It is currently placed in the far bottom right corner of the notice board to the left of the reception desk and is slightly obscure. Use a larger print in a more visible location, such as on the protective screen or to the left of the notice board.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	This will be larger and moved and we will have multiple in the reception and in clinical rooms.
Achievable	Is the recommendation achievable?
	Yes
Relevant	Is the recommendation relevant?
	Yes
T ime-Bound	When will the recommendation be achieved?
	July 2022.

S pecific	What is the recommendation?
	Establish and foster working relationships with Creative Start, We Are With You and other local Drug and Alcohol Misuse Services to ensure up to date and accurate information is available to patients and to fit the Practice's client group.
M easurable	How can you measure progress and know if you have successfully met the recommendation?
	Encourage the local Drug and Alcohol Services to send accurate & up to date information, share this with our patients. Have regular meetings with the Drug & Alcohol Service, ask them to participate in clinical and practice

	meetings.
A chievable	Is the recommendation achievable?
	Yes
Relevant	Is the recommendation relevant?
	Yes
T ime-Bound	When will the recommendation be achieved?
	By December 2023.

S pecific	What is the recommendation?
	To encourage patients and increase the use of online systems for repeat prescriptions etc. Information to be sent out either via SMS or information given to patients when they collect their prescriptions.
	How can you measure progress and know if you've successfully met the recommendation?
M easurable	To see our practice population who is currently using Online Services and re-run this report to show how many patients are using the service.
	Inform more patients when calling & on prescription messages/website/social media.
A chievable	Is the recommendation achievable?
	Yes
Relevant	Is the recommendation relevant?
	Yes
T ime-Bound	When will the recommendation be achieved?
	By December 2022.

Service Provider Response

Dr Mathews GP Practice have responded and completed the recommendations charts.

Next Steps

Healthwatch North East Lincolnshire will support Dr Mathews GP Practice to achieve the recommendations.

Distribution

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