

# GP Services Enter and View Summary Report



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# What is an Enter and View?

Enter and View is a legal power in which Healthwatch can enter health and social care services to see them in action. This power to Enter and View services enables Healthwatch to identify what is working well with services and where they could be improved.

An Enter and View is not an inspection of the service. Healthwatch do not inspect provider policies, staffing reports, individual care plans, medication records etc. Although Enter and View sometimes gets referred to as an 'inspection', it should not be described as such. Healthwatch are there to observe the service provided and amplify the voice and experience of people using the service, relatives and staff.

## Where does Enter and View apply?

The legislation places a duty on health and social care providers to allow authorised representatives of Healthwatch to carry out Enter and View visits on premises where health and social care is publicly funded and delivered. This includes:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities
- A person providing primary medical services e.g. GPs
- A person providing primary dental services e.g. dentists
- A person providing primary ophthalmic services e.g. opticians
- A person providing pharmaceutical services e.g. community pharmacists
- A person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Premises 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.

# Summary

Healthwatch was established in April 2013 as part of the implementation of the Health and Social Care Act 2012. Healthwatch uses people’s feedback to better understand the challenges facing the NHS and other care providers and we make sure people’s experiences improve health and care for everyone – locally and nationally. We can also help people to get the information and advice they need to make the right decisions for them and to get the support they deserve. An integral part of Healthwatch Lancashire’s role is to champion the views and experiences of people in the local community. One aspect of this work is to conduct Enter and View Visits in different service sectors. Visits are based on intelligence from members of the public about services that they are using. During 2022 there was an increasing trend of people reporting issues relating to their experience of making appointments. Information from the Healthwatch Lancashire Feedback centre and general engagement suggested that there was an ongoing issue with the appointment making process.



Healthwatch Lancashire representatives actively promoted the use of the online feedback centre to gather additional comments and experiences that have fed into this piece of work and programme of visits. We obtained 32 responses with 20 of those directly relating to the waiting times that people experienced when making an appointment. The most common theme of the response was that people were experiencing issues arranging appointments using the phone systems at surgeries across Lancashire.

Healthwatch Lancashire Feedback Centre responses:

"Very rude and appalling receptionists, absolutely disgusting childish behaviour and no communication skills and no customer service whatsoever, feels like they have been forced to be there, ask questions more than the doctor to make an appointment, have to chase them for your medical reports, doctor does not care about the patients, doctor is in his own world, Overall, a heartache to be with this Gp."

"Really bad service, waiting for ages on the phone line for appointments and you can't get a blood test."

"I can't get in to see a doctor, I keep getting rescue packs of antibiotics from the pharmacy as I can't see my doctor. I am unsure if I should even still be on the antibiotics."

"I have made an appointment for support and there are very long waits on the phone. When I eventually do get to speak to someone, there are no more appointments available. I have asked about either telephone or face to face and they are never available."

"I love my doctors, they are friendly, helpful and I never have a problem with getting an appointment."

The Doctor changed so they did not know about the previous issues that we were experiencing. When I ring at 8 I cant prebook for another day."

"I contacted the surgery to get some assistance for my child who is undergoing a diagnosis. I tried to get a face-to-face appointment and spent a long time on the phone waiting to be spoken to. All appointments that I was eventually able to get where over the phone and it did not give me the opportunity to properly explain the situation."

An Enter and View project was undertaken focusing on GP services in Lancashire To explore and observe the experiences that people were having booking an appointment, hearing about the care they received and to investigate the solutions that surgeries were employing to meet the demand. Visits were conducted between November 14<sup>th</sup> 2022 and February 7<sup>th</sup> 2023. In total, six GP practices were visited by Healthwatch Lancashire Representatives.

During this project Healthwatch engaged with 117 people through face-to-face discussions or completion of written responses.

There was a high level of satisfaction from patients in response to the quality of care that they received when they attended the surgeries. 87% of patients, spoken with at the surgeries, had a positive experience with the care they received from Clinical staff.

There was a mixed response to questions relating to the experience of making an appointment with 64% patients describing a negative experience with the appointment making process. A common theme was the length of time that it took to make an appointment. Some patients expressed a lack of awareness or willingness to engage with alternative methods of appointment making such as online apps and making telephone appointments.

# Methodology





The project was carried out based on information that Healthwatch Lancashire Engagement officers collected through general engagement with members of the public, information from the Feedback Centre and based around intelligence from the community and other news outlets. Several local news outlets and a collection of over 30 posts on the Feedback centre indicated that there was a long-standing issue with wait times. Several case studies were collected that highlight and add context to the issue.

## Focus Group: Community group in Preston 28<sup>th</sup> September 2022



“The initial conversation began with a discussion about their access issues with GP surgeries. The group all agreed that once they actually saw their doctor they had a positive experience but this was the only real positive gained from the discussion. The most common complaint that was raised was that they were having issues securing face to face appointments with their GP or another medical practitioner. One member reported being held on the phone for 45 minutes before they spoke to a member of staff to be told, “There are no appointments call back tomorrow.” When they called back they still struggled to secure an appointment with anyone.

Another commented that, “I want to see a doctor face to face and not over the phone. I see a different Doctor every time and I have to repeat myself every time”

Some commented on the long delay between appointments where one member of the group had to wait a long time after her appointment for a blood test for quite a concerning condition. There was a collective frustration surrounding access and wait times for blood tests as many of the group have regular blood tests and the delay between referral and undertaking of the test was causing some worries and concerns.”

**Taken from a discussion with a community group**



The issue of wait times was observed to be a common trend across all areas of the county. As a result of this information, a series of visits were planned to look at the situation and to observe practices to identify what was being put in place to alleviate the issues that patients were encountering.

A total of six visits were planned across the whole geographic area of Lancashire. A selection of surgeries were chosen based on local intelligence gained from engagement in the local area.

All surgeries that were involved in the Enter and View visits were informed of our intention to visit with several weeks' notice wherever it was possible. Prior to each visit, a poster advertising our visit was sent to the surgery which advertised the feedback centre. This was put in place to give anyone the opportunity to provide their feedback if they could not be present at the time of the visit.



Patients: 66  
Practice Staff: 51

## Visit Structure

Each visit was carried out in different stages, using surveys and observations.

**Stage one:** A pre-visit discussion was carried out via Teams with the Practice Manager, to discuss the demographic of patients, appointment management, and other practical questions about the visit to ensure that patient safety was not compromised in light of the resurgent Covid-19 pandemic. Practice Managers discussed the strategies that were being employed to resolve waiting time issues and how they engage with their patients through the use of Patient Participation Groups (PPGs) to gather feedback on their services.

**Stage two:** The visit was carried out. The practice manager showed us the facilities and talked about the services that they provided.

**Stage three:** Surveys were undertaken with:

-Patients looking at how they had made their appointment and their level of satisfaction with the care provided.

-Staff to look at how they perceived the level of staffing and what they thought about the service they provided.

Surgeries were sent a poster advertising the date and time of the visit. This gave patients the opportunity to share their experiences with us if they were unable to be present at the time of the visit.

**Stage four:** a report was then written to summarise the findings from the visit from the staff and patient perspective. This was then used to form recommendations to improve the patient experience. This report was then sent to each provider to check for factual accuracy and to give them the opportunity to respond to the feedback and recommendations.

**Stage five:** The report was then amended and then published on the Healthwatch Lancashire website, a copy was also sent to the provider for their records.

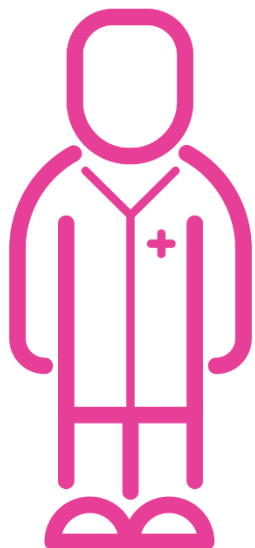
## Surgeries Visited

| GP Surgery   | Location  |
|--|-----------|
| Lancaster Medical Practice – University Medical Centre | Lancaster |
| Issa Medical Centre                                    | Preston   |
| Thursby Surgery  | Burnley   |
| Richmond Hill Practice                                 | Colne     |
| Mountview Practice                                     | Fleetwood |
| Worden Medical Centre                                  | Leyland   |

Full Enter and View visit reports can be read here:

<https://healthwatchlancashire.co.uk/enter-view/enter-view-reports/>

At each visit, Healthwatch representatives spoke with members of Practice management, Clinical staff and administrative staff to hear their opinions and experiences.



## Pre-visit questionnaire

Healthwatch Lancashire representatives made contact prior to each visit to introduce themselves as authorised representatives, to explain the role of Healthwatch and to discuss the purpose of the visit. Healthwatch experienced a range of wait times when we contacted the surgeries.

A breakdown of times is listed below:

| Surgery                  | Time taken for response | Comments  |
|--------------------------|-------------------------|---|
| Lancaster Medical Centre | 8 minutes               | Informed of position in the queue and online options are signposted as part of the call   |
| Issa Medical Centre      | 25 minutes              | Held in the same position in the queue for 15 minutes but were kept informed  |
| Thursby Surgery          | 40 minutes              | Regular information messages repeated.  |
| Richmond Hill Practice   | 15 minutes              | Informed of position in the queue and signposted to alternative emergency numbers   |
| Mountview Practice       | 10 minutes              | Given options for appointments or prescriptions and informed of position in queue.  |
| Worden Medical Centre    | 5 minutes               | Informed of triage process and given options to make an appointment online via a link sent to the phone number via text message. We were informed of position in queue. |

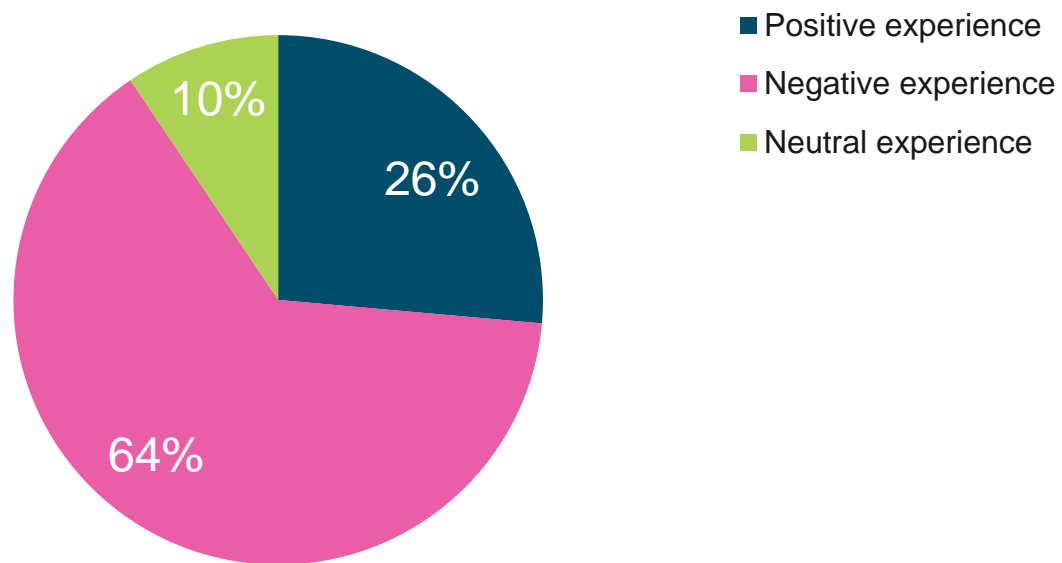
# Patient Feedback

Healthwatch spoke with 66 patients throughout this Enter and View programme.

Questions asked of people were related to the following areas of their appointment making experience:

## Appointment making

Feedback, that Healthwatch Lancashire received, in relation to the appointment making experience was mixed with an almost equal number of people having a positive and negative experience.



Most negative comments by patients concerned the length of time that it took to get in contact with the reception desk to make appointments. The common theme was that it would take a long time or several attempts to ring through to the call handling team. At one surgery it was mentioned that someone had needed to ring in forty times before they received a response. Some patients expressed understanding about how busy surgeries were but they felt that calling the surgery did cause them some issues when they wanted to make an appointment.

Responses from patients at two surgeries reported no issues with the wait times and that they understood if that there was a delay that it was for a good reason. At two of the six surgeries, patients expressed positivity about how they made their appointment with the process being reported as simple and easy. Other patients expressed frustration about being asked questions about their condition. One patient mentioned that they were not happy being asked about their symptoms over the phone. An average of two patients each at of the five visits were unsure about how the information was being used to help navigate them to suitable care pathways.

It was noticed that there were some patients who had made their appointments through apps such as MyGP, Patient Access or Klinik. The patients that had used this reported that the process was simpler and they were able to make appointments at times that suited them best.

However, there was also a reluctance, from some patients, to use alternate methods to make appointments with some reporting that the apps were hard to use or that there was no facility to book appointments at some surgeries. Some patients were unaware that these options were available to them and expressed interest in using them if it would make the process more straightforward.

There was a variety of methods that were being used by patients to make appointments at all six visits:

- over the phone
- walk-in enquiries
- online resources such as an app or website

*"I just want an appointment with my doctor."*



It was noted that some surgeries were actively encouraging patients to make use of online resources through the use of equipment within the waiting area or advertising it as an option on the phonelines. One surgery was observed to be sending links to people through text messages to allow them to access online methods of appointment making.

A self-check in screen at Worden Medical Centre



*"It is difficult to get appointments. The phone process is fine but you have to persevere."*

*"Staff are nice but it takes too long to get through."*

*"I tried for 35 minutes and kept getting cut off."*



*"I rang up and was second in the queue but it took less than five minutes."*

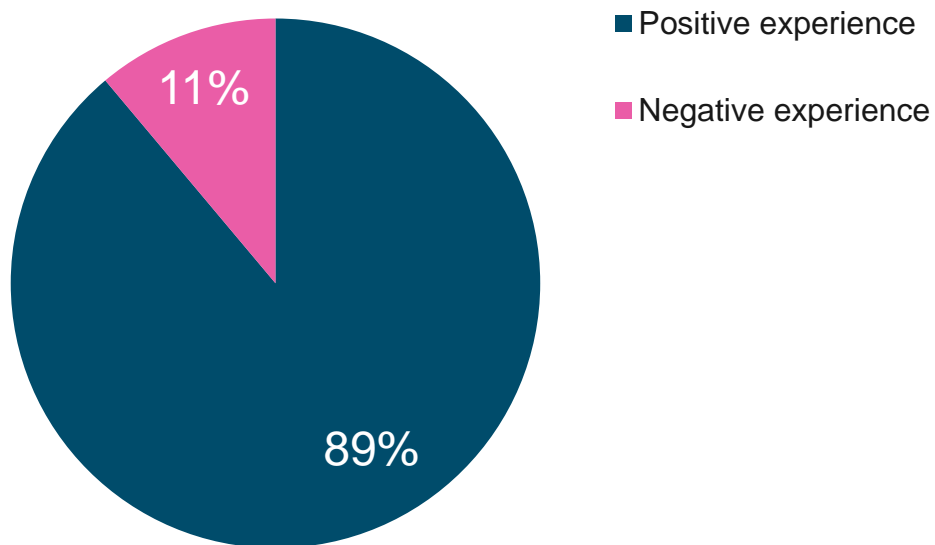
*"Appointments are not given soon enough. I end up waiting a long time on the phone."*



## Quality of care

Patients were complimentary about the care that they received from clinical staff at all six surgeries. 89% of patients the Healthwatch Representatives spoke with described a positive experience with the care they received at their appointments. The most common feedback was that patients felt that they were listened to and given an appropriate level of care.

There were some experiences reported where patients felt that there were issues with the communication between them and the clinicians, that they were not listened to or given the support that they needed. Two patients at different surgeries explained how they were not seen by someone that was appropriate and they still needed to be seen by a GP. They felt like the care navigation had sent them to the wrong member of staff and their issue on the day had not been resolved.



“When visiting the surgery, the receptionists were very efficient and helpful, the clinicians were helpful and friendly.”



## Communication and Feedback

Patients were asked if they knew how to raise a complaint with the surgery, there was a mixed response with 41% of respondents being unsure about how to raise an issue with the surgery. Most people commented that they would ask a member of staff if they were unsure about the process. There were feedback boxes available at some of the surgeries that were visited which gave patients a direct route to pass on feedback.

However, some patients had not noticed them when asked about them. Some patients expressed interest in joining patient participation groups (PPGs) to give them the opportunity to be directly involved in the improvement of services at a practice. There were advertisements in some practices for PPGs which were in the process of being set up or were an established part of the practice.

*"I am happy with the care that I receive."*

*I was pleased with the service."*

*"Staff always listen to me and are polite."*

*"Since Covid, I feel like nobody is really interested. I get directed to Urgent Care who then send me back to my GP."*



Information Board Mountview Practice

# Staff Feedback

Healthwatch spoke with 51 members of staff including practice management teams. The questions that were asked concerned staff members' opinions on how the practice managed the demands from patients and whether they felt supported to give a person-centred experience to patients. There was also a question asking staff to comment on any aspects of the patient experience that needed changing or adapting to make the experience more positive.

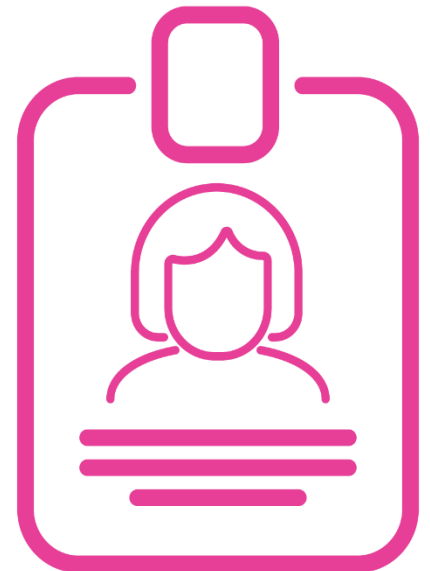
## General feedback

All staff that Healthwatch Lancashire spoke with felt that they were supported in their roles and that they were happy with their jobs. All members of staff felt like they were able to deliver person centred care. Some commented that they sometimes felt like they were working against high expectations from patients in terms of who they were seen by. Some members of staff explained how they had changed their systems to meet the demands by offering alternate methods of appointment making and changing the staffing levels at peak periods during the day.

All practice managers were aware of the ongoing issue and had taken steps to try and mitigate the pressures on their staff. It was noticeable that all surgeries were taking a different approach to rectify the call waiting time issues with some providing outreach to educate patients about their choices and options and other surgeries designing their own bespoke care-navigation pathways to ensure that patients were sent to appropriate clinicians.

Two surgeries had invested in new phone systems that would allow the patients to receive call backs to prevent them waiting on the phone for extended periods of time and had increased the number of staff that were responsible for handling calls. One surgery was investing in a brand-new online application that would provide translation and a more user-friendly interface for patients to use. This was being heavily promoted by the staff at the practice.

It was mentioned by several members of staff during the visits that they felt there was a lack of awareness, patience and understanding from patients who did not want to be seen by any other member of staff than their GP. Three surgeries made mention of incidents where patients had presented with challenging behaviour when they were not allocated an appointment with the specific member of staff that they wanted. Some members of staff felt that there was work that needed to be done to engage with members of the public to share the options that were available to them and to explain the care navigation pathways to improve communication between the practice and patients.





"Better communication is the key."

"Everyone is working above and beyond with all staff helping out."

"It is a life-long issue with education with patients who will always need to be kept updated on how working practices have changed in recent years."

"We have so many patients coming to us, we need to make them aware that they don't always need to see a doctor."



**OUR NON-CLINICAL TEAM** Lancaster Medical Practice

We have a fantastic and broad team of non-clinical staff working alongside our clinicians

- MEDICAL RECORDS**: Confidentially manage patients' medical records.
- URGENT CARE CONTROLLER/ADMINISTRATOR**: Manage and book appointments for those needing treatment within 72 hours.
- PATIENT SERVICES RECEPTIONISTS**: Assist patients by taking calls, working on reception, booking appointments and answering queries.
- PATIENT SERVICES COORDINATOR/TRAINER**: Manage and train our patient services team.
- MEDICAL SECRETARY**: Provide secretarial assistance to medical staff. Manage referrals and medical letters.
- CORPORATE SERVICES**: HR, Estates & Facilities, Finance, IT, Informatics and Communications teams.
- PLANNED PATIENT CARE ADMINISTRATOR & NON CLINICAL CARE COORDINATOR**: Manage and book routine appointments and home visits. Oversee patients' palliative care and assist our vulnerable patients with managing their own care.
- MANAGEMENT TEAM**: Responsible for managing all aspects of the practice.
- RECALL & SCREENING**: Contact patients to arrange reviews and checks.
- SITE SUPERVISOR**: Manage and maintain each of our sites.
- QUALITY & PERFORMANCE**: Responsible for maintaining and monitoring consistently high standards of patient care and safety.
- MEDICINES TECHNICIANS AND MEDICINES COORDINATORS**: Manage and support as appropriate all prescription requests and medication queries.

**OUR CLINICAL TEAM** Lancaster Medical Practice

We have a fantastic and broad team of clinical staff working alongside our GPs who provide a wide variety of specialist care to our patients

- HEALTHCARE ASSISTANT**:
  - Conduct health checks such as blood pressure monitoring, taking blood samples and urine checks.
  - Give vaccinations and injections
  - Give healthy living advice
  - Remove dressings and stitches
- ADVANCED CLINICAL PRACTITIONER**:
  - Telephone triage of various conditions
  - Assessment and examination of new medical problems
  - Order tests and interpret results
  - Can prescribe medications
  - Provide care at home for our household patients
- CLINICAL CARE COORDINATOR**:
  - Support individuals' personalised care requirements
  - Support people to take up training and employment
  - Provide coordination and navigation for people and their carers across health and care services
- MENTAL HEALTH PRACTITIONER**:
  - Specialise in mental health services
  - Use talking therapies to help people with common mental health conditions
  - Provide support for the psychological impact of long-term health conditions
- FIRST CONTACT PHYSIOTHERAPIST**:
  - Physiotherapists with enhanced skills
  - Can see patients without a GP referral
  - Assess and diagnose muscular and joint conditions
  - Refer patients onto specialist services if necessary
- PRACTICE NURSE**:
  - Undertake a wide range of roles across almost every aspect of patient care
  - Support people with long term conditions
  - Give family planning and sexual health advice - including cervical screening (smear tests)
  - Provide traditional aspects of nursing - e.g. immunisations, wound care etc.
- MENTAL HEALTH PRACTITIONER**:
  - Experts in medicines and the wider health and social care system to provide healthcare in care homes
  - Acute and chronic care of care home residents
  - Help individuals to manage the complexities of their health
- CLINICAL PHARMACIST**:
  - Support those with long-term conditions
  - Perform adult medication reviews
  - Give advice and help regarding medication queries
  - Can prescribe medications
- FRAILTY MATRON**:
  - Work with general practice and the wider health and social care system to provide healthcare in care homes
  - Acute and chronic care of care home residents
  - Help individuals to manage the complexities of their health
- PARAMEDIC**:
  - Work alongside GPs, helping to manage routine and urgent appointments, triaging and home visits.
  - Can order tests and interpret results
- HEALTH COACH**:
  - Help patients gain the knowledge, skills and confidence to become active participants in their own care
  - Deliver group and one on one sessions to meet with personalised care plans
- SOCIAL PRESCRIBER**:
  - Identify patients' unmet needs and prevent possible crises
  - Work together with the patient to support and empower them to meet new people and find activities that will benefit their long term health

An information board at Lancaster University Medical Centre

# Recommendations

At the conclusion of an Enter and View visit, Healthwatch Lancashire representatives made recommendations based on feedback from patients and staff to improve the experience for patients at a surgery. A total of 25 recommendations were made to practices to make alterations to the environment or improve methods of communication between patients and staff.

Some examples of recommendations are:

1. Ensuring that waiting rooms are dementia friendly with a clock displaying the day, date and time is visible
2. Information on boards is clear, accessible and up to date
3. Investigate ways to make the complaints and feedback process simpler
4. Identify ways to promote education of patients about how to make best use of appointments
5. promote the membership of PPG groups
6. Investigate ways to ease pressures on phone systems through the use of staff deployment
7. Investigate ways to make the online booking process more accessible
8. Improve signage around practices to make them easier to navigate
9. Investigate more accessible prompts for calling patients to appointments using audio-visual methods
10. Promoting the use of self-check-in systems for patients to use

# Impact

To demonstrate impact of our Enter and View visits, Healthwatch Lancashire monitor how many of our recommendations have been actioned. At the time of this report, we have information that thirteen of Healthwatch Lancashire's recommendations have been put into action by surgeries.

One example is that an open day was held at a surgery to advertise a Patient Participation group.

As part of our commitment to working closely with our partners we are planning to hold a range of informal follow up visits to settings we have visited to continue to be a supportive partner and build on our good working relationships going forward.





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Lancashire

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