



Enter and View

Meadowfield Surgery
26 April 2023

healthwatch
County Durham

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Details of visit

Location:

**Sawmills Lane
Meadowfield
County Durham
DH7 8NH**

Date and time of visit:

26 April 2023 1–3pm

Authorised Enter and View representatives:

**Tony Bentley
Mervyn Hockin**

Healthwatch Volunteer Supporter:

Claire Sisterson claire.sisterson@pcp.uk.net 0191 3787695

Registered provider:

The Medical Group

Type of service:

GP Practice

Lead Medical Receptionist

Nicola Hughes

Acknowledgements and context

Healthwatch County Durham would like to thank the management, staff & patients for making us feel welcome and taking part in the Enter and View visit.

An important part of the work local Healthwatch does is to carry out Enter and View visits. The purpose of this Enter and View Visit was to hear from patients and record their experiences at the surgery.

Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations about where there are areas for improvement. The Health and Social Care Act allows 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 and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and View 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 need to inform their lead who will inform the service manager, ending the visit.

Purpose of the visit

Since 2020 the Enter and View programme at Healthwatch County Durham had been paused because of the Covid-19 pandemic. When we decided it was safe to start visiting again, we chose GP surgeries as the first services to visit. We did this because access to GP surgeries was one of our main work plan priorities and so the visits would link to the work we had already completed.



"In our opinion, the Enter and View visits are a great way to break down barriers, give practices an independent view on the success of their service and help them highlight areas for improvement. We would recommend an Enter and View visit to any practice."



Brian Woodhouse, Practice Manager, Enter & View

To try and get a balanced picture of access to GP services we wrote to a selection of Practice Managers across the county to offer them the opportunity to request an Enter and View visit. The aim was to gather patient feedback focusing on areas such as access, services offered and specific requirements. Meadowfield Surgery was one of 6 who requested to be included in the visits.

Because this Enter and View visit, is linked to specific work around the access to GP services it does not include any observations about the premises, equipment etc. that we normally include in our Enter and View visits.

This report relates to this specific visit, including feedback from patients received during the two hours of the Enter and View visit and feedback from a survey left for completion at the surgery before our visit. Therefore, it is not representative of all service users, only those who contributed within the restricted time available, through interviews and other feedback.

Description of the service

Meadowfield Medical Centre is located at Sawmills Lane, Meadowfield, DH7 8NH. The practice one of 5 surgeries which are part of The Medical Group.

There are 11476 patients currently registered at the practice. The practice is open: 8am until 6pm.

Planning the visit

The questions used were carefully put together (appendix A) beforehand to reflect the approach we were taking. Previous Enter and View visits have used 'appreciative questions' to understand what is working well in GP services. These questions were agreed with staff and authorised volunteer representatives and were also sent to the identified staff member before each visit.

We met with an identified staff member individually to plan the visits, agree the process, and make sure it would work for patients and staff.

We realised that there might be people who would like to make a comment about the service who were not going to be around on the day of the visit, so the surveys were left two weeks before the visit in the waiting area, on a Healthwatch display table, with a box for completed surveys to be left in.

We advertised the visit in advance (appendix B) and Nicola Hughes, the Lead Medical Receptionist, briefed the staff before the visit.

We carried out a preparation visit before the Enter and View. This was to do a risk assessment and consider areas such as layout, introductions, venue space and safety procedures and the process for taking photographs. We agreed to use a private space for conversations if needed.



How was the Enter and View conducted?

Two of our trained Enter and View Authorised Representatives carried out the visit with the Volunteer Supporter. Representatives approached patients during the visit and asked a series of questions about their experiences and understanding of the processes at the surgery. We carried out 21 individual interviews with patients. We also left surveys in the reception area prior to our visit and 5 were completed.



Feedback and findings

The Enter and View representatives completed the survey with patients. The representatives also made note of any other relevant information the patient wished to give about the surgery. All the surveys were anonymous.

The full survey results can be found at appendix C

Patient feedback

During the 2 hours visit, 21 surveys were completed with patients and 5 surveys had been completed in advance of our visit. Below are some of the key findings from patients.

Getting an appointment

Most patients are still making appointments on the telephone, but the telephone lines are under pressure early in the morning. One patient told us- **“many people just come up and queue”**

35% (9) of patients told us they got an appointment the same day, 3 people said they had been unable to get an appointment.

How quickly did you need to be seen?

19% (5) patients told us they felt they needed to be seen on the same day.

3 patients said the surgery had contacted them to book the appointment and 1 patient said his consultant had asked him to make an appointment 2 weeks before it was due, but there were none available.

15% (4) patients said their appointment wasn't urgent, so they were not worried.

1 patient said, **“Needed to see someone very quickly—eye emergency, no response”** (detached retina)

Did you see another service if no appointment was available?

19% (5) said they had used NHS 111, 12% (3) said they went to Accident & Emergency, 8% (2) said they used a “walk-in service”

If there was no appointment available how would this affect other parts of your life?

Some patients told us they may need to take time off work or take sick leave. One said **–“hard ringing during work to try to get an appointment”**

How did you make the appointment?

Most patients, 58% (15) said they used the telephone, 2 had booked online, 2 used e-consult as it wasn't urgent and there were 3 pre-arranged appointments.

Who did you ask to see?

17% (7) of patients were happy to see anyone, 17% (7) wanted or expected to see the GP and 2 people the nurse practitioner.



Do you know which staff are available and what they can provide?

54% (14) patients said no and 19% (5) said yes. 2 patients said other than GP, nurse, midwife and paramedic, they were not sure.

Does the surgery have a website page and is it on Facebook?

31% (8) patients knew the surgery had both, 27% (7) knew about the website, 27% (7) were not sure about either

Do you have any additional communication or information needs?

No one told us they had any additional needs

How do you order and get repeat prescriptions?

23% (6) patients told us they ordered online, 3 said they telephone and have them delivered, 3 call into the surgery and 3 told us their prescriptions are automatically ordered and sent out.

If you did, who and why did you expect to see a specific person?

Some of the reasons people gave were:

“GP-wanted the best person for my little girl”, “GP- it was a follow up”, “GP-because of operation”, “Nurse-they can prescribe what I need”

Did you get to see who you asked for?

23% (6) patients said yes, they did and 12% (3) said no they did not.

Some of the comments were:

“No but wasn't bothered because pain was addressed”, “Locum couldn't change what GP had organized so nothing to offer.”

Did or do you have to wait longer to see who you want to?

23% (6) patients said no and 2 said sometimes.

Were you offered an earlier appointment with a different person?

19% (5) patients said yes, they were and 19% (5) said no they were not. Some comments were:

“Yes, but didn't help”, “No -no nurse appointments available”

Recommendations

Below are our recommendations from our visit.

The telephone lines are under pressure early in the morning and people see it as “first come-first served”

Can the process of how appointments are allocated be promoted? Including explaining, how appointments that are urgent, non-urgent, referrals etc. are managed.

Most patients are making appointments by telephone. Some said they would be happy to speak to someone rather than a face-to-face appointment. Are there anyway telephone calls could be split at the start of calls, which would make the process more streamlined for patients and staff? (Patients told us this worked for online requests)

Several patients told us they had used NHS 111, but only 1 said they had used their pharmacy for help. Could the benefits of using local pharmacies be promoted? Does the surgery make patients aware of the fact NHS 111 has a number of allocated GP appointments for emergencies every day?

Some patients who work are struggling with the current appointment process. Is there any way this could be considered/looked at?

More than half the patients we spoke to did not know the makeup of the staff structure and what the staff could do at the surgery. Could the surgery provide more information and publicity about this?

Although more than half the patients were aware of the website, less knew about Facebook. Could this be promoted?

Based on several reasons patients felt more confident seeing the same person for appointments. There are cases where this might be appropriate. If patients were more aware of job roles and what staff could do, they might feel more confident to see someone else in the surgery.

Here are some things we would like to highlight from our visit.

Almost half the people we spoke to said they did manage to get appointments on the day they called

Several people told us they were happy to see anyone but a third told us they wanted/expected to be able to see a GP

Prescriptions procedure seemed to be managed well-no issues whether ordered online at the surgery or automatically generated

Most patients we spoke to had seen the person they asked for on the day. A couple of people who had not been, were happy with the outcome as their issue had been sorted out.

Patients told us generally they didn't wait longer to see who they wanted to. Only 50% were offered an appointment with an alternative person, whilst nearly 50% said they would have taken an appointment with an alternative, but none were available

Service provider response

"Every patient wanting to book an appointment is Care Navigated ensuring they are seen in an appropriate time frame and by the appropriate Clinician or Service that is best suited to deal with their problem. This is highlighted in the phone message that patients hear before getting through to the Reception Team, so Patients are aware they will be asked a series of questions to ensure their needs are dealt with appropriately. The way appointments are allocated has also been promoted on our Facebook page.

All patients are offered the option of a telephone call or a F2F appointment this will be booked at the patients request if appropriate, the appointment time is the same for a telephone call or a F2F.

By Care navigating patients we are asking a series of questions ensuring the patient is booked with the appropriate person or service. Social Prescribers, Healthier and Wealthier Teams, Pharmacies etc. are advertised in the Surgery and on our Facebook page.

Reception staff are also aware of who is appropriate for patients to see and will explain their role when booking an appointment or making a referral to them.

We do not make patients aware of NHS 111 having a number of allocated GP appointments, If NHS 111 refer a patient to us then this will be dealt with on the day.

Patients will be booked in within a time scale appropriate to their needs, we offer late night, Weekend and pre bookable appointments as well as e-Consult, or Community Pharmacies, in house Pharmacy Team. All of these options will be offered to patients depending on the problem. If a patient is needing an urgent appointment they would not be turned away this would be dealt with on the day by the Duty GP.

All new staff or new roles such as Social Prescribers/ Paramedics etc. within the Surgery are advertised on our Facebook page or promoted through staff when speaking to patients.

Staff are constantly having discussions with patients about the website and how to use e-Consult. More promotion of the Facebook page to be displayed in the waiting room. We do try to book patients with the same Clinician especially if an ongoing issue but this is not always possible. If Clinicians require a follow up with themselves this will be arranged at the time of an appointment. If the Clinician requested was not available all patients would be Care Navigated ensuring they were booked in with the correct person for their issue. This would be explained to the patient.

We found the Enter & View very useful, with friendly staff running the visit. The Enter & View ran very smoothly on the day with no effect to the day to day running of the Surgery. We welcome any feedback either good or bad. Always interesting to hear what patients think of the service we provide and areas we need to improve on, The Enter and View provided some positive feedback from our patients which is always good to hear"

Nicola Hughes (Lead Medical Receptionist)

Appendices

Appendix A (Questions):

ACCESS

1. Have you been able to get an appointment recently at the surgery?
2. How quickly did you feel you needed to see someone? Expand/explain
3. If you were unable to get an appointment, did you use any other services in the meantime, how did you manage? (i.e., Pharmacy, walk in centre, A&E, 111, private company)
4. If you were unable to get an appointment did this affect other aspects of your life? (Work/family/finances/leisure etc.)
5. How did you make or try to make your appointment with the surgery? I.e.-in person/telephone/online

SERVICES OFFERED

6. Who did you request to see?
7. Do you know what staff the practise has available to see? Who are they and what do/can they do (who can prescribe, refer, and sign sick notes?)
8. Does the surgery have a website and a Facebook page? (Can you access online?)
9. Booking/accessing appointments-Do you have any additional communication or information needs e.g., do you need a letter in large print/translator.
 - If 'Yes', can you tell me what you need, are those needs being met?
10. If you require repeat prescriptions, how do you order/get them?

(RESPONDENTS) SPECIFIC REQUIREMENTS

11. If you asked for a specific person/professional, why did you do that?
12. Did you get to see who you asked to see?
 - If yes, do you feel you got the 'best' outcome by seeing that person? Explain/expand
 - If no, do you feel you got a 'good enough' outcome by seeing the person you saw? Explain/expand
13. If you got to see who you requested, did you have to wait longer to see them?
14. Were you offered an earlier appointment with another member of staff/professional?
 - If yes, why did you turn that appointment down?
 - If no, would you have taken an earlier appointment with someone else, if offered?

Thank you so much for your time.

Claire Sisterson (Volunteer Support) – HWCD claire.sisterson@pcp.uk.net 07756 654223

Appendix B

Talk to us about GP appointments

Wednesday 26 April 1.00-3.30pm

Meadowfield Surgery

Healthwatch County Durham is your local, independent health and social care champion. We would like to hear from patients and staff about access to GP appointments, specific services and meeting particular needs.

If you can't come along on the day, please complete a survey and leave it in the box so you can still share your views!

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Tel: 0800 3047039

Text: 07756 654218 Whitfield House, Meadowfield Industrial estate,
Durham, DH7 8XL



Appendix C

To access the full notes click the link as below



Full Notes 26.5.23 Meadowfield Surgery Enter & View(1).pdf

If you would like a hard copy of the full notes these can be requested by contacting Claire Sisterson
Claire.sisterson@pcp.uk.net 0191 3787695.....



healthwatch

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