



Enter and View

Great Lumley Surgery

3rd July 2023

healthwatch
County Durham

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Details of visit

Location:

Great Lumley Surgery
Front Street
Chester-le-Street
County Durham
DH3 4LE

Date and time of visit:

3 July 2023 10–12.30pm

Authorised Enter and View representatives:

Mervyn Hockin

Healthwatch Volunteer Supporter:

Claire Sisterson

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0191 3787695

Registered provider:

The Medical Group

Type of service:

GP Practice

Practice Manager

Helen King

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. Great Lumley 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 and includes feedback from patients received during the 2 and a half hours of the Enter and View visit. It also includes feedback from a survey left for completion at the surgery before our visit. The surgery also sent a text message out to its registered patients to inform them of the visit, in advance. Therefore, although not representative of all service users, all of those comments contributed within the restricted time available, through interviews and beforehand, are included in the feedback.

Description of the service

Great Lumley Surgery is located at Front Street, Chester-Le-Street DH3 4LE. The practice is one of 5 surgeries which are part of 'The Medical Group'.

There are **5323** patients currently registered at the practice.

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 Helen King, the Practice Manager, 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?

One 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 11 individual interviews with patients. We also left surveys in the reception area prior to our visit and 3 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 and a half hour visit, 11 surveys were completed with patients and 3 surveys had been completed in advance of our visit which were included. Below are some of the key findings from patients.

Getting an appointment

Everyone we spoke to on the day told us yes, they had been able to get an appointment recently at the surgery.

Even where a patient had needed to change an appointment, she was offered an alternative but opted for a telephone call instead of a longer wait.

"Yes always on the day, for on the day!"

Staff told us *"we aim to have patients seen within 14 days of booking"*.

100% of patients told us they got an appointment recently.



How quickly did you need to be seen?

More than half (7) of the patients told us they felt they needed to be seen on the same day, when making an appointment last.

2 patients said they didn't particularly need to be seen quickly, and another said within a week.

2 said their appointment was for a 'routine' issue.

"I needed to be seen today and I took time off work to do it".

"Appointments made on the phone are not just to be seen on the day. We offer advanced appointments-first time they call us." - staff

Did you see another service if no appointment was available?

18% (2) said they had used NHS 111, 27% (3) said they used the pharmacy. 55% (6) said they had not used another service, either they would ring again, had no choice but to be seen or had insisted they needed to be seen.

"I have never, not been able to get an appointment here"

"We try to offer an alternative too, refer to Mental Health, physio, instead of to a doctor"-staff

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

2 people told us this would not have really affected other parts of their lives. 1 said it possibly would have and three said this was not applicable to their situation. However 46% (5) people said it would have affected other aspects of their lives, if they had been unable to get an appointment.

"I'm self-employed so suppose I would have had to plod on"

"Yes-having to have a telephone appointment rather than a face to face affected my mental wellbeing, negatively"

How did you make the appointment?

“People mainly phone up now but pre-Covid online take up was good but then dropped, this is now being re-introduced” – Staff member

Most patients, 82% (9) said they used the telephone and 18% (2) had booked online.

“We can send a doctor a message-not everything needs to be an appointment-there’s a judgement to be made.” – Staff member.

Who did you ask to see?

46% (5) of patients were happy to see anyone, 27% (3) wanted or expected to see the GP and 18% (2) people said doctor or the nurse. 9 % (1) person said the doctor had made the appointment for him.

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

46% (5) patients said no and 46% (5) said yes. 9% (1) patients said they thought that they understood what staff was available and what they could do.

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

63% (7) patients knew the surgery had both, 18% (2) said they knew about neither, 18% (2) knew the surgery had a website but not Facebook

“Yes but don’t use either”

“We know the website is used and we share lots on Facebook”

“I have seen the website on the library computer-I don’t have access online otherwise”

Do you have any additional communication or information needs?

82% (9) people said they did not have additional communication/information needs. 18% (2) told us that they did, one saying “appointment card is provided but I would prefer a text or letter confirming appointment”.

“We have a hearing loop-we know patients who can lip read”

How do you order and get repeat prescriptions?

18% (2) patients told us they ordered online, 54% (6) said they telephone and have them delivered, 9% (1) calls into the surgery or orders online and 18 % (2) 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:

“Consistent approach, I relate to female better who I already know and trust”

“We try to match the request-weigh up the issue and patient choice”

“Ongoing issue”



Did you get to see who you asked for?

36% (4) patients said yes, they did and 18% (2) said no they did not. 27% (3) said this was not applicable to their situation

Some of the comments were:

“I preferred my other doctor as she specialized in wellbeing and mental Health, understood me better”

“Doctors speak to each other—they are very approachable—they know the patients”

“I wanted more advice and guidance, more time to explain my situation and know how to resolve problems”

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

18% (2) patients said no they didn't have to wait longer to see who they wanted to, 27% (3) said they chose to go with someone else “would have to wait a month to see the GP I wanted to, so saw someone else”

9% (1) person said they saw who they wanted to and didn't have to wait longer. 9% (1) person said they weren't bothered who they saw. 27% said this was not applicable in their case.

Were you offered an earlier appointment with a different person?

54% (6) patients said yes, they were and 9% (1) said no they were not. 36% (4) said this was not applicable in their case.

Some comments were:

"We always offer an alternative if possible—offer first call to get sorted"

"Yes I was offered but turned it down as I need consistency and trust"

Additional Comments

"More of a village surgery, so it's easier to get staff together"

"Pharmacy had been rude to me with an issue around baby milk—the surgery sorted me out a code that enabled me to pick up some in Chester-le Street"

"There is frustration around medication related appointments sometimes"

"Staff are really friendly here"

Recommendations

Below are our recommendations from our visit.

Getting an appointment—Everyone we spoke to on the day told us they'd been able to get an appointment at the surgery recently. The aim of attempting to have patients seen within 14 days of booking seems to be working well.

This should be promoted—is there a clear reason why this is working so well and is managed, where it maybe is not with other surgeries?

Slightly more than 80% of patients are making appointments by telephone. Slightly under 20% online. Pre Covid, the take up of your online bookings were good.

How is this being re-introduced or encouraged, to get the online bookings back on track?

More than half of the patients told us they had not needed to use another service. Less than half had either used 111 or the local pharmacy otherwise. This suggests that patients are happy to wait or ring back.

Could the benefits of using local pharmacies and E Consult be further promoted?

63% of the patients told us they felt they needed to be seen on the same day and 46% of those told us if they hadn't been able to get an appointment, this would have affected other parts of their lives detrimentally. Especially around employment and Mental Health issues.

How does the surgery consider these patients and ensure this is limited?

Half of the patients we spoke to did not know the makeup of the staff structure and the other half said they did. This included knowing what the staff could do at the surgery.

Could the surgery provide more information and publicity about this?

A high percentage (63%) of the patients were aware of both the surgery website and Facebook page. Although one person could only access online at the library. The online activity and information sharing seems to be very active and well received.

How do others receive updates and information if they cannot access online?

Interestingly nearly half of all the patients we spoke to said they were happy to see 'anyone'. Whilst 45% said they 'expected' to see a doctor or nurse but were not particularly worried about this. This may be linked to the positive findings when we asked patients if they had managed to

get an appointment, in having a flexible take on 'who' they could access! One patient did suggest that they would have liked more advice/guidance/time to explain their situation and that's why they'd asked to see a specific person. One patient also said that she related to females best but the surgery was meeting this preference for her well.

Can you reflect on anything the surgery has done to encourage/develop this culture of patients being open to who they see-this will be valuable to share with other providers, if so?! And if patients don't feel they have the information or time required, how should they raise this?

A high percentage suggested they did not have additional communication needs (82%). 2 patients told us that they did and one specifically said although an appointment card is provided, she would prefer a text or letter confirming/reminding her.

Can individual patients request they get information in specific ways such as this? If so, how do you make patients aware they can do this?

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

Service provider response

With regard to getting an appointment-we always have at least one GP on call each day where appointments are only released on the day with availability or any urgent requirements. We also release other appointments later in the day, so we don't run out at the 8am rush.

We do have a lot of online availability where online bookings are slowly increasing. We promote this through newsletter and are going to utilise our care coordinators during flu/Covid clinics to promote the NHS app too.

Use of other services-our reception staff promote these services during the Care navigation process, particularly the community pharmacy first scheme.

Where patients struggle, especially around employment and Mental Health issues-we offer late night appointments on a Monday and all-day Saturday. If an appointment is urgent, we take this into consideration.

Makeup of the staff structure-the surgery maybe could provide more information and publicity about this-we can certainly work on this.

In an ideal world yes, I agree for continuity patients would see who they asked for however this is not always available and sometimes longer wait times would be required. All clinicians have access to patient records. We are also a training practice and the changeover for trainees is every 4-6 months however on the plus side this does give us additional capacity as a small practice.

Text messages are always sent as a reminder–this is dependent on whether a patient has updated their contact details with us.

It was useful to have an Enter & View visit as it gives us a better insight as to what is important to our patients. We will be promoting the NHS app through our care coordinators. We are also looking at reconfiguration of our first floor to increase clinical rooms. This is dependent on finances available. Difficult areas for the surgery and the staff are occasional abusive/ aggressive behaviour from patients that we as a practice will not tolerate. We will work through any areas & try to improve services where possible that the recommendations have raised.

Helen King (Practice Manager)

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

Monday 3rd July 10.00–12.30 noon
Great Lumley 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!

www.healthwatchcountydurham.co.uk

healthwatchcountydurham@pcp.uk.net

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 3.7.23 Great Lumley Surgery Enter & View.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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