

# **Enter and View Report:** Albion Health Centre

333 Whitechapel Road, London, El IBU

Healthwatch Tower Hamlets 10<sup>th</sup> May 2023



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# 1. Visit Background

Visit Details	
Service Visited	Albion Heath Centre
Address:	333 Whitechapel Rd, London El IBU
Service Manager:	Noor Sham
Date & Time of Visit:	10th May 2023 (10am - 12pm)
Status of Visit:	Announced
CQC Rating:	Overall Good
Date of CQC Report:	2017
Authorised Representatives:	Shreya Mandal, Matthew Adrien and Mari Tiitinen
Lead Authorised Representative:	Shreya Mandal

## **1.1 What is Healthwatch?**

Healthwatch Tower Hamlets is an independent organisation which relies on feedback from the local community regarding their experience using health and social care services across the borough. It is part of a nationwide network of local Healthwatch and a national body, Healthwatch England.

As the local Health and Social Care Champion, Healthwatch Tower Hamlets ensures that your voice is heard by the National Health Service (NHS) leaders and local authorities when decisions are made on how services will be delivered and further improved.

## 1.2 What is Enter and View?

One of Healthwatch Tower Hamlets' statutory functions is to carry out Enter and View visits to health and social care service providers in the borough.

The Health and Social Care Act 2012 allows local Healthwatch Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Enter and View visits can be arranged if people tell us there's a problem with a service but equally, they can also occur when services have a good reputation –

so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

During the visit, we observe service delivery and talk with service users, their families, and carers. We also interview management and staff regarding their views of the service provided. The aim is to get an impartial view of how the service is operated and being experienced.

Following the visits, our official 'Enter and View Report', will be shared with the service provider, local commissioners and regulators outlining what has worked well, and give recommendations on what could have worked better. All reports are available to view on our website.

## 1.3 Disclaimer

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

## **1.4 Acknowledgements**

Healthwatch Tower Hamlets would like to thank the service provider, service users and staff for their contribution and hospitality in enabling this Enter and View visit to take place. We would also like to thank the Authorised Representatives who assisted in conducting the visit.



# 2. About This Visit

## 2.1 Albion Health Centre

On 10th May 2023 we visited Albion Health Centre, a GP practice located on Whitechapel Road, within Primary Care Network 2. The practice is commissioned by the NHS North East London Integrated Care Board (QML) and has approximately 9754 registered patients.

We interviewed 4 staff members (Practice Manager, GP partner, Medical Secretary and Receptionist) but questionnaires were received anonymously from a further 2 staff members. This may not be the entirety of the staff that work at Albion Health Centre.

Based on the Albion Health Centre website, there is a total of 20 staff members. This includes doctors, practice nurses, a phlebotomist, healthcare assistants, a medical secretary, an administrator and receptionists, managed by a Practice Manager.

## 2.2 CQC Rating

The CQC are the independent regulator of health and adult social care in England. They make sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve.

Albion Health Centre was last inspected by CQC on 5th May 2017, for which they received a rating of 'Overall Good' across the following inspection criterion: Safe, Effective, Caring, Responsive and Well-led.

This rating was reviewed again most recently on 8th June 2023, concluding that there does not appear to be a need for a reassessment.

## 2.3 Online Feedback

The NHS review page contains a total of 15 reviews: four 5-star ratings and eleven 1-star ratings. The reviews span from 2021 to 2023.

## 2.4 Focus of the Visit

The rationale for conducting the Enter and View Visit to Albion Health Centre was based on patient experience data collected from various sources – NHS, Care Opinion, Provider Website and Social-Media. The main areas of concern were service access, treatment issues and staff attitudes.

Specifically, regarding Service Access: inaccessibility to appointments, lateness to scheduled appointments and poor experience of phone queries.



Staff attitudes had equally positive and negative sentiment, with many reports of a good experience when dealing with receptionists and doctors but also a few raising concerns around unprofessional receptionists.

Therefore, our questions for staff and patients were formulated in a way to address these concerns alongside the standard Enter & View observations.



# 3. Summary of Findings

During the visit, the team was able to engage with 4 staff members and 1 manager who were present on the day. Staff members who were not available on the day had filled out the questionnaires provided prior to the visit – including the in-person interviews, feedback was received from a total of 6 staff.

This report is based on their collective feedback, plus notes and observations made by our Authorised Representatives at the visit. Feedback received from patients who were present on the day of the visit and prior. Within the feedback received, key concerns seem to be based in appointments and accessibility to face-to-face appointments.

We would like to thank the staff and management for their time, and for their warm welcome and cooperation. We are also grateful for the patients who took their time to leave feedback on their experience of the service at the Albion Health Centre.

The Authorised Representatives were able to explore the premises independently and note down their general observations. There are a total of 7 categories of Area observation: Outside and Entrance, Environment, Safety, Information Displayed, Accessibility, Reception and Waiting Area and Staff.

## **Outside and entrance**

The Albion Health Centre is located on Whitechapel Road, which is a main road that is easily accessible via car, bus, tube and other modes of public transport. The area is very busy with pedestrians and traffic, and therefore can be noisy.

## First Impressions - What has worked well?

- There is visible external signage guiding patients to the entrance of the practice, which has a ramp and automatic doors available for use.
- The reception area is large and brightly lit with natural light, two reception desks are located behind plexiglass and there is also a self-check-in screen available.
- The practice is easily accessible by anyone walking in including wheelchair users, prams and pushchairs, or has mobility issues.

## What could be improved?

• The entryway was not particularly lit and noise from the traffic could be heard from the inside



## Environment

#### What has worked well?

- The staff were observed being friendly to the public, creating a pleasant atmosphere.
- There are some artworks displayed (see Figure 1), along with promotional leaflets for upcoming activities in the area. These are located in the corridor leading to the consultation rooms.
- The premises is large with 9 consultations and/or clinical rooms. Additionally, they also had a shower, stationary store, cleaner store, staff room with a small kitchen, the Practice Manager's room, toilet for staff, separate toilet for patients, disabled toilet, board room and an interview room.
- There was clear internal signage directing patients to the appropriate consultation rooms.

## What could be improved?

- The premises appeared to be in need of maintenance, which is reflected in the overall environment. The décor of the practice appeared quite dated, worn out, and unclean in places. For example, the carpet in the staff kitchen space appeared unclean, and we observed dust in places like the blinds of the window in the reception area.
- In regard to maintenance specifically, the following was observed: parts of corridor had exposed ceiling, showing wiring and other electrical components; there was clear signs of water damage caused by properties above; whilst public toilets are available, there is poor ventilation and serious safety concerns in the disabled/baby change toilet. We observed an area with exposed wood and nails sticking out inside the disabled/baby change toilet.
- The Authorised Representatives also noticed a smell within the public toilets, in particular a strong scent of bleach, highlighting the issue of poor ventilation available.
- Whilst the GP practice is quite tidy, some areas were observed to have some clutter, for example, the staff kitchen had a ladder and some boxes stored, and the board room was full of clutter.





Figure 1: Artwork located in the corridor leading to consultation rooms at Albion Health Centre.

## Safety

## What has worked well?

• We observed fire extinguishers placed in visible areas and a fire exit with clear signage.

## What could be improved?

- A Fire Emergency procedure was not observed to be on display.
- There was some clutter in the corridor, notably an empty plastic box, that could be a perceived trip hazard and obstruction in the case of an emergency.

## Information displayed

## What has worked well?

- Throughout the premises, we noticed a variety of posters displayed on the noticeboards, including mental health signage, maternity posters, breast screening and shingles vaccination (see Figure 2).
- There were also posters informing patients they can leave feedback or complaints (see Figure 3), certificates for Service Access, posters promoting



community-run activities such as art workshops, information about Enhanced Access Service (extended hours service) and photos of staff members.

 There was a digital board displaying the patient's name and the consultation room, which was clearly displayed in the waiting area above the reception desk.

## What could be improved?

- Whilst a PPG meeting sign was present, it was tucked away. Relocating the sign for greater visibility could help support patient awareness and participation.
- Similarly, there were posters placed around the practice informing patients how they can contact the practice to provide feedback or make a complaint, but it was not the official Complaints Procedure. We were informed that this is available online but it would be helpful for patients to have access to a displayed poster within the practice including the appropriate information.



Figure 2: Notice board containing posters such as Shingles vaccination and breast screening.



Figure 3: Patient feedback and complaints poster displayed throughout the premises.



## Accessibility

## What has worked well?

 The premises has accommodated for those who require walking frames, wheelchairs, pushchairs or use a pram by having corridors and toilets wide enough and having all the consultation rooms located on one floor. There are also buttons placed beside doors so that they can be opened automatically.

## What can be improved?

 It was unclear whether accessible parking spaces were already provided for those who have disabilities. Similarly, it was unclear if provisions had been put into place for people with visual impairments – such as Braille signage throughout the premises, including within the toilets provided, indicating where everything is located.

## **Reception and waiting area**

#### What has worked well?

• There are plenty of chairs available in the waiting area and they are spaced apart. A feedback box is available next to the reception desk and there is an air conditioning unit present in the waiting area.

#### What could be improved?

• Even with the presence of the air conditioning unit, the reception area was quite warm upon our arrival. There was not a TV or radio in the waiting area, and the leaflets were sparsely displayed, appearing uninviting to the public (see Figure 4).







Figure 4: Leaflets on display near the reception desk and patient waiting area.

## Staff

## What has worked well?

• The reception desk had a microphone and speaker system set up, accommodating for those who may have hearing impairments, and the staff were observed to be dealing with the public in a friendly and efficient manner.

## What could be improved?

• The staff attitudes towards us was welcoming and was not perceived to require improvements.



# 4. Interview with Management

During the visit on 10th May 2023, we had the opportunity to interview the practice manager. We asked a total of 20 questions divided into the following categories: Appointment Booking, Consultations, Engagement and Feedback, and Staffing. The answers have been summarised in this section.

## 4.1 Appointment Booking

The practice manager confirmed that the patients can choose between calling the GP practice, walking-in or completing an online form when booking appointments. Patients are initially directed to the online booking website via a text message. Most patients prefer to be seen face-to-face but if appointments are not available, they are offered appointments at the Extended Hub located in Spitalfields, this is the same as the Enhanced Access Service. The Extended Hub is open till 8pm on weekdays and 4pm on weekends. Those who work or look after school-aged children are also directed to the Extended Hub.

Regarding any special provisions in place for people known to have difficulties, such as those with disabilities, the digitally excluded and foreign language speakers; the practice manager mentioned that they had discussed with the PPG on how to help digitally excluded people and it is understood that telephone access is hard. They are advised to come to the practice and book an appointment in person. The practice has a language line, advocacy service and British Sign Language (BSL) available for those with impaired hearing available. A separate room is provided for those with autism whilst they wait to be seen, as busy waiting rooms can be overstimulating at times. Staff have had training via the Community Education Provider Network (CEPN), which was organised by the GP Group.

The Practice Manager felt that the E-Consultation system worked best when it came to booking appointments – with staff aiming to respond to queries within 48 hours. It was mentioned that it was initially open 24/7 but hours had to be reduced to 9am – 11am from Monday to Friday as demand was far too great and had a toll on the staff members.

To improve the facilities for patients, the Practice Manager insisted more clinicians were required as there had been a shortage of GPs. Patients often refuse to see Physician Associates due to the false perception that they may not



be qualified to deal with specific medical conditions and wish to see a GP instead.

## 4.2 Consultations

As a GP practice, the main challenge in meeting NHS England's guidelines on providing face-to-face appointments where required, is the shortage of GPs, as stated by the practice manager. The practice currently has a team of 4 working clinicians – a physician associate, an advanced nurse, physiotherapist, and a GP partner. Allocating appointments for those with a language barrier can take even longer in case of in-person appointments, as interpreters need to be assigned.

On the topic of remote appointments, such as phone call consultations, the practice manager stated that appointments are rarely late. Patients are allocated a 20-minute time slot and if the GP is running late, reception staff inform the patient and let them know if the appointment needs to be rescheduled.

## 4.3 Engagement and Feedback

Patients are encouraged to leave feedback such as compliments and concerns via posters and prompts on the website. The Albion Health Centre receives approximately 70 to 80 emails per day, which the senior receptionist is tasked with sorting.

## 4.4 Staffing

The Practice Manager received an induction himself 14 years ago. The current staff members have a training period of 2 weeks, during which they complete approximately 80 E-Learning modules on the Blue Stream platform. This includes modules on safeguarding, mental health and chaperoning. New staff members are also advised to complete GP training provided by the GP Group. All staff members also have mandatory annual appraisals.

In relation to any training received recently, the practice manager mentioned attending a complaints training provided by the CQC last year. Furthermore, he was aware of the Accessible Information Standard (AIS) as a way to accommodate everyone.

Staff members are supported by given flexible working hours when looking after school-going children. This allows them to work around school drop-off and pick-up times. During COVID-19, staff members were still paid if they were unwell for long periods of time.

The practice manager felt strongly about the need for new premises in order to improve his work and working conditions. Based on his observations, the premises was in a dire state and in urgent need of repair. As it is located in the



middle of Whitechapel, the practice gets quite busy with many walk-in patients expecting to be seen on the same day. The high volume of patients visiting puts reception staff under pressure and often younger members of the team find it difficult to cope. As a result, the premises regularly loses reception staff every 3 months. Furthermore, diversity in the reception team is difficult to implement due to the nature of the location. Whitechapel has a predominantly Bengali community, meaning reception staff should ideally be able to speak the language.

In addition to the aforementioned difficulties, the practice manager stated that people call unnecessarily at 8am, which applies further pressure on the reception staff when there are alternative methods for getting appointments such as the E-consultation system.

When enquired about the positives, the Practice Manager stated his colleagues are likeable and support each other well. They are like a second family to him as he has been working at the practice for 14 years. He also mentioned the location of the premises is well-connected with various transportation options nearby.

# **5. Interview with Staff**

During the visit on 10th May 2023, we also had the opportunity to interview staff members – the GP Partner, Medical Secretary and Receptionist. We asked a total of 20 questions divided into the following categories: Appointment Booking, Consultations, Engagement and Feedback, and Staffing.

## 5.1 Appointment Booking

## 5.1.1 On the booking appointments, do patients get a choice of method (for example can they phone, walk-in or complete an online form)?

Yes, there is an option in place. Patients can be booked in via 111 if it's an emergency. Preference is accounted for. Most people want a face-to-face appointment.

Mainly e-consult, but majority of patients are elderly, Bengali who cannot use it, so we try to help or ask them to get help from family members. It is just easier to get an appointment.

Yes. All options are available. If it's an urgent situation, patients can call in at 8am, E-consults, book via the NHS App (where they can also order prescriptions). They can also come in at 8am.

# 5.1.2 Is there any special provision in place for people known to have difficulties (such as disabled people, those without computers/phones, or foreign language speakers)?

Those with disabilities usually request to see specific doctors due to familiarity. Digital access can always be a problem, so telephone is an option, along with being able to come in and book. About 65% Bengali, interpreters are available on call.

Yes – Those with autism have it noted on the system so the staff try to ensure they are either seen first or last. This is because they often prefer there to be fewer people present in the waiting area. The doctors are informed so that those patients can seen quicker. There are also hearing options available for those with hearing difficulties. Often Google Translate is used to overcome language barriers, along with colleagues with diverse background who help out and the language line.



## 5.1.3 What do you feel works well about the booking system?

Flexibility. Different options of booking and consultation available to patients – there is no need to take time off. Remote access is very good. There are some patients who are purposely resisting face-to-face appointments now and opting for telephone appointments.

E-consult. Doctors triage in the morning and can direct the patient to the right person. It is not always necessary to see a GP.

## 5.1.4 What do you feel could be improved?

Conversion to online is not easy but is helpful. More doctors are needed along with more administration staff. Better telephone system and wanting to get more pharmacists onboard.

Demand is high, calls waiting first thing in the morning, we try to push e-consult, elderly and children are priorities, and most of the time people are understanding. We try to cater to patients' needs.

We are short staffed, so there is only so much we can do, the location of the practice means people can just drop-in and expect to be seen.

## 5.2 Consultations

## 5.2.1 NHS England's guidelines urge practices to provide face-to-face appointments where required, or desired. What do you think are the main challenges you face – as a practice – around this?

Agreed with guidelines. Problem is with recruitment and retention of GPs and nurses. They are being worked to the point at which it's difficult to be safe medically. The BMA expects GPs to see 25 patients per day, which they're getting close to. This is leading quickly to work burnout and early retirement due to unsustainable workload.

Our doctors prefer face to face, and we always offer face to face appointments, but we have a shortage of GPs. One of the GPs works from home at least once a week.

## 5.2.2 Are patients asked if they have any preferences about the consultation method (such as in person, telephone, or video)?

They're not specifically asked, given appointment based on availability and changed according to requirements.

Always asked, many prefer telephone as it means they don't have to take time off of work.



## 5.2.3 If preferences are expressed, is this taken into consideration?

#### Yes

## 5.2.4 Again, is there any special provision in place for people known to have difficulties?

We can message people, put notes in their records of any special requirements, older receptionists know patients and can inform locum doctors who may not be aware of patient's special requirements.

There is a language line available, along with BSL interpretation. In the case language line is not available, native speaker staff members help translate.

. Staff are aware of irate patients coming so there is discretion in place.

5.2.5 Is there also any flexibility for people who work, or look after schoolaged-children (either when booking or attending appointments)?

Hub appointments at Spitafields, which is open during the weekend at evening times. They have a variety of medical professionals available at site, so patients are able to get seen by appropriate professionals post-work.

After school appointments are available for them or early morning appointments if preferred. Appointments are fitted in according to demands.

## 5.2.6 Do you know if remote appointments are generally on time, and is there any procedure if running late?

Remote appointments are never on time as 30% don't pick up the first call which leads to a delay. Therefore, a range is provided for the time slot. They are usually called between 10am – 1pm. Late patients lead to delays, along with interpreters. They try to spend approximately 10 minutes per appointment.

If GPs are running late, patients are sent a text or a direct phone call to reschedule. They try calling 3 times before attempting to reschedule.

## 5.2.7 What do you feel works well about the consultation system?

E-consult used to be open 24/7 and we would receive multiple consultations per patient, then when we call them, they would not pick up. The good thing about e-consult is that patients can send photos.



Face to face is the best way, it is good for complex issues, telephone consultations take a long time. Remote is good for admin issues (sick notes etc.).

I think it works well but patients always want more slots, we keep empty appointments just in case, doctors also have to speak with other health professionals regarding patients and this can eat up appointment time.

So far E-consults are great – the forms come in, patients are booked in and the doctors see them. Face-to-face works well as patients are able to pick up their medication on the same day and they get what they came for. They are both effective.

## 5.3 Engagement and Feedback

## 5.3.1 Are patients encouraged to give feedback (such as compliments or concerns)? If so, how?

Compliments are very few and far in between, a rare occasion. It's very easy for patients to express their concerns and it is taken seriously, with the practice following the protocol strictly. Acknowledge within 24 hours. Patients are able to complain via phone, letter, email and verbally. I work actively to not get complaints, body language is especially important and encourages to apologize.

Typically, patients tend to send us gifts during Christmas and Ramadan, with the Bengali community it is typically food, I tell them to give it to the receptionists. They deal with the worst of it, and it is difficult to retain receptionists. Young people can't take it.

I have sometimes answered the phone and realised how angry people can be. They typically change their manner by the time doctors speak to them, so receptionists face the worst. I've sometimes asked patients to apologies to the receptionists if they have behaved badly, and they have done so.

Always, there is a box at the front available. There is also an online complaints process on the website and the practice email. But the staff try their best to resolve the issue in person if possible.

## 5.3.2 Is there a clear complaints process in place? Is the complaints policy on display in the waiting area?

24 hours to acknowledge and respond or at least informed when they can expect a response. Peer approach to complaints, colleagues checks complaints for each other. The complaints are not on the patient record. There are posters in the waiting room and online, patients can send an email which is then discussed as a practice. Complaint and response is put into writing but it isn't put into the patient records, instead into a specific complaints folder.

## 5.4 Staffing

## 5.4.1 Do you recall having received an induction?

Everybody receives a 2-week long induction.

Receptionists: shadow 3-4 weeks (depending on experience), they complete mandatory training.

Doctors and nurses: depends on the level of experience, they will sit with each of the other doctors.

We have a policy file, and intranet that contains all protocols, these are reviewed annually.

# 5.4.2 Have you received any training, including recently? For supporting patients with visual impairments, hearing impairments and/or learning disabilities.

Manage own training – as a GP. 2 weeks ago, one tomorrow. Practice manager reminds them of mandatory training. Nurses are self-motivated. Network meetings are also a form of training. Unfortunately not enough time to attend locality meetings.

E-learning every 2 years to update knowledge on medical terminology. Recently attended Cancer Safety Toolkit talk and Blue stream every few years.

Disability training, how to deal with people with learning disabilities, it showed different ways of dealing with them. With deaf people, you tap them on the shoulder.

## 5.4.3 Are you aware of the Accessible Information Standard (AIS)? How would a patient with specific needs be identified and accommodated for?

There are notes on patient records, people with hearing impairments are not called, people with visual impairments, we know they cannot see the noticeboard, so we go to the waiting area to get them and tap them in the shoulder. We have a hearing loop at reception, and with autistic patients, we take them in a separate room where doctors can see them, we also place people with infectious diseases in isolation as soon as they come in.

## 5.4.4 Do you feel that management are supportive towards staff generally?

Yes, we do try. There is one GP Partner involved with the reception, another with nurses, and another GP partner with community, the Practice Manager is good at supporting everyone.

Good networking with the primary care network managers.

Yes, management is very proactive with the training opportunities. Very involved. It's been hard for management with training new staff members who are prone to leaving due to work pressures.

## 5.4.5 Regarding your work and working conditions, do you feel that anything could be improved?

25-30% less work. I recently had my first holiday in 6 months.

It comes back to retention, everyone is locum, because they want to see what place suits them the best.

Recently had chairs changed, it's an old building, but security and alarms are working, the functionality is good.

## 5.4.6 Can you tell me what you enjoy most about your job?

Working with people, problem solving, because we have the general knowledge, we can direct people to the right place.

Tower Hamlets is more stable than other areas. If I have to leave TH, I will leave general practice.

There is a great rapport with other local health care professionals.

Enjoy the referral letters, helping to redirect patients and coming across appreciative patients.

Helping people, I used to work in housing, but with Covid and people going through health issues, I find this is the best way to help people and give back to the community. That's my motivation



## 5.4.7 And what do you find most difficult?

Volume of work. The absolute lack of time, and lack of help from the Department of health, lack of respect from the top (PM and the rest of the government).

Hospital waiting times are so long, patients call us up if they haven't received their appointment time. When they are referred by doctors, they might be told that they will be seen in a few weeks time, but the hospital consultant might decide it's fine to book the appointment in a few months time instead. People get worried that their condition is going to get worse.

Meeting patients' demands, there are all these things in place (111 service), but it is still hard to meet the demand.



## 6. Interview with Patients

Finally we were able to interview and collect completed questionnaires from 17 patients during our visit to Albion Health Centre on 10th May 2023.

We asked a total of 12 questions divided into the following categories: Appointment Booking, Registration, Consultations, and Engagement, Feedback and Experience.

The answers have been summarised in this section.

## Telephone Call Follow Up Appointment In Person 19% 44% Booked By Staff Online 25%

How did you make the appointment today?

## 6.1 Appointment Booking

6.1.1

Based on the feedback collected, majority of the patients (44%) had booked their appointments by calling in via telephone themselves or having a relative call into Albion Health Centre for them. 25% of patients were allocated their appointment during a previous appointment, as a follow-up for their health concerns. Some patients had staff members at Albion Health Centre arrange the appointment for them based on any test results and such (6%). Notably, a low number of patients visiting the premises for in-person appointments had booked it online (6%). The questionnaires were only available to collect and complete if a patient was visiting the premises, which leaves out patients who had phone consultations.

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## 6.1.2 Were you able to make the appointment easily?

Most patients (65%) had a positive experience of booking the appointment they were attending. A small number of patients had left the question blank or answered incorrectly, stating the method of booking instead, hence listed as "Non-Answer".

# 6.1.3 Were you happy with the length of the wait between trying to make the appointment and seeing the GP? Yes Non-Answer No

53%

The majority of patients were happy with the length of wait between attempting to schedule the appointment and actually seeing the GP (53%). Some patients claimed they were "lucky" as there was not a long wait on the day of the Enter

29%

and View Visit but the general consensus was that the service was "quick" which they were content with.



There was a near even split between patient feedback on whether they were offered an appointment with their usual doctor, with most claiming they had different doctors each time or whoever was available (41%). One patient claimed that they were able to see their usual doctor when calling in to book an appointment, but they opted for any available doctor when it came to booking via the E-consultation system.



## 6.2 Registration

## 6.2.1 Do you remember the registration process when you joined the surgery?



Approximately similar number of patients either remembered the registration process (35%), could not recall it any longer (35%) or had left the question blank (30%). A patient described the process being convenient, whilst others mentioned an online registration process.

## **6.3 Consultation**



70% of patients who completed the questionnaire had the experience of a online or phone consultation with a clinician at Albion Health Centre. Some patients elaborated and stated that they preferred phone consultations but some expressed their preference of face-to-face appointments.



## 6.3.2 If so, how have the online/phone consultations been in terms of quality, duration and scheduling?



Patients with positive sentiment towards online or phone consultations (47%) explained that the "booking process was easy", "the doctor listened" and it is usually used to discuss blood test results.

Notably, one patient claimed that they had a good experience with their usual GP but have had negative experience with other clinicians at the practice. They stated that there were some complications regarding medication prescribed by a different doctor, which resulted in a negative impact on their health.

Patients with negative sentiments towards online or phone consultations claimed that appointments were "short" and "not as helpful as face-to-face appointments."

The sentiment of the patient feedback was determined based on the overall theme of each comment, a generally positive comment was labelled to have a positive sentiment. The same method was applied to negative sentiment.



## 6.3.3 Have the scheduled appointments (online/virtual/phone/in person) been on time?



Whilst 40% of patients stated their scheduled appointment were not on time, a few elaborated that appointments were "a bit later than expected" or delays occur sometimes when the practice is busy.

## 6.3.4 Are you happy with the quality of your treatment?



A vast majority of patients (76%) were very happy with their experience of treatment at the Albion Health Centre, claiming that the "doctors are very good" but sometimes "hard to get appointments". A few patients highlighted that there was room for improvement in the quality of their treatment.



## 6.4 Engagement, Feedback and Experience

## 6.4.1 Are you aware of the feedback procedures available at the surgery?



Many of the patients (41%) taking part in the questionnaire chose to leave this question blank but 30% of those who responded agreed that they were aware of the feedback procedures available at Albion Health Centre. One patient explained that any issues they had were resolved very quickly and they had no complaints.

## 6.4.2 Are you aware of the complaints process in place? Have you noticed the complaints policy display in the waiting area?



When asked about the complaints process specifically, 47% of patients were aware of it due to being informed by the reception staff. Some had noticed leaflets directing them towards the website to leave feedback.







The general experience of dealing with the staff members at Albion Health Centre was positive (47%). Some patients explained that staff members are helpful and often speak to patients in their first language where appropriate. 19% of patients had a relatively negative experience, stating that their experience depended on the staff member and that "receptionists could be more organised".



# 7. Conclusion

Overall, our visit to Albion Health Centre was neutral, with many positive aspects but equally room for improvement across various aspects. Below, we have highlighted the positive aspects of the GP practice along with the negative aspects. We have included recommendation for improvement.

## 7.1 Good Practice

## **General Observations:**

- The Albion Health Centre is extremely accessible, both in its location and provisions in place for those with mobility issues, wheelchair, pram, and pushchair users. The entrance for the practice is located on the main road, with clear external signage and is easily accessible via public transport – underground tube, overground and various buses to name a few. There is a ramp leading into the practice, with buttons in place to open the automatic doors and corridors are wide-enough to accommodate for those in wheelchairs and such.
- The reception area is moderate in size and is brightly lit with natural light. There is a self-check in screen available for patients to utilise, along with a large digital board displaying patient names and their respective consultation room number. The receptionists have a microphone and speaker system available for use for those who may have hearing difficulties. The reception staff also appear to be welcoming and friendly with the public, providing an efficient service. This elevated the atmosphere of the waiting room.
- There were also a variety of things on display on walls and noticeboards artwork and informative posters for upcoming workshops, educational purposes and patient feedback related. Some noticeboards appear to be regularly updated with new posters. A feedback box was also observed in the waiting area, encouraging patients to leave their thoughts.
- The Enter and View Authorised Representatives also observed Fire Extinguishers and Fire Exits with clear signage throughout the premises.

## Interviews:

- It was highlighted that patients have some flexibility when booking appointments, whether they wish to have a phone consultation or a face-toface appointment. In the case of no availability, they are directed to the Extended Hub, also known as the Enhanced Access Service. There are also provisions in place for those who work or look after school-aged children.
- There are also provisions in place for those who are digitally excluded, foreign language speakers or those with hearing impairments. Albion Health Centre has a language line, advocacy service and British Sign Language service



available. There is also a E-Consultation system available, attempting to make it easier for those who work to book and attend appointments.

- Staff members are well-trained and have a thorough induction process that consists of 2-week long E-Learning modules and up to 6-weeks of shadowing. They also feel as though they are well supported by the management, emphasising that working hours can be flexible to accommodate for a staff member's availability.
- Majority of the patient feedback claimed they were able to make appointments easily and were significantly content with the quality of their treatment at Albion Health Centre. Many also had a positive sentiment towards the staff at the premises. The overall theme of the patient feedback was "okay".

## 7.2 Recommendations

## **E-Consultation – high priority**

It was revealed that the E-Consultation system at Albion Health Centre could only be accessed 9am – 11am on weekdays. There is a strong concern that this may be inaccessible to some members of the community, possibly due to work or tending to school-aged children.

The Practice Manager felt that the E-Consultation system worked best when it came to booking appointments – with staff aiming to respond to queries within 48 hours. It was mentioned that it was initially open 24/7 but hours had to be reduced to 9am – 11am from Monday to Friday as demand was far too great and had a toll on the staff members.

• We recommend Albion Health Centre to reconsider the limited hours for the E-Consultation system so that patients have more flexibility as to when they can access the system. Having a short window is not unheard of as it understandably alleviates pressure from staff, however a 2-hour window is far too short. Extending the accessible hours for the E-consultation system to at least 4-hours, overlapping the general lunch time period, is advised.

## Practice response:

On average we receive 150 e-consultations each week. Increasing the econsultation window to the suggested 4 hours, causes concern, as we are already at maximum capacity with the existing 2-hour window. We believe an increase in hours, will result in decreased quality on care, or inability to deliver care within a suitable timeframe which is a serious clinical governance concern. We recognise the importance of having flexibility with the consultation system, therefore are currently discussing with the PCN to extend our enhanced access clinic, instead of 4pm-8pm, 5 days a week, we are proposing 2pm-8pm, 5 days a week starting from November 2023, which will increase the capacity for the practice.



## Environment

As per the observations made by the Authorised Representatives, the premises is in a clear state of disrepair and lacks maintenance, which negatively impacts the general environment of the GP practice.

Ceiling is exposed, showing wiring and electrical components.

Clear signs of damage caused by leakage from residents living above.

Public toilet available but has no ventilation and has a strong smell of bleach.

Disabled/baby change toilet available but concerning exposed wood with nails sticking out.

The décor of the practice appearing quite dated, worn out, and unclean in places, for example, the carpet in the staff kitchen appeared unclean, and we observed dust in places like the blinds in the window of the reception area.

We also noticed a smell although we were not quite sure what it was, but it could be a sign that the ventilation is not necessarily working.

- To address the above concerns, regular building maintenance of both cleanliness and functionality is strongly recommended. Exposed wood with nails sticking out poses a serious safety concern and should be addressed at the earliest opportunity.
- Also consider fitting a ventilating system, such as a fan, for the public toilet to avoid any strong lingering smells.
- In regard to damages caused by leakage, examine the cause of the issue and attempt to resolve it with the relevant authorities.
- To elevate the dated appearance of the décor, the addition of plants, brighter lighting and vibrant ornaments may help.

## Practice Response:

• Exposed wood with nails sticking out poses a serious safety concern and should be addressed at the earliest opportunity.

We are arranging to fix this as soon as possible.

• Also consider fitting a ventilating system, such as a fan, for the public toilet to avoid any strong lingering smells.

Areas where ventilation is potentially possible are listed, therefore we are unable to make structural changes.



• In regard to damages caused by leakage, examine the cause of the issue and attempt to resolve it with the relevant authorities.

This has been addressed to our landlord. They are negotiating with the Estate Agent who manages the flats upstairs.

• To elevate the dated appearance of the décor, the addition of plants, brighter lighting and vibrant ornaments may help.

With regards to brighter lighting, we are planning to remove all the blinds to make sure there is enough sunlight entering the building. However, regarding décor, such as the addition of plants, we believe this poses a risk to staff and the public in instances such as violent/complicated patients, as well as children. Also, due to the practice being located in a busy area, and there being high foot traffic, this may cause trip hazards.

## Staffing

Concerns regarding the insufficient support provided by the NHS England, Department of Health and other relevant government figures were raised. This was in particular to the volume of work designated to healthcare professionals, which has made it difficult to be safe medically and has negatively impacted recruitment and retention of aforementioned professionals.

Problem is with recruitment and retention of GPs and nurses. They are being worked to the point at which it's difficult to be safe medically. The BMA expects GPs to see 25 patients per day, which they're getting close to. This is leading quickly to work burnout and early retirement due to unsustainable workload.

Volume of work. Lack of time to even forward think. The higher ups/NHS don't understand the difficulties place upon healthcare professionals, there's a lack of respect for medical professionals.

 We recommend that Albion Health Centre formally advise NHS England and the Department of Health of their concerns around recruitment and retention, although we recognise that staffing issues within the health sector is currently a national issue.

## Practice Response:

We have recently recruited a salaried GP, a Practice Nurse and two receptionists to manage the workload.



## Information Displayed

There was a lack of posters informing patients regarding the complete Complaints Procedure, as observed. Furthermore, posters for the Fire Emergency procedure were also not observed during the Visit.

We did not observe a complaints procedure on display. There were posters placed around the practice informing patients how they can contact the practice to provide feedback or make a complaint, but it was not the official complaints procedure. We were told that this is available online.

We observed two fire extinguishers and a fire exit with clear signage. We did not observe a Fire Emergency procedure on display.

- Whilst the staff members are more than happy to inform patients that they can access the Complaints Procedure online, patients may want to be informed in a more covert manner. Having a dedicated Complaints Procedure poster displayed on noticeboards throughout the premises would make the information more accessible to patients, especially those who are digitally excluded.
- A Fire Emergency procedure, with the evacuation site stated clearly, should also be displayed throughout the premises if it is not already.

## Practice Response:

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Actioned. We made sure enough posters are displayed.

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Actioned. We made sure enough posters are displayed.



## **Reception and Waiting Area**

There was a limited number of leaflets available for patients to access, and the few that were available were poorly displayed. This adds an uninviting element to the waiting area.

We found that the number of information leaflets on health conditions and services was quite limited. There was a display unit for leaflets about different conditions such as Gestational diabetes, Insulin, Eyes, looking after feet etc. in the reception but this was mainly empty.

- Consider adding more leaflets available for the patients to access and filling up the empty spaces in the leaflet display unit.
- In addition, displaying a few plants around the waiting room could also create an inviting atmosphere within the waiting room.

## Practice Response:

• Consider adding more leaflets available for the patients to access and filling up the empty spaces in the leaflet display unit.

We are working on it.

• In addition, displaying a few plants around the waiting room could also create an inviting atmosphere within the waiting room.

We have concerns about plants, as some people have allergies (to pollen) and plants can also be harmful for new born babies. We ran a baby clinic session once a week, so the waiting room is full of babies and young children.



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