



Enter & View

Newport Pagnell Medical Centre
Published March 2025

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2 Introduction

2.1 Details of visit

Service provider	Newport Pagnell Medical Centre -Newport Pagnell MK16 8QT
Date and time	3 rd December 2024 -9.30am to 5.00pm
Authorised representatives	Helen Browse, Gill Needham

2.2 Acknowledgements

Healthwatch Milton Keynes would like to thank the Newport Pagnell Medical Centre, staff, service users and their families for their contribution to this Enter and View visit, notably for their helpfulness, hospitality, and courtesy.

2.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. 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.

3 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act 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 happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first-hand.

Healthwatch Enter and Views 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.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the CQC where they are protected by legislation if they raise a concern.

3.1 Purpose of visit

The purpose of this Enter and View programme was to engage with patients, their relatives, or carers, to explore their overall experience being a patient of the Newport Pagnell Medical Centre.

3.2 Strategic drivers

How people in Milton Keynes experience Primary care services is a priority area for Healthwatch Milton Keynes. Healthwatch Milton Keynes receives between 1,000 and 1,500 contacts from people each year to share their experiences of health and social care. The majority of these accounts relate to experiences of accessing GP Practices.

NHS England is driving local Integrated Care Systems to transform the ways people interact with Primary Care services. This transformation is happening at a fast pace with residents:

- Q Being expected to use more digital technology to access GP appointments
- Q Receiving more personalised care delivered in their neighbourhood by more connected teams of professionals
- Q Encouraged to self-care and make better use of their local pharmacy
- Q Having their health needs assessed and addressed by a range of different professionals, rather than the traditional model of 'straight to GP'

The purpose of this programme of visits is to understand the patient view on service provision from their GP practice or Health Centre, from the way in which patients can contact practices, book appointments, the range of services that are available at their practice, to the perceived accessibility of those services.

3.3 Methodology

This visit was prearranged in respect of timing and an overview explanation of purpose was also provided to the Practice Manager.

The Authorised Representatives (ARs) arrived at 9.30am and actively engaged with patients between 9:30am and 5:00pm.

The ARs used a semi-structured conversation approach in meeting patients on a one-to-one basis, in the waiting areas. Additionally, the ARs spent time observing routine activity. The ARs recorded the conversations and observations via hand-written notes.

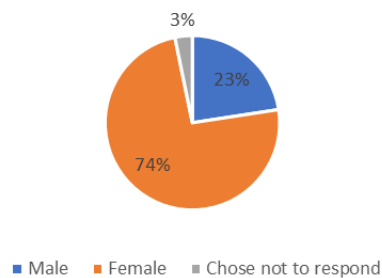
Patients were approached and asked if they would be willing to discuss their experiences. It was made clear that they could withdraw from the conversation at any time.

A total of **31 patients** took part in these conversations.

In respect of patient demographics: -

Gender:

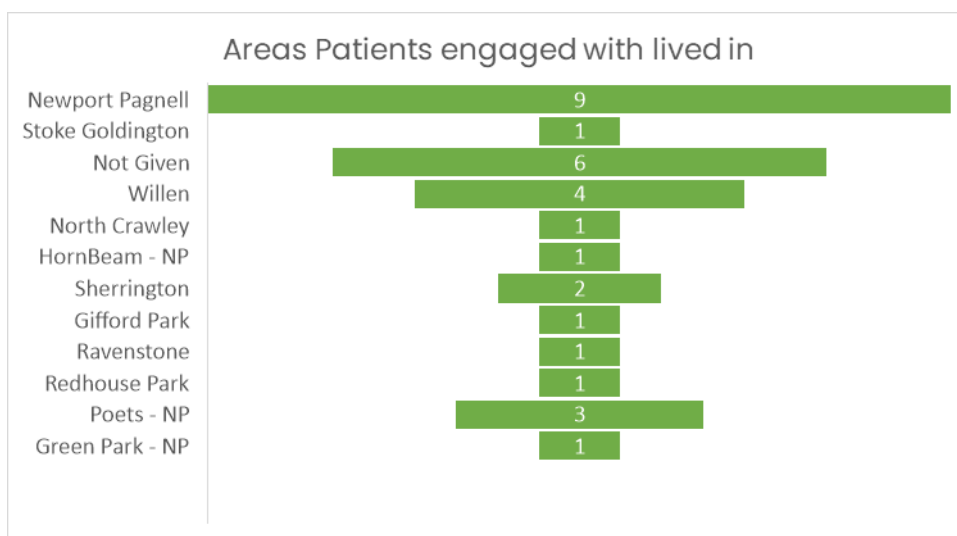
Male = 7, Female = 23,
chose not to respond = 1.



The age range of patients spoken to was:

Twelve were under 25, seven were aged between 25 – 65, twelve were aged over 66, and five people preferred not to say.

Housing Estates/Areas covered by Practice = 12



Length of time registered with the practice:

Seven people had been registered with Newport Pagnell Medical Centre between 1- 3 years, ten people had been with the practice between 3-19 years, with fourteen patients have been registered here for over 20 years.

At the end of the visit, reception was notified, the visitors book was completed and signed, and staff were given highlights of the visit.

4 Summary of findings

4.1 Overview

Newport Pagnell Medical Centre registers patients from a wide area of Milton Keynes, we spoke to people from 12 different Estates on the day we visited. The Practice operates 2 branch practices, Willen and Kingfisher, with patients being offered appointments across all three sites.

On the day of our visit there were three doctors, four Nurses of different specialties, a Midwife, two urgent care clinicians, one pharmacist, one First Contact Practitioner and two specialist urinary nurses on duty throughout the day. There were additional clinical staff located at the other branch practices.

This practice has a high patient footfall and on a grey dull day, it was bright, clean, and well presented.

4.2 Premises

The Medical Centre is in the centre of Newport Pagnell just off the high street, with ample free parking at the front and rear of the building. The entry is on a single level providing easy access for those that require it with automatic doors to aid entry. There is a clear pathway to the auto-login screen and main reception desk. The ground floor reception area has floor to ceiling windows on three sides which makes the area light and airy. It is clear where to sit and wait and where to log into the Auto check-in screen. The ground floor has the repeat prescription area, a seating area with a Blood Pressure monitor and scales with full instructions on their use. Treatment rooms on the ground floor are available for blood tests, midwife appointments, and physiotherapy. There lift access to the first floor in addition to the stairs.

The reception area is directly in front of the main doors, with a high volume of patients arriving at the main reception desk throughout the day. These patients were seeking to request appointments, make medication requests, ask for information, as well as those choosing to book in or check the location of their appointments rather than use the automated option. We observed that there are no privacy screens which means that conversations can be overheard by people seated in the waiting area.

There are clean, well-signed, and well-maintained toilets available in the reception area.

The main waiting areas are on the first floor where there are two larger waiting areas with TV monitor screens calling patients to their appointments. The waiting area directly above reception also has good

daylight and ample seating. It has an unmanned reception desk but does have a large screen calling patients to appointments.

The main waiting area on the first floor has no natural daylight, is smaller and the lighting is quite subdued with less space between chairs. This was the busiest area on the day of our visit. The first floor also houses the admin office and staff room.

Access to Appointments

Patients told us they were a little confused about the online system. They said it was opened at 8am and is closed by 11am, reopening at 1pm for appointment bookings. Patients told us they didn't find this helpful, particularly as there was no clear reason or messaging given for this pause in system availability. People said they would prefer to know availability early rather than having to keep trying all day for appointment releases.

Many people told us they called the practice at 8am, when the phone lines were opened. They said that the wait time for a call to be answered can be up to 45 minutes with some people commenting that they had waited more than an hour. The most common complaint was that they are often 30-40 in the queue regardless of the time they call. There is no visibility of the number of staff managing calls, so patients have a perception that there are too few staff managing this.

Some Comments from Patients:

"I never phone, I know I won't get through but – it would be so much better to speak to someone about things which are difficult online"

"The online system could be clearer and easier to use"

"why can't they give us some lessons on the online stuff – I really don't understand it"

"I go over to Willen and queue up at 8am if I need an urgent appointment, you can never get through on the phones"

"I always get an appointment straight away for my children, but I wait for up to two weeks if I need anything"

Many patients now choose to come to the practice to make appointments, in part this is because they know where the appointment will be, as the text confirmation they receive is not clear about this. This was evidenced by the number of people observed, during our visit, being told their appointment was booked at a different branch. We noted that reception staff were very helpful in resolving the confusion although sometimes this was by rearranging appointments. People also told us that they were unable to get through on the phones to clarify the appointment location.

When patients were asked if they minded being asked a few triage questions by reception staff a few people said they wouldn't care, they just wanted an appointment, but the majority felt that it was not appropriate for reception staff to be doing a clinical triage as conversations could be overheard by everyone in the reception area.

We were told that. No matter which booking option was used, an child's appointment was always made on that day. When we asked about adult appointments, responses varied from 'pretty good' to having to 'wait up to two weeks for an appointment'.

Patients who were attending follow up appointments were pleased that ongoing appointments were booked by the Nurses during their appointment, and they received confirmation texts as a reminder which they are very happy with.

When asked about repeat Medications:

Medication requests can be made online, but many patients were coming into the practice to request medications or put a paper request into the box in reception. Those that preferred to use the online system said the only problem was that the system was not always working. There was a variety of delivery methods used from picking up at local chemists to home delivery and postal services.

We asked patients how they would go about **cancelling an appointment** if they needed to. Most people responded that, other than follow up appointments booked by their GP or regular nurse appointments, there were 'really only 'on the day' appointments available' and that people wouldn't need to cancel an appointment for the same day.

4.3 Staff interaction and quality of care

Reception staff were observed to be helpful, informative, and gave time to patients who had queries. All conversations held at reception could be overheard within the waiting area as there is no privacy screening at the reception desk.

There were usually two members of the reception team at the desk throughout the day, they were busy all day with patients attending in person. While this this team does not take incoming telephone calls they do process prescriptions as part of their administrative duties.

When asked if Staff were helpful, kind, and respectful, patients told us:

"Very, nothing but praise for them all. Brilliant – a Gold Star from me"

"All the Nurses are brilliant – shame there is no consistence of care with the doctors"

"Front of house and Nurses are great, kind and supportive – some of the clinical staff can be a bit dismissive"

"In general, good. Nurses are great"

"Just a shame you never get to see the same person twice"

When asked people whether they felt they had enough time in their appointments, almost everyone spoken to said they had never felt rushed. We were told that people felt listened to and were, generally, very happy with the service they received when they got to see a Health Professional.

The only frustration for the patients we spoke to during our visit was the booking system, although several people expressed surprise to learn that longer appointments were an option for some types of appointment or for patients who had additional needs such as interpreters.

Staff are well liked at Newport Pagnell MC. However, the people who are unwell, already frustrated and not at their best, report that the systems are the issue and expect less barriers to getting the support they need.

5 Recommendations

Our visit to Newport Pagnell Medical Centre was, overall, was a positive one. We have drawn a small number of recommendations though observations and patient feedback:

- Q Evaluate the benefit of increasing the staffing of phone lines and any other operating triage systems at 'peak times. Consider giving more information to patients around how you manage demand; making people aware of the number of administrative staff that work on answering calls at peak times will help patients understand the pressures that staff face during these busy times.
- Q Consider an exercise to evaluate barriers for patients using online systems which could highlight opportunities to build trust in online access systems and support patients to use them, freeing up telephone lines for patients who are digitally excluded.
- Q Consider tasking the Patient Participation Group (PPG) or an Admin Team member to offer 'Tech Support/ training' sessions for the new ACCURX system, possibly in the waiting room on a regular but short-term basis. This would enable more of the patient base to get up and running with the system, answering their questions would go a long way towards increasing their understanding of the 'how and why' of the new system.
- Q The online booking system closes down at 11am then reopens at 1pm, this is confusing for many. Improved messaging would be helpful and may reduce the number of patients who come to reception. This could be another task the PPG could support with.
- Q Telephone Triage: patients are not clear why they are being asked medical questions by non-clinical staff. It was seen as intrusive and unnecessary as, on a first come first serve basis, people are booked a telephone call with a GP who then carries out a triage to see whether an appointment will be made. Education for patients around the reason for this may increase the understanding of the Modern General Practice set by the NHS and is something else the PPG can be tasked with.

Links:

<https://www.england.nhs.uk/long-read/how-to-improve-telephone-journeys-in-general-practice/>

<https://www.england.nhs.uk/long-read/how-to-improve-care-navigation-in-general-practice/>

<https://www.england.nhs.uk/long-read/how-to-improve-care-related-processes-in-general-practice/>

<https://www.england.nhs.uk/long-read/how-to-align-capacity-with-demand-in-general-practice/#section-3-modern-general-practice-redesigning-rotas-and-the-appointment-book>

6 Service provider response

5 Recommendations Our visit to Newport Pagnell Medical Centre was, overall, was a positive one. We have drawn a small number of recommendations though observations and patient feedback:

Evaluate the benefit of increasing the staffing of phone lines and any other operating triage systems at 'peak times. Consider giving more information to patients around how you manage demand; making people aware of the number of administrative staff that work on answering calls at peak times will help patients understand the pressures that staff face during these busy times.

We are working on understanding when the peak times occur to ensure sufficient staff for these periods. A suggestion to publish information that can be shown on the website, Facebook and our tv screens informing patients about times of high demand and other ways to contact the surgery is in progress. We are also looking into the ways that prescription requests can be made with a view to moving them away from the reception desk queues.

Consider an exercise to evaluate barriers for patients using online systems which could highlight opportunities to build trust in online access systems and support patients to use them, freeing up telephone lines for patients who are digitally excluded.

We have a large Information Display Unit on the ground floor reception that has our website, Accurx triage and System 1 online etc available. Patients can access the online services here should they not have access at home. Our patient navigators are on hand to help with any queries.

Consider tasking the Patient Participation Group (PPG) or an Admin Team member to offer 'Tech Support/ training' sessions for the new ACCURX system, possibly in the waiting room on a regular but short term basis. This would enable more of the patient base to get up and running with the system, answering their questions would go a long way towards increasing their understanding of the 'how and why' of the new system.

Following on from the item above, we are asking the PPG to assist us in the promotion of online services, using our new Information Unit on the ground floor reception area.

The online booking system closes down at 11am then reopens at 1pm, this is confusing for many. Improved messaging would be helpful and may reduce the number of patients who come to reception. This could be another task the PPG could support with.

Our online system closes in the morning when we reach capacity for the session, we have updated our Accurx message to inform the patients of this. This information has also been shared via Facebook and the website. Changes are in place for the triage to remain open so it will be paramount that we educate patients regarding the demand.

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All clinical requests are triaged by the duty doctor after they receive clear information from the navigator team. It is important that we are transparent and informative to our patients in this area. We plan to put information on our website and screens but will also be asking the PPG to take this forward.



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Milton Keynes

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