





ENTER AND VIEW:

TROWBRIDGE SURGERY

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Executive Summary

On 26 November 2024, Healthwatch Hackney conducted an Enter and View visit to Trowbridge Surgery, prompted by concerns raised by a Public Representative¹.

This visit supports our commitment to ensuring high-quality, patient-centred care, and aligns with Healthwatch's mission to amplify patients' voices, ensuring their feedback informs improvements in local health and social care services.

What we did, why and how

Preparation for the visit included reviewing the surgery's website, the latest CQC report, and existing patient feedback dating back 4 months. This was to align with the recent changes, including appointment of the new manager joining the surgery. Together, this insight provided a robust evidence base on which to ground our visit.

Based on this evidence, our visit was guided by four questions:

- 1. What is the patient experience like regarding booking appointments?
- 2. What is the quality of interaction between reception staff and patients?
- 3. How well does the surgery meet the needs of its most vulnerable patients?
- 4. To what extent does the surgery respond to and engage with patients' compliments, feedback and complaints?

To answer these questions, during our visit we made observations and spoke with patients, staff and the surgery manager. Throughout the process we adhered to ethical guidelines by minimising disruption to the surgery's operations, seeking patients' consent and anonymising data at collection.

Finally, we coded and analysed the data to identify key themes, while comparing the patient and staff feedback to offer a comprehensive and balanced view of the surgery and identify any discrepancies.

During our visit we spoke with 8 patients, the surgery manager, the reception coordinator and a member of the clinical team. While our data is not

¹ Public Representatives are Hackney residents that represent the views of local people. They play an important role in making sure that residents' perspectives are considered when planning, commissioning and delivering health and social care services.

representative of the entire patient population, we captured a diverse sample to ensure we gathered a broad range of perspectives and experiences, reflecting different patient needs and interactions with the surgery.

Key Findings

Accessibility: Trowbridge Surgery is difficult to access for wheelchair users and those with mobility issues. It lacks disabled parking, wheelchair ramps, handrails, and automatic doors, while narrow doorways and cluttered spaces further limit access. These barriers create an unwelcoming environment, likely deterring patients with mobility challenges from registering.

Environment: The surgery is small, outdated and cluttered, giving a chaotic and unwelcoming impression. Limited space makes movement difficult for patients with prams or mobility aids and compromises privacy, with conversations easily overheard. While staff attempt to address privacy concerns, the cramped environment restricts these efforts. The lack of space also limits the surgery's ability to expand services or improve the overall patient experience.

Appointment booking: Patient feedback is mixed, with 59% of patients satisfied and 41% dissatisfied. The surgery plans to switch to the E-consult system under new ownership, but no timeline has been confirmed. While the surgery is now open on Saturdays for pre-booked appointments, the website has yet to be updated to reflect this change.

Patient – staff relationship: Patients praised reception staff for their friendly, efficient, and empathetic approach. However, there are ongoing issues with referrals, test result follow-ups, and arranging subsequent appointments. Feedback about clinical staff varied: some patients feel well-supported, while others report rushed consultations and are not fully informed about their health. A patient with a language barrier and another one with mental health needs shared a particularly negative experience.

Feedback, compliments and complaints: The surgery's feedback and complaints process is not well known or accessible to patients. During our visit, we found no visible information about how to leave feedback or file a complaint. While the surgery responds promptly to complaints and handles online feedback constructively, all the patients we spoke with on the day of our visit were unaware of how to give feedback or raise a complaint.

Recommendations

Based on the evidence collected in the past 4 months, our findings and observations, Healthwatch Hackney would like to make the following recommendations:

Recommendations to the surgery manager

- 1. Improve the surgery environment and feel. Declutter the space and regularly update information displays and materials, ensuring they are relevant, accurate, and neatly presented.
- 2. Improve patient experience on booking appointments.
 - Expedite the transition to the E-consult system and provide clear communication to patients about upcoming changes.
 - Update the website promptly to reflect changes in operating hours, such as the addition of Saturday appointments ensuring patients have accurate and current information.
- 3. Improve support for vulnerable patients
 - Ensure that all patients whose first language is not English are proactively offered an interpreter not only during consultations but also at the point of arrival at reception.
 - Offer additional training to all staff to improve their awareness and understanding of mental health conditions and the support patients with these conditions require.
- 4. Improve Feedback and Complaints Processes
 - Ensure information about feedback and complaints procedures is visible and accessible, such as through prominent displays and clear signage in the waiting area.
 - Actively educate patients about how to raise concerns, including offering leaflets, online guides, and verbal guidance from staff.
 - Develop a structured approach to encourage feedback, such as implementing patient surveys or placing suggestion boxes, to identify areas for ongoing improvement.

These recommendations aim to create a more inclusive, accessible, and patient-centred environment at the surgery. Enhancing accessibility for patients with mobility challenges will reduce barriers to care, promoting equity in health service access. Improvements to the surgery's environment and booking systems will ensure a streamlined patient experience making it smoother and more efficient for all patients. Clearer communication about

feedback and complaints processes will empower individuals to voice their concerns and contribute to ongoing service improvements. Additionally, targeted support for vulnerable groups, including non-English speakers and individuals with mental health conditions, will ensure that the surgery meets the diverse needs of Hackney's population, aligning with NHS standards for equitable care.

Healthwatch Hackney met with the practice manager and clinical lead on 28 January to discuss the report findings and recommendations. Following this meeting, the service provider shared their response. This can be read in the full report below, on page 21.

Visit details

Service Visited	Trowbridge Surgery
Address	18 Merriam Ave, London E9 5NE
Surgery Manager	Zahidur Rahman
Date and Time of Visits	26 November 2024 at 9.30 am to 12.00 pm
Authorised Representatives	Brian Pinto, Cindy Wanjiku Wairimu, Ismael Ibrahim, Paula Shaw
Lead Representative	Sara Morosinotto

What is an Enter and View?

Healthwatch Hackney has a legal power under the Health and Social Care Act 2012 to visit health and social care services and observe them in action. This power of *Enter and View* services allows us to engage directly with service users and staff, providing a unique opportunity to assess both what is working well and where improvements could be made.

Enter and View visits are not only conducted in response to complaints or concerns but also in services that are performing well. This enables us to identify and share best practices more widely. During each visit, we observe how a service is delivered and speak directly with patients, their families and carers to understand their experiences. We also engage with management and staff to gain a comprehensive view of how the service operates.

After a visit, we produce an official *Enter and View* report, which is shared with the service provider, commissioners and regulators. The report outlines key

findings and offers evidence-based recommendations for improvement. All reports are available to the public on our <u>website</u>, ensuring transparency and accountability.

Enter and View is a valuable tool for driving patient-centred improvements. Through these visits, we have gathered insights which have led to meaningful changes across several services. This feedback has helped shape adjustments in service delivery, raising care quality, patient satisfaction, and health outcomes. In addition, our Enter and View work supports broader system changes by making patient and staff's voices central to the ongoing development of high-quality, patient-focused care in Hackney.

Purpose of the visit

Healthwatch Hackney visited Trowbridge Surgery in response to concerns raised by a Public Representative about patient experience at this surgery. The visit focused on four key areas: accessibility, the quality of interaction between patients and reception staff, support for vulnerable patients, and patient feedback. This aligns with Healthwatch's mission to amplify patients' voices and supports our commitment to ensuring high-quality, patient-centred care.

What we did, why and how

This Enter and View was guided by four questions:

- 1. What is the patient experience like regarding booking appointments?
- 2. What is the quality of interaction between reception staff and patients?
- 3. How well does the surgery meet the needs of its most vulnerable patients?
- 4. To what extent does the surgery respond to and engage with patients' compliments, feedback and complaints?

Preparation

Prior to the *Enter and View* visit, we reviewed the surgery's <u>website</u> to gather information about staff, accessibility, the registration process, services provided, appointment booking, and resources for patients. This includes support for those whose first language is not English, safeguarding policies, and complaints and feedback processes.

We also reviewed the latest CQC <u>report</u> to evaluate the quality of care provided and the surgery's strengths and areas of improvement. This includes key areas such as safety, effectiveness, patient care, responsiveness to patients' needs, and leadership.

Lastly, we reviewed patients' feedback publicly available, including Google Reviews, NHS Choices and the Friends and Family test, and all the comments shared directly with Healthwatch Hackney in the last 4 months, since the current manager joined the surgery.

Together, patient insight gathered in the preparation stage provided a robust foundation on which to ground our visit.

Data collection

During our visit, we collected information through direct observations, interviews with patients, and discussions with staff and the surgery manager, using the knowledge gained in our background research to inform our questions and observations.

Observations: We used a checklist to evaluate the surgery environment, including accessibility, cleanliness and overall atmosphere. Specific areas observed included the reception area, waiting room, and toilets. We also observed interactions between reception staff and patients, focusing on professionalism and respect for patient privacy and dignity.

Patient interviews: We interviewed patients to understand their experience with appointments, accessibility, quality of care, interactions with staff and service efficiency.

Staff interviews: We spoke with the reception coordinator, one clinical staff member and the surgery manager, to understand the overall approach to patient care. Discussion points included strengths, challenges, support to vulnerable patients, handling feedback and complaints, and support for staff.

Data analysis

Following the visit, all existing evidence and the additional insight gathered from our interviews and observations were subjected to qualitative analysis.

First, we read through all the feedback from patients and the notes from our discussions with staff and the surgery manager. This helped us get a good

sense of what people were saying about the surgery. Then we went through each piece of feedback and highlighted important points such as waiting times, the friendliness of the staff, or how easy it was to book appointments. Each of these points was labelled to help us organise the information effectively.

After labelling the feedback, we grouped similar points together. This helped us identify bigger themes, such as "patient-staff interactions" and "accessibility". Once we had the themes, we went back to the feedback to make sure they accurately reflected what people said.

Lastly, we compared what patients shared with what staff and the surgery manager told us. This ensured that the themes captured both patient experiences and the operational reality at the surgery, providing a comprehensive view.

Ethical considerations

To minimise disruption to the surgery's operations, we notified the surgery manager via email four days before the visit and provided a digital version of the notification leaflet, requesting it be displayed in the waiting area.

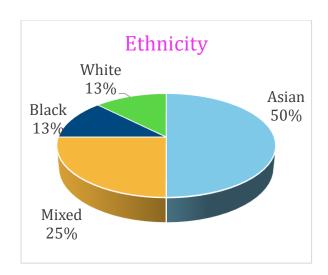
Observations and interviews were conducted in a manner respectful of the patients and staff's time and space. Before engaging in the questions, all participants were informed about the purpose of the visit, the nature of the questions and their right to withdraw at any time. Participants' identities were kept confidential, and data anonymised during collection.

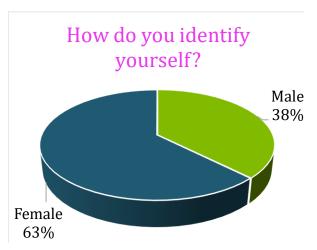
Safeguarding

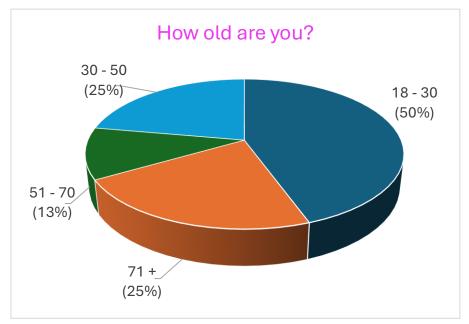
Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with safeguarding policies. If at any time an Authorised Representative observes anything they feel uncomfortable about, they will inform their lead who in turn will inform the surgery manager.

Patient profile

During our visit we spoke with 8 patients. While our data is not representative of the entire patient population, we captured a diverse sample to ensure we gathered a broad range of perspectives and experiences, reflecting different patient needs and interactions with the surgery.







About the service

Trowbridge Surgery is a general practice located in the London Borough of Hackney, serving a diverse patient population of approximately 8,900. The community is predominantly Asian, alongside other ethnicities, reflecting the borough's multicultural character.

The surgery's team includes four GPs, a nurse, a pharmacist, a healthcare assistant, two care coordinators, four receptionists and administrative staff, and an assistant manager. An interim practice manager, who has been in post for four months, is currently overseeing the practice.

The <u>Care Quality Commission (CQC)</u> rated the surgery "good" across all areas in 2016. However, more recent patient feedback through the Family and Friends

<u>test</u> in November 2024 indicates that 79% of patients rated the surgery as "good" or "very good"², falling below the national average of 92%³.

Trowbridge Surgery is undergoing a significant transition, with ownership transferring from the AT Medics Limited Group to HCRG. This change will introduce new systems, processes, procedures, and a redesigned website. While management has not provided a definitive timeline for completing the transition, the interim manager hopes it will be finalised by the end of 2024. The manager acknowledged that this change has caused some disruption to patients but emphasised that efforts are being made to minimise these impacts.

Findings

Accessibility

The surgery poses significant challenges for wheelchair users and individuals with mobility issues. While the location is well served by public transport and has a small parking area shared with nearby businesses, there are no designated disabled parking spaces. Although the surgery is signposted from the street, it remains inaccessible to wheelchair users due to uneven pavements and bumps leading to the entrance, narrow doorways, a lack of wheelchair ramps, slopes, or handrails, and obstacles such as a wooden plank at the entrance that must be stepped over.

Inside, the reception area is small, with insufficient room for mobility scooters or prams, let alone wheelchairs. Additionally, the surgery has no automatic doors, and while the reception counter is low, it does not have sufficient space to move around it.

These factors contribute to an environment that is inadequate for individuals with mobility challenges.

However, we heard from the practice manager that they have had disabled patients visit the practice, and none have raised concerns about facing difficulties in accessing the building. Additionally, the practice' doctors offer home visits to disabled patients, ensuring they receive the care they need

² NHS, 2024, FFT GP Data – November 2024. Available at: https://www.england.nhs.uk/publication/friends-and-family-test-data-november-2024/#heading-1

³ NHS, 2024. Friends and Family Test (FFT) data collection overview – November 2024. Available at: https://www.england.nhs.uk/publication/friends-and-family-test-data-november-2024/#heading-1

without the added struggle of arranging transportation or making the journey to the surgery.

Environment

The surgery is small and looks tired and outdated. The reception and waiting room areas appear cluttered, tiny, and not welcoming. Our Authorised Representatives noted that out-of-date leaflets and limited space contribute to a chaotic atmosphere.

Patients with prams or mobility aids face significant difficulties navigating the reception and waiting areas. While the seating is comfortable, it is arranged too closely together, compromising both privacy and ease of movement. On the day of the visit, a mother struggled to navigate the waiting room with a pushchair and baby, further highlighting the need for practical improvements.

As the surgery is small, lack of privacy is a recurring concern, with patients reporting that conversations at reception and in the waiting area are easily overheard.



I was able to overhear conversations that patients were having when I was in the waiting room, so no privacy.

Staff told us they try to address privacy issues by offering to have conversations in the corridor, but these efforts are constrained by limited space.

The limited space also restricts the variety and flexibility of services the surgery can offer. The manager noted that while there is a desire to work closely with the team, doctors, nurses, and pharmacies, sharing the same space creates significant challenges.

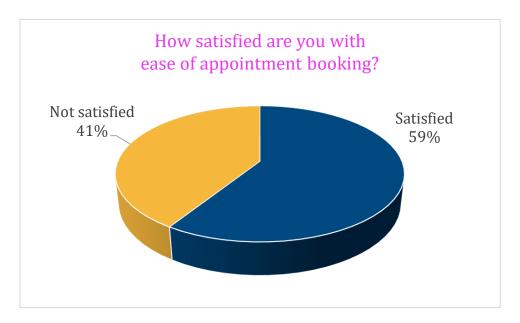
The lack of space prevents the surgery from offering additional services, too.



There are lots of things we can offer but we don't have the space. The wellbeing coach comes in the morning because I need the room for the diabetes nurse the second half of the day.

Appointments booking

The surgery's approach to appointment bookings changed when a new process was introduced in September 2024. Patients book an appointment on the Dr. I.Q app and are triaged to ensure that appointments are reserved for those with the greatest need, while others are directed to alternative options such as pharmacies. While this system aims to improve efficiency, patient feedback suggests a mixed experience. Feedback collected online in the last year indicates that 59% of patients are satisfied with appointment booking, while 41% are not.





It can be difficult trying to make an appointment because the practice prefers patients to use their 'Dr. I.Q.' app, which, as a dyslexic, I struggle with.

We heard mixed experiences on the day of our visit, too. A patient told us that the Dr. I.Q. app often does not work due to technical difficulties. However, another one shared that booking an appointment is quite straightforward.



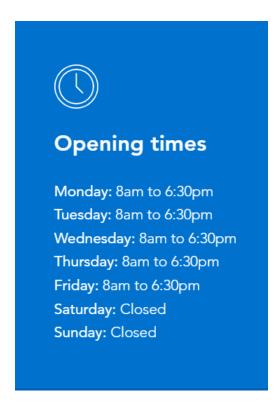
Then I have to call and make an appointment ... it makes me anxious.



[Booking an appointment] does not take too long.

The surgery manager acknowledged the challenges associated with Dr. I.Q. and told us that, as the surgery transitions to new ownership, plans are in place to switch to the E-consult system. Although this change is expected to address existing issues, no definitive timeline has been provided. The manager said, "I hope it will be all completed by the end of the year, but I am not sure."

In response to patient needs, the surgery has extended its operating hours to include Saturdays. This functions as an out-of-hours service, with appointments pre-booked at the borough level for patients in the area. Additionally, the surgery remains open for patient queries and administrative tasks, such as prescription collection, but not for regular appointments. Phone lines are closed during this time. However, both the surgery's website and the notice board at the surgery incorrectly state that they are closed on Saturdays.





These findings suggest that, although steps have been taken to improve appointment booking, there are still important issues with the current system. Switching to E-consult could help solve some of these problems, but it will be important to communicate clearly with patients and put the new system in place timely to improve their experience.

Patient – staff relationship



Our staff know [patients] in person, and they are comfortable with calling them by first name.

Patients frequently describe staff as "friendly", "helpful", "professional", efficient", "prompt", "patient", "diligent", "knowledgeable", and "thorough". The assistant practice manager is consistently praised both online and in person for her excellent customer care and the surgery manager takes great pride in the whole team for their approach to patients.

Reception staff play a crucial role as the face of the surgery, setting the tone for patient experience from point of first contact. Many patients noted that receptionists are efficient and thorough in handling queries. The surgery manager told us that the staff strive to build personal connections with patients. These efforts are reflected in the online feedback, where 94% of feedback about staff attitudes, compassion, and empathy is positive.



Everybody here is helpful, friendly, discreet, and professional... Absolutely fantastic and a credit to our NHS.

Staff also aim to ensure that patients feel listened to and supported. During our visit they told us that they make every effort to "welcome patients" and "give them time" to raise their health concerns.

According to online data, 89% of patients feel well-informed, involved, and supported in their care. Such feedback suggests a high level of trust and satisfaction in the staff's interpersonal approach.

Despite these strengths, there are consistent concerns about the surgery's follow-up procedures. Patients told us of difficulties arranging follow-up appointments, receiving test results, and completing referrals.



It's difficult to arrange follow-up visits.

You have to call many times to find out test results.

The surgery manager acknowledged these challenges and added that:



Patients have high expectations. They complain that referrals should be made within days, not weeks.

Feedback about the clinical staff is mixed and further highlights areas for improvement. While some patients feel that clinical staff take time to listen and provide the care they need, others have told us they felt rushed and not fully informed about their health and choices available to them.



You can't ask more than two questions at any one time. The doctors are always busy and in a rush, but they don't push you out of the door. They are not good, not bad.



Sometimes I feel rushed. Additionally, [the GP] doesn't always give me enough information.



The GP always give me the time I need.

These contrasting experiences suggest variability in the quality of interactions with clinical staff.

On the day of our visit, we also spoke with a patient whose first language is not English.

While the surgery manager acknowledged the diversity of the patient population, they downplayed any language challenges, stating, "Language is not really an issue, communication is easy here." He also told us that "We don't have many [patients whose first language is not English], but we use the Language Line and we have the appointment ready for them when the patient comes in". However, this patient's feedback tells a different story. The conversation happened in the patient's first language, which an Authorised Representative speaks fluently. The patient told us:



I am learning English and I get by. A family member always comes to the appointments with me. If it wasn't for them, I would be dead. Today I came alone for a test but they understood that I needed an appointment, so they gave me one for tomorrow. I said, no I am here for a test, a test.... No, they did not offer me an interpreter, I didn't know I could have one.

This patient's experience contravenes NHS guidelines on interpreting and translation services in primary care, which clearly state that primary care providers are responsible for offering interpreting services that meet patients' communication needs⁴.

As noted in the 2018 edition of *The British Journal of General Practice*, access to interpreters is essential for meaningful patient involvement in their care, because "nuances of meaning and subtleties of expression make the difference between shared understanding and total communication failure. All these are the bread and butter of general practice⁵".

Similarly, a mental health patient told us they felt unsupported during their consultation. They shared,



The doctors listen to you. The only exception is when mental health is concerned. Then they don't have time for you.

This patient's experience contrasts sharply with the general sentiment that staff are empathetic and attentive.

Feedback, compliments and complaints

The feedback and complaints process at the surgery is not well known or accessible to patients, creating a disconnect between the surgery's intentions and patients' experiences.

⁴ NHS England (2018) NHS Guidelines on interpreting and translation services in primary care. Available at https://www.england.nhs.uk/wp-content/uploads/2018/09/guidance-for-commissioners-interpreting-and-translation-services-in-primary-care.pdf

⁵ Lehane, D. and Campion, P. (2018). Interpreters: why should the NHS provide them? Br J Gen Pract. 2018 Dec;68(677):564-565. doi: 10.3399/bjgp18X699905. PMID: 30498142; PMCID: PMC6255215.

Staff informed us that there are leaflets in the waiting room explaining how to leave feedback or make a complaint. However, during our visit, Authorised Representatives could not locate any such leaflets, raising concerns about how effectively the surgery communicates this information to patients.

According to the manager, complaints are rare, and the surgery has a policy of addressing them promptly. They explained that when a patient complains, the surgery aims to call them directly and resolve the issue "straight away." Complaints made by email are acknowledged and answered within 30 working days. This approach reflects a willingness to engage with patients and address their concerns.

The surgery also demonstrates a thoughtful approach to online feedback. Responses, whether to positive or negative reviews, consistently validate the patient's experience before thanking for the compliment or offering to address any issues directly. This indicates an effort to maintain transparency and encourage constructive dialogue.

However, on the day of our visit, none of the patients we spoke to knew how to raise a complaint. When asked, one patient said, "I will speak to reception". When further asked what they would do if their complaint was about the reception itself, the patient admitted they "would not complain". This suggests that patients lack both the knowledge and confidence to navigate the complaints process effectively, particularly if the complaint involves sensitive matters or staff members.

These findings highlight a significant gap in the surgery's ability to empower patients to provide feedback or raise concerns. While the surgery appears committed to responding to feedback and complaints when they are received, a lack of visibility and awareness around the process limits patients' ability to engage with it. Clearer communication, more prominent placement of complaint information, and proactive efforts to educate patients about their options could help bridge this gap and enhance the patient experience.

Recommendations

Based on all the evidence collected in the last 4 months, our findings and observations, Healthwatch Hackney would like to make the following recommendations.

Recommendations to the surgery manager

- 1. Improve the surgery environment and feel. Declutter and regularly update information displays and materials, ensuring they are relevant, accurate, and neatly presented.
- 2. Improve patient experience on booking appointments.
 - Expedite the transition to the E-consult system and provide clear communication to patients about upcoming changes.
 - Update the website promptly to reflect changes in operating hours, such as the addition of Saturday appointments.
- 3. Improve support for vulnerable patients
 - Ensure that all patients whose first language is not English are proactively offered an interpreter effectively.
 - Offer additional training to all staff to improve their awareness and understanding of mental health conditions and the support patients with these conditions require.

4. Improve Feedback and Complaints Processes

- Ensure information about feedback and complaints procedures is visible and accessible, such as through prominent displays and clear signage in the waiting rooms.
- Actively educate patients about how to raise concerns, including offering leaflets, online guides, and verbal guidance from staff.
- Develop a structured approach to encourage feedback, such as patient surveys or suggestion boxes, to identify areas for ongoing improvement.

These recommendations aim to create a more inclusive, accessible, and patient-centred environment at the surgery. Enhancing accessibility for patients with mobility challenges will reduce barriers to care, fostering greater equity in health service access. Improvements to the surgery's environment and booking systems will ensure a smoother, more efficient experience for all patients, while clearer communication about feedback and complaints processes will empower individuals to voice their concerns and contribute to ongoing service improvements. Additionally, targeted support for vulnerable groups, including non-English speakers and individuals with mental health conditions, will ensure that the surgery meets the diverse needs of Hackney's population, aligning with NHS standards for equitable care.

Service provider's response to the report

On Accessibility

We acknowledge the concerns raised regarding accessibility at Trowbridge Surgery. However, we would like to clarify that we have patients using wheelchairs and mobility scooters accessing the site without issues and they manoeuvre around the practice comfortably. Additionally, parents with pushchairs have also navigated the space without difficulty. Whilst the practice may appear small, to date, we have not encountered any accessibility-related issues preventing patients from receiving care.

For those who do experience difficulties visiting in person, our doctors provide home visits to ensure that all patients receive the care they need. Furthermore, our patient list size has continued to grow over the years, indicating that accessibility concerns have not deterred individuals from registering with the practice.

We remain committed to providing accessible and high-quality care to all our patients.

On the Environment

We acknowledge your concerns regarding the size and layout of the surgery. We have been working closely with the Local Borough ICB team to explore options for additional or alternative space.

Despite the space limitations, we actively work to ensure a positive patient experience. We have placed relevant posters throughout our reception and waiting areas to promote additional services available in Hackney, which benefit all our patients. Our team has also reviewed and updated all leaflets and posters to ensure they provide accurate and up-to-date information.

Regarding privacy concerns, we do not discuss sensitive matters with other patients present. When necessary, patients are asked to wait until the area is clear before discussing private issues or taken to a clinical room to speak privately.

We remain committed to providing the best possible care within the constraints of our current premises.

On Appointment Booking

We acknowledge the feedback regarding appointment booking and would like to clarify the improvements we have already made. We are delighted to inform you that our new and improved Dr.iQ app, powered by Evergreen Life, went live to patients in December 2024. The app went live with full functionality including the ability for patients to:

- Order repeat prescriptions
- Download and view medical records
- Submit online consultations to access same day care
- View health tips tailored to them
- Call or live-chat with the Evergreen Life support team

So far over 1,402 patients have download our new app. Our practice teams, continue to work hard to bring more patients on to the new platform and to ensure that our patients have faster and easier access to their GP practice!

Our Saturday clinics operate as part of Extended Hours Hubs provided under our Primary Care Network and are offered to patients registered in the local area. As we are part of the Well Street Common Primary Care Network, our patients can benefit from appointments in the local Extended Hours Hubs at other local practices.

Our communications team is in the process of updating our website to reflect these changes, we took all the necessary steps to ensure patients have the most accurate and up-to-date information as soon as possible. We will ensure our website reflects all up-to-date information.

On Patient-Staff Relationship

The practice offers a variety of consultation types each day, including face-to-face appointments, telephone consultations, and online requests. To facilitate timely and effective care, the practice operates a Doctor First Triage model.

All appointment requests received throughout the day are assessed on the same day by a triaging GP, who determines the best pathway for each patient's needs. This may include referrals to local community services such as eye services, Pharmacy First, or a First Contact Practitioner.

This approach ensures that patients receive the best care at the right time, delivered by the appropriate clinical practitioner. Additionally, the practice has transitioned from standard 10-minute appointments to 15-minute appointments, allowing GPs to better address patients' needs and expectations.

Referrals and test results are managed by external providers, and whilst we do not control their timelines, we ensure that our processes are as efficient as possible. When a patient is seen by one of our clinicians and a referral is required, it is created at the time of the appointment and promptly sent to our administrative team. Unfortunately, the appointment availability in secondary care is beyond our control.

We actively follow up on referrals and test results on behalf of our patients to ensure timely updates. Additionally, not all test results require a follow-up appointment. Once results are received, a GP reviews them and provides instructions to our administrative team. If a consultation is necessary, our administrative team proactively schedules either a telephone or face-to-face appointment for the patient, whichever is most appropriate.

We remain committed to ensuring that referrals and test results are handled efficiently and will continue to advocate for timely responses from external providers.

For patients with language barriers, we offer Language Line, which provides real-time translation during consultations. Patients can request this service when booking their appointment, and if they arrive without prior notice, we still make every effort to arrange an interpreter on the day. If unsuccessful, we reschedule the appointment at a time when a translator is available to ensure patients receive the necessary support.

We remain committed to improving our services and ensuring that all patients receive the highest level of care.

On Feedback, Compliments and Complaints

We would like to clarify that our feedback and complaints box is clearly displayed on the wall in the waiting area, and copies of our complaints leaflet are available at both our reception and the waiting area. These leaflets provide clear instructions on how patients can submit feedback or make a complaint if they wish to do so.

We acknowledge the importance of making this information more visible. We will update the display to make it more eye-catching so that patients can easily locate it.

Service provider's response to Healthwatch Hackney's recommendations

1. Improve the surgery environment and feel. Declutter the space and regularly update information displays and materials, ensuring they are relevant, accurate, and neatly presented.

Thank you for your feedback. Following your visit, we have thoroughly reviewed all our materials to ensure they are up to date, relevant, and neatly presented for the benefit of our patients. We remain committed to maintaining a well-organised and informative environment to enhance the overall patient experience.

- 2. Improve patient experience on booking appointments.
- Expedite the transition to the E-consult system and provide clear communication to patients about upcoming changes.
- Update the website promptly to reflect changes in operating hours, such as the addition of Saturday appointments ensuring patients have accurate and current information.

We appreciate your feedback regarding appointment booking. Before launching our new digital platform, which went live on 10th December 2024, we took proactive steps to ensure a smooth transition. Posters and leaflets were displayed throughout the surgery, and text messages were sent to all patients with a link to download the new app ahead of the launch. Phone lines were also updated with relevant information and we discussed the changes with our Patient Participation Group.

This allowed patients to familiarise themselves with the changes in advance. Our team at the practice are available to assist any patients experiencing challenges with the new online app and are happy to provide support.

Regarding updating our website with information about our Saturday appointments, our communications team are in the process of updating this to ensure all details are accurately reflected.

- 3. Improve support for vulnerable patients
- Ensure that all patients whose first language is not English are proactively offered an interpreter not only during consultations but also at the point of arrival at reception.
- Offer additional training to all staff to improve their awareness and understanding of mental health conditions and the support patients with these conditions require.

We appreciate your feedback on improving support for vulnerable patients.

For patients whose first language is not English, we offer a translation service, even if a patient's appointment was not pre-booked. However, when requested on the day, availability cannot always be guaranteed, as interpreters may not be immediately available. It is important to note that these services are commissioned by North East London ICB.

To ensure awareness of the availability of the translation services, posters are displayed throughout the practice, informing patients of this service, just as we do for patients with hearing difficulties.

Regarding mental health awareness, our staff regularly undergo training on mental health and learning disabilities. We recognise the continuous need for staff development and take a proactive approach.

Our Lead GP will conduct a dedicated training session for all administrative staff. This will enhance our understanding and awareness of mental health conditions, enabling us to better understand patients' needs and provide the appropriate support.

- 4. Improve Feedback and Complaints Processes
- Ensure information about feedback and complaints procedures is visible and accessible, such as through prominent displays and clear signage in the waiting area.
- Actively educate patients about how to raise concerns, including offering leaflets, online guides, and verbal guidance from staff.
- Develop a structured approach to encourage feedback, such as implementing patient surveys or placing suggestion boxes, to identify areas for ongoing improvement.

We acknowledge the importance of ensuring that our feedback and complaints procedures are clear and accessible to all patients.

We encourage feedback and we will be placing a more eye-catching poster in the surgery to highlight the importance of patient input both positive and negative so we can continue to improve our services. Leaflets are available at our front desk and in our waiting area detailing our complaints process.

Patients receive an SMS after each appointment asking them to complete the Friends and Family Test Questionnaire. The responses are regularly reviewed by the team to ensure that we are consistently working towards improving patient experience.

Our administrative team actively work to resolve concerns in real-time. Patients are informed about the complaints process and the availability of a feedback box in the waiting area, where they can leave comments at any time.

We remain committed to listening to our patients and making necessary improvements. As the Practice Manager, I am available to speak with patients directly if they need to address their concerns.

Closing remarks

Healthwatch Hackney will continue to monitor patient feedback and work collaboratively with the practice manager to maintain and strengthen a high-quality, patient-focused experience that meets the needs of the community it serves.

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