

Enter and View Cambridge Avenue and Messingham Medical Centre



March 2025

Enter and View Report

Name of Setting: Cambridge and Messingham Medical Centre

Name of Practice Manager: Kay Fowler

Insert address: Cambridge Avenue, Bottesford, DN16 3LG

Date of visit: 28.03.2025 Date of publication:

HWNL staff involved in the visit: Lucy Wilkinson, Rebecca Price and Linda Robinson

What is Enter and View?

Enter and View is the statutory power granted to every local Healthwatch which allows authorised representatives to observe how publicly funded health and social care services are being delivered. Healthwatch North Lincolnshire uses powers of entry to find out about the quality of services within North Lincolnshire.

Enter and View is not an inspection; it is a genuine opportunity to build positive relationships with local Health and Social Care providers and gives service users an opportunity to share their views on improving service delivery. Enter & View allows Healthwatch to–.

- Observe the nature and quality of services.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives of service users.
- Collect evidence-based feedback.
- Enter and View can be announced or unannounced.

Disclaimer

All the views, opinions and statements made in this report are those of the patients, staff and relatives who participated in the enter and view visit to Cambridge and Messingham Medical Practice and any follow-up conversations that took place. Any quotes within this report are written verbatim to fully capture the meaning, tone and emotion of the person sharing their experiences.

Main Purpose of Visit

The purpose of Enter and View can be part of the Healthwatch prioritised work plan or in response to local intelligence. Broadly, the purpose will fit into three areas of activity:

1. To contribute to a wider local Healthwatch program of work
2. To look at a single issue across a number of premises
3. To respond to local intelligence at a single premises

This visit was carried out following a request to complete an enter and view by the Practice Manager.

Cambridge and Messingham Medical Centre background

The practice is a busy town practice that currently has 12,700 registered patients. The practice works across two sites, one on Cambridge Avenue, Scunthorpe and one in Messingham.

The practice was last inspected by CQC in 2016 and achieved a rating of Good.

The practice works in conjunction with Hull, York Medical School.

Patients can choose where to attend their appointments, supporting the patient choice initiative. Between January and March 2025, the surgery provided 1,787–2,196 weekly appointments with various practitioners. In addition to GP consultations, the practice offers enhanced local services, including diabetes checks, baby clinics, travel vaccinations, Learning Disability Nurse support, phlebotomy, spirometry, foot checks, over-75 assessments, and minor surgery.

The visit –on arrival

The announced Enter and View visit was scheduled for the week of March 24, 2025, with Healthwatch arriving on March 28 at 9 a.m. The car park was busy, with a disabled drop-off area at the front. Bollards protecting the sliding entrance doors had been knocked over by cars attempting to turn around.

Upon arrival, the Healthwatch team were welcomed by the receptionist and signed in via a digital system.

The manager provided a tour of the practice, including empty consulting rooms, to offer insight into its operations. A temporary self-service blood pressure monitoring area was set up in one corner of the waiting room, with plans to replace the privacy screen with a permanent fixture once building works begin.

The practice is spacious, featuring ample office and storage areas alongside consulting rooms. Noticeboards displayed health and nutrition information, patient compliments, and Patient Participation Group (PPG) updates, while a well-being board was available for staff. An Armed Forces information poster was also present.

A rolling display screen showcased various details, including Carer support, menopause advice, and family and friends test information. However, the advertised "Share for Better Care" week had already ended and was out of date.

Observations

Healthwatch spent time observing interactions and gaining a general overview of the practice during the visit.

The practice was exceptionally clean and tidy, as were the toilets and baby changing facilities. The reception area is painted a very bright green; the rest of the practice is in a clinical white. They have a variety of chairs to meet different individual's needs.

There is disabled access and a hearing loop. The lift is for staff only, as everything for patients is available on the ground floor.

There was a quiet area outside the Disability Nurse's room, but patients wouldn't have known about the area, unless it was mentioned at the time of booking.

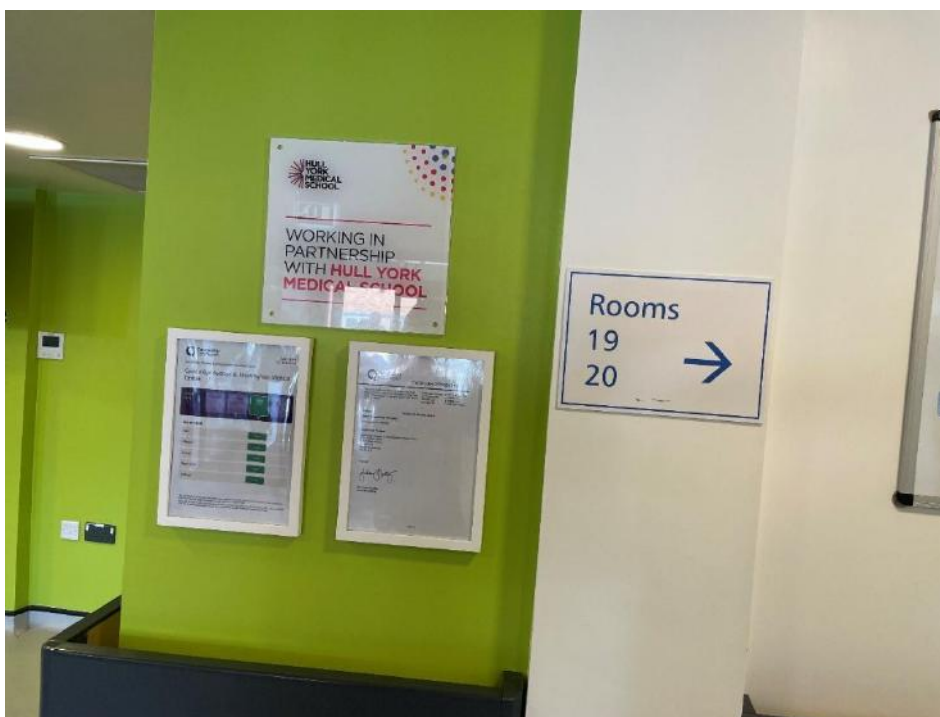
The receptionist on the front desk was pleasant and helpful to the people waiting to book in or arrange appointments.

Translation services were not displayed, but when asked at reception, we were informed that it would be stated on a patient's profile and the surgery would arrange a translator if required.

There was no visible board displaying staff profiles or information explaining why receptionists ask about symptoms to direct patients to the appropriate healthcare professional. However, this information was later found on the practice's Facebook page, which is regularly updated and informative.

A comments box was available with friends and family slips and a pen, alongside a Friends and Family Test poster and easy-read materials.

Room signage was basic, and Healthwatch felt it could be clearer, particularly for patients with poor eyesight.



Summary of the Manager's questionnaire

Healthwatch spent time with the Practice Manager, finding out general information and completing the manager's questionnaire.

The Manager confirmed she has been the manager since August 2024.

Safety

The Manager informed Healthwatch that the practice follows the General Medical Councils policies and procedures around the management of health and safety.

The practice holds a bi-weekly round the table clinical meeting to discuss any patient concern. All staff have completed online safeguarding training and recently received a face-to-face safeguarding update session during one of the protected learning time sessions. The practice also attended the Safeguarding Adults Board conference held by the local authority in February this year. Two partner G.Ps and the Practice manager would submit any safeguarding concerns, and the manager would monitor the referrals and any follow up required.

The practice manager advised that there was no serious safety incidents recorded at the practice. Any incidents or concerns are reviewed and used as learning events. There will be reflection time, and any themes and trends will be looked at to look at how things can be done differently or improved going forward.

Any incidents or concerns are shared with the team for wider discussion and using duty of candor they are always open and transparent with all involved.

Staffing

The Medical Practice currently employs fifty two staff in total. The staffing structure is as follows; one Practice Manager, one Deputy Practice Manager, three Advanced Nurse practitioners, three salaried General Practitioners, five Nurses, Paramedic, Admin, Team Leaders, Receptionists, G.P registrars and students. Staff shortfalls are covered with a strong cohort of locums.

The practice also supports students including Nurses and year three/five students from Hull York Medical School.

A secretary works on the staff Rota on a weekly basis. The staff member is experienced in her role and understands safe staffing levels. If needed a Locum may be used. The practice covers annual leave and sickness with staff that work on part-time contracts and again they may use locums if needed.

Any staff absences are managed via NHS policies and procedures.

The surgery closes on the second Wednesday of every month for Protected Learning Time (PLT). During this time staff complete a variety of training, most recently the practice has concentrated on customer service training, complaint handling and the quality of phone calls.

During PLT, service providers have visited to complete presentations and talks for shared learning and development. These include RDASH, the local safeguarding team and the Addiction service. Staff have embraced this opportunity and enjoyed the learning.

Staff have regular appraisals and can request training if needed to support their role. Staff must complete mandatory training courses, and the practice encourages continuous professional development.

Patient Wellbeing

The manager explained that a team of receptionists handles calls to the practice, with additional staff available to assist when queues build up.

Most patients have responded positively to the triage system, the form advises a response within 72 hrs. Healthwatch were advised most patients receive a response within 24 hours.

Patients are given the option of face to face or telephone appointments. Healthwatch were advised that approximately 75% of patients choose face to face and the rest choose telephone appointments.

The system used is Surgery Connect, and all phone calls are recorded. The phone lines are open from 8am–12.30am and again from 1.30 to 6.30 pm.

Patients can complete an online triage form which is assessed by staff who may signpost to the pharmacy or advise an appointment is required. Forms are continually assessed, and most are assessed on the day of submission. Patients can also be referred to the urgent treatment center at The Ironstone Centre.

The practice recognises that online triage doesn't work for all patients and staff will support a person to complete the form over the phone if required, there are systems in place flag up if a person has a learning disability, blindness or hearing impairment etc. Staff are able to recognise and support anyone with additional needs.

Appointments are booked for 15 min slots, however they are not restricted, if needed the G.P may suggest that a further appointment is required for follow up.

Phlebotomy patients may have to wait for appointments, however there are now appointments available at the new Community Diagnostic Centre if a patient prefers. The largest number of 'did not attend' appointments are from phlebotomy patients.

House bound patients can request home visits and patients with diabetes, asthma or those in care homes can be visited at home.

Surgery hours are extended on Monday and Tuesday from 6.30pm–8.30pm via a shared service through the Primary Care Network to allow patients access to appointments outside of working hours.

The surgery has employed a learning disability nurse who is working to create a quieter area for L.D patients to sit in and wait for appointments. There are sensory toys and distractions available if needed. Information packs are sent out to the patient or carer before appointments to inform them about the nurse to reduce the worry around appointments.

Prescriptions are sent directly to Unity Pharmacy which is on site and they have quarterly meetings to discuss any issues, and the working relationship has recently improved.

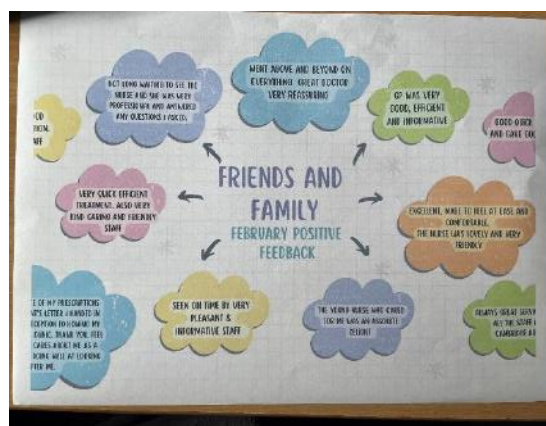
Patient Participation Group (PPG)

The practice has an active PPG, and the chair regularly attends the Integrated Care Board (ICB) PPG chairs forum to link in with other areas. The meetings are held quarterly, in an evening and are minuted. Currently there are 9 active members, and the group is always looking to recruit new members.

Friends and family test

The practice displays the family and friends test (FFT) in various ways including via Facebook, email, paper copies in reception and on the display screen.

Any FFTs that receive a score under three are reviewed. The team will look at the response and see if they can look at doing things differently, complete an action plan or dive deep into the data. Positive feedback is always shared with the staff to promote staff wellbeing.



Feedback

What did patients say?

We asked eleven patients who were attending the surgery a series of twelve questions.

How did you make your appointment today? E.g. by phone, in person, online form etc.

Eight people used the telephone line, two people used the on-line triage form. One had an appointment made for them via the pharmacy.

When did you originally contact the surgery for this appointment? (how long have you been waiting for an appointment).

Most patients had waited less than one week;

- 5 patients had been given an appointment for the same day
- 1 was given an appointment for the next day either after telephoning or using the on-line form.
- 1 patient had waited a week, but it was a non-urgent appointment.

However,

- 1 patient had waited 11 days,
- 1 patient had waited 3 weeks for an appointment to take blood
- patient stated that they had lost track.

How easy was it to make your appointment?

Overall, most of the patients we spoke to said it was easy to make an appointment, with various methods being used including the online booking form and over the phone.

However, two patients told us that it took a long time to get through on the phone and another told us that they gave up waiting and tried again the next day.

Were you offered a choice of both sites?

Two patients stated that they were offered appointments at both sites when making appointments. Three have been offered in the past, but not this time. Six patients advised they hadn't been given a choice.

Do you use the NHS App? Or the surgery online form?

Five patients use the NHS App and surgery online form. One patient said sometimes. Five patients didn't use either as they found it too difficult. One of whom said this was because they had dyslexia.

What do you do if you can't get an appointment? E.g., try again the next day, go in person, or go to A&E, III.

One patient would try telephoning again; one would fill out another online form. Two patients would go to A&E, three stated that they would try III.

One patient said that they would suffer until they got an appointment, one patient stated that it depended on the circumstances as to whether they tried again. One stated that they would try all three that were suggested. One patient said that they would try a pharmacy.

How are you kept updated about your condition, tests or results?

Six patients stated that they would be contacted by the surgery about their results. Two told us that they would make contact themselves either through the NHS app or by telephone. One patient wasn't sure, and one didn't answer the question.

One patient told us that they had been waiting since January for results and could only assume that they were okay.

How do you order your prescription?

Most patients prefer to use the telephone to order their prescriptions, and four order theirs online, one of which has it delivered to TESCO.

Do you collect it straight from the in-house pharmacy?

Five patients have their prescriptions come straight through to the in-house pharmacy. Three have them delivered to their home. Three use a different

pharmacy. One patient told us that they prefer to receive their prescriptions through the post rather than through the onsite pharmacy as they charge £10.00 for blister packs.

Are you aware of the friends and family test?

None of the patients we spoke to had heard of the Friends and family test, even though it was advertised on the communications screen. There were also posters on the walls and a comments box with blank comment forms and a pen sitting next to the box. However, two patients stated that they had received a text message asking about their appointment.

Overall, how satisfied are you with your GP surgery?

Four patients stated that they were satisfied, two were very satisfied, one rated it five out of ten and one said it was good, one didn't comment. Another patient said that it was the best one.

One patient told us that it was a lot better now and the patients need to be 'the driving force' to improve things.

Do you have any improvements that you would make to the practice? Or any further comments?

- *'More staff should be available to answer the telephone to make appointments.'*
- *'I don't know anymore which is the best way to make an appointment. It used to be phone at 8:00am, now it's longer and I presume they have a backlog for blood tests, I have waited two weeks.'*
- *'The old system was better for emergencies, the new way is better for planning for the surgery, not for patients.'*
- *'Micro suction for ears should be on the NHS'*
- *'More GP appointments- only certain Doctors work two days a week and not all GP appointments are offered on the triage system. I shouldn't have to tell the receptionist my ailments'*

- *'They should put it on the board if they are running late, they never keep to time'*
- *'The screen is a very good idea with the names being called out'*
- *'I don't like the green colour in reception'*
- *'The last nine months have been very good'*

We received feedback from a person with autism about their experience of Cambridge Avenue surgery.

"From arriving, there was no parking spaces, as someone who finds parking anxiety inducing, this started my journey in a negative way. I felt there could be better parking and not having to park in the pub across the road.

Walking into the surgery, it felt very clinical, which is what you would expect from a doctor's surgery, but it didn't have a welcoming vibe. The atmosphere was very loud, and it was overwhelming. There was a loud noise that called patients in and as someone with sensory issues it was a bit much- as was the colour scheme. It was difficult to focus as it was very bright.

As it was open plan, it was difficult as you could hear everything that was being said.

The staff seemed friendly, and I feel with the right training they have potential to be great with people with extra needs. The staff could do with Oliver McGowan training. As for the waiting area it would benefit from a sensory area for people with learning disabilities and autism"

Feedback

What did the staff say

Healthwatch did not have the opportunity to speak to any clinical staff as they were all busy in clinics and treating patients. We spoke to several office staff as below.

Staff Questionnaire

1. How long have you been in post? What are your main responsibilities?

Staff member 1 – Finance lead. Prior to that I worked at reception for 18 months. My main responsibilities are payroll, bank reconciliation, petty cash, drugs and bills.

Staff member 2 – Secretary I've been here just over a year, I deal with referrals, advice and guidance and secure mail.

Staff member 3 – Medical Administrator I've been here about 7 months. I'm in a full-time role and deal with data and coding. I've had a positive experience of induction and training. Help and support moving into my new role was fabulous.

Staff members 3 & 4 – Operation support x2 One staff member had been in post for 10 years having started as an apprentice and one had been in post just over a year. Both dealt with appointments and DNAs

2. How are patient appointments managed? Is there a time limit for appointments?

GP's offer face-to-face and telephone appointments, the appointments are 15 minutes long, extra time is given if it is with a trainee.

Patients are triaged. GP's offer face-to-face and telephone appointments; the appointments are 15 minutes long.

Patient appointments are managed in Red, Amber and Green slots for priority.

3. In your opinion, do you feel as though you get to spend enough time with patients?

- I generally have time to complete my tasks.
- I have enough time to do my job

4. What is the current referral wait times within the practice? E.g. how long does it take from the initial appointment to the referral being sent off?

Staff felt that there have been recent improvements in the referral wait time, stating that they are now sent straight away, and the use of the triage forms have made a difference.

5. Are there currently any delays in carrying out certain procedures? E.g. blood tests.

There may be slight waits for minor ops and smear tests and currently it's approximately a 5 day wait for non-urgent blood tests.

6. What are the reasons for these delays?

It may be capacity, or smears can only be booked in around a person's menstrual cycle. Reasonable adjustments are made whenever possible.

7. Is the friends and family test regularly promoted throughout the practice and within appointments?

Patient feedback is collected in different ways, including post-appointment surveys, emails, and the practice website. Posters, paper copies, and reception screen advertisements also promote feedback opportunities. Additionally, patients receive a text after their appointments, allowing the practice to identify recurring themes and address concerns proactively.

8. Are staff encouraged to recommend training and is the training implemented in a timely manner?

Staff felt that training needs are well supported within the practice, and they can request training, as well as take part in mandatory training and updates.

Staff told us they often 'work things out together' using everyone's skills, everyone is happy to support.

9.Do you feel confident in raising any concerns? Are these concerns acted upon?

- Yes, definitely.
- Yes, I've not had any concerns but if I did, I would be confident to say something and know it would be acted upon.
- Yes, I'd feel confident to raise a concern if I had one.
- Yes, we both feel confident, our manager is always available. If we raised an issue, it would be acted upon. We also discuss concerns at the monthly meeting.

10.What is the best part about working in your role.

- *'The team is lovely, has a nice atmosphere. They are flexible, which helps me as a carer'*
- *'It's a Monday to Friday job, it's an enjoyable place to work, friendly staff and I get a sense of achievement from being here. I needed to challenge myself so I'm now the lead on healthy lifestyles. I promote this on patient's board, we completed dry January and are having a prostate cancer campaign in May, we also completed a mental health walk which was open to patients'*
- *'I'm still learning new things every day, my job is interesting, I wouldn't make any changes to anything'*
- *'The environment is great; Kay and Louise have created a very supportive environment. The development opportunities are good, things have changed so much for the better'*
- *'If there was one thing, I would change it would be the office air conditioning'*

Conclusion

Overall, Healthwatch representatives found that patients were satisfied with the care and treatment they receive within the practice, and that staff are happy in their roles. It is evident that there have been many positive changes made over the past months which have impacted not only on patients but staff wellbeing also.

The practice is generally accessible to people with additional needs, with disabled access, hearing loops, quiet spaces and sensory equipment available. However, signage around the practice is unclear and the colour scheme could be over stimulating for some people with sensory needs.

It is positive to see that there is a functioning PPG within the practice, that is involved at a wider level.

Our visit demonstrated an appetite from patients to share honest feedback about the practice, and patients were more than happy to share their views with our team, however providing feedback through the family and friends test is not as popular, or effective.

There were no concerns raised about the safety of the patients on the day of the visit.

The staff were friendly and approachable and happy to interact with the Healthwatch team. The practice manager was open and honest and has made it clear that the team are working hard to make improvements.

Themes and Recommendations

The following themes and recommendations are being made based on the feedback and observations made during the visit:

Theme: Signs/directions

Recommendations:

1. The practice manager should consider implementing clear signs and directions to rooms as this is not always clear for patients.
2. Patient areas such as toilets and treatment rooms should be marked with dementia friendly or pictorial signs on doors to help people with additional needs.

Theme – Décor

Recommendations

3. The practice team should consider re decorating the reception area with more muted tones that are low contrast and autism friendly. Consultation with patients around the colour scheme is advised.

Theme: Patient feedback mechanisms


Recommendations:

4. The PPG should work with the Practice Manager to develop new and innovative mechanisms for gathering patient feedback in addition to the family and friends' test.

Theme: Car Parking

Recommendations:

5. The car parking is limited and difficult to navigate, the practice could consider seeking alternative parking areas and inform patients where the alternatives are.
6. The Practice should consider replacing the cones outside the entrance with solid permanent bollards to avoid accidents.

Signed on behalf of Healthwatch North Lincolnshire: 	Date: 2.6.25
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Provider response to recommendations:

Providers have 20 working days to respond to recommendations. This can include why they may or may not take on board the recommendations.