

# Enter and View Report: The Neaman Practice

Healthwatch City of London  
13th February 2025

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# Introduction

Visit Details	
Service visited	The Neaman Practice
Address	15 Half Moon Court, London, Greater London, EC1A 7HF
GP Partners	Dr Amy Hillier, Dr Paul Ugwu, Dr Chuan Chor
Operations Manager	Sinead Downes
Date & Time of Visit	13th February 2025, 9am-1pm
Status of Visit	Announced
Date of Previous Visit	14th February 2019
CQC Rating	Good
Date of CQC Report	23rd January 2017
Authorised representatives	Rachel Cleave, Liesa Sandt, Caitlan Barrow, Lynn Strother

## What is Healthwatch?

Healthwatch City of London is an independent organisation that relies on feedback from the local community regarding their experience using health and social care services across the City. 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 City of London ensures that your voice is heard by National Health Service (NHS) leaders and local authorities when decisions are made on how services will be delivered and further improved.

## What is Enter and View?

One of Healthwatch City of London's statutory functions is to carry out Enter and View visits to

health and social care service providers in the City. 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.

During visits, we observe service delivery and talk with service users, their families, and carers. We also interview management teams 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 will give recommendations.

## Why The Neaman Practice?

Within the City of London, there are a small number of NHS services in comparison to other boroughs, meaning that a large percentage of the population will be visiting the same services. GP surgeries are limited within the City, which means The Neaman Practice is where most residents in the City are registered. Because of this, we regularly hear about any issues patients have had when accessing their GP and there are areas we were keen to look in to. We were interested to find out what patients think of their GP surgery, how well things are working and whether there are any improvements that could be made.

The Neaman Practice has also recently upgraded its appointment booking process to an online triage system. HWCOL and the surgery have been conducting focus groups with residents to get their feedback on the new system, and to create a comprehensive how to guide for those needing to use the triage service. We wanted to speak to the practice and its patients to hear first-hand how they are finding the triage system, and whether they have any feedback for improving it.

The level of satisfaction with the care received is not subject to this project.

## Process

Before we arrived at the practice, we contacted the Operations Manager to discuss the visit and

the logistics of how our visits work, ensuring that we minimised the impact our presence would have on the daily running of the practice. We then created a survey to get patient insight into the practice before we undertook the Enter and View visit. This enabled us to obtain feedback from patients whom we were unable to see on the day of the visit. We had two responses from this prior to our visit and then were able to speak to six people on the day. We then conducted our visit to the practice on 13th February 2025 and used several different surveys to gain feedback from patients, the management team and staff, which we will go into in more detail below. The surveys can be found in the appendix of this report. We collated our findings along with the practice's response to our recommendations into this report, and we will be sending it to our commissioners, North East London Integrated Care Board, City of London Health and Wellbeing Board, Shoreditch Park and City Primary Care Network, Healthwatch England and other relevant people.

## Acknowledgements

Healthwatch City of London would like to thank The Neaman Practice management team, patients and staff for their contribution and hospitality in enabling this Enter and View visit to take place. We would also like to thank Generoso Roberto for his contribution in analysing the data and completing a write-up for this project.



# The Practice

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Healthwatch City of London carried out an online survey for service users of the of the cardiology department to complete. The survey was designed to further explore the issues that service users had expressed to Healthwatch City of London. The online survey was open from February 2024 and closed in June 2024 following the first enter and view visit to the hospital.

## The Neaman Practice

On 13th February 2025, we visited The Neaman Practice, a medical practice located in the City of London, within the Shoreditch Park and City Primary Care Network. The practice is commissioned by the NHS North East London Integrated Care Board and works closely with it. The City of London has an estimated 8,000 residents. However, the practice has approximately 9,350 registered patients as it also takes people from neighbouring boroughs if within the catchment area for the surgery. At the time of the visit, working at the practice there were:

- 3 GP partners
- 2 trainee GPs
- GP registrar
- 2 nurses
- 6 receptionists
- 2 administrative staff
- Operations Manager
- Business Manager

We interviewed a total of eight staff members including receptionists, nurses, GPs and the Operations Manager. The practice has recently implemented a new triage booking system for advice, appointments and administrative queries, which we will talk about further during this report. It also utilises the NHS app alongside this for repeat prescriptions and viewing medical records.

## CQC Rating

The CQC is the independent regulator of health and adult social care in England. It makes sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve. At the time of the visit, The Neaman Practice had not had a formal inspection since January 2017.

There have been several informal reviews since this, but no further formal inspection has been carried out yet. This is likely due to the COVID 19 pandemic where face-to-face inspections were put on hold. A review in 2020 stated, "We did not find evidence of significant changes to the quality of service being provided since the last inspection. As a result, we decided not to inspect the surgery at this time. We will continue to monitor this information about this service throughout the year and may inspect the surgery when we see evidence of potential changes.". All information regarding The Neaman Practice's CQC rating can be found on the CQC website.

## Online Feedback

The NHS review website for The Neaman Practice includes 14 reviews, both positive and negative, spanning from March 2023 to March 2024. The majority are positive and highlight staff compassion, receiving test results promptly and appointment flexibility. There are three negative reviews covering concerns such as the difficulty of booking appointments in a timely manner, and appointments being rescheduled multiple times. The Operations Manager has replied to many of the reviews left on the NHS website, either signposting them to additional support or explaining how their processes work.

There are also reviews for The Neaman Practice on the website, Care Opinion, which offer a very similar overview of positive and negative reviews as seen above.

# Summary of findings

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During our visit to the Neaman Practice, we were given a tour of the practice led by the Operations Manager, where Authorised Representatives were able to take notes and photos where appropriate. The team had a discussion with the Operations Manager about the services they offer and what support patients can access via the practice.

There are seven categories of observation. These categories include Outside and Entrance, Reception and Waiting Area, Environment, Safety, Information Displayed, Accessibility, and Staff.

## Outside and Entrance

The Neaman Practice is in the City of London, a short walk from Barbican tube station and the Elizabeth Line entrance to Farringdon Station. The area is located away from traffic and is easily accessible via foot, bus and tube. There weren't many pedestrians in the area as it is tucked away from the main road and there was a minimal amount of noise.

Upon arriving at the practice, there are several signs outside stating the name of the practice, the partners and the opening hours. The opening hours don't however state the days they are open, just the hours, closing for an hour at lunch 1pm-2pm. The entrance was clean and clear of any litter or debris. To access the building, there is either a small set of stairs or an accessible ramp. The practice also has a letterbox outside for prescriptions/letters when the practice is closed.



**Figure 1.**

## Reception and Waiting area

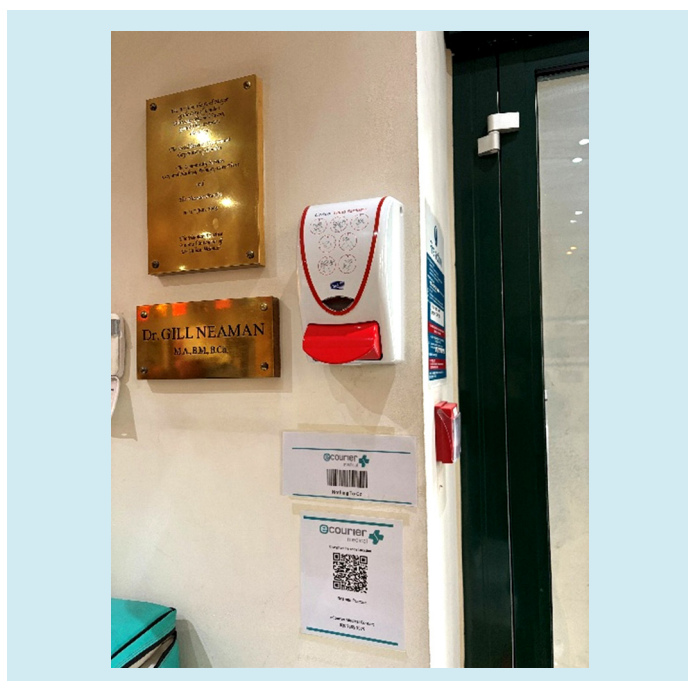
Once inside the practice, there is a long reception desk to the right and a waiting area to the left. Straight ahead are the lifts and consultation rooms as well as hallways/stairs leading to other parts of the practice. The ground floor waiting area is well lit and has lots of seating for patients to use. There are also leaflets and posters displayed for patients while they are waiting for their appointment, as well as in the lifts. We couldn't find any information displayed about the complaints process in the

waiting area. There is one screen in the waiting room downstairs as well as one on the first floor waiting room to display information to patients. However, the screen downstairs wasn't working when we visited. The first floor waiting room screen was on when we were there, although patients report this is not always the case.

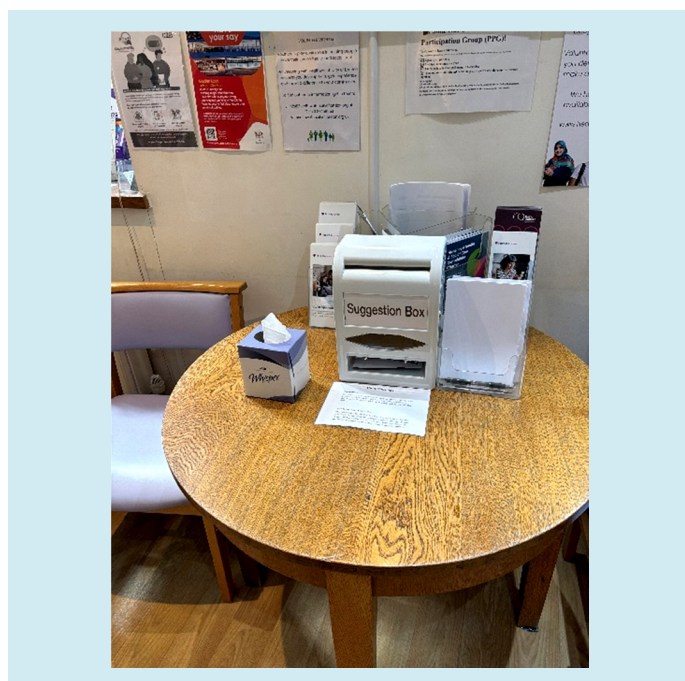
Hand sanitiser was available at reception for patients, and for staff members which was located behind reception. Tissue boxes were also located around reception.



**Figure 2.**



**Figure 3.**



**Figure 4.**



## Environment

There are several flights of stairs, as well as lifts providing access to the first and second floors. However, these are shared with the business occupants of the floors above. The left lift is for practice patients and the right for other occupants/visitors. The lifts are reported to be unreliable, and although regularly serviced, are prone to breaking down and being out of service while repairs are arranged. The surgery is spread over three floors with multiple consultancy rooms. There is some signage, although patients are usually called in for their appointment in person and shown where they need to go.

At the time of our second visit, one elevator was out of order. The second elevator was working, which connected the Neaman Practice to the organisation (Evolve) above. Signage was available for Evolve staff to not use the Practice's floors.



Figure 5.



Figure 6.



Figure 7.



## Information displayed

There were lots of leaflets and posters displayed around at the time, all advertising various support groups or services patients can access. These were in a variety of languages and advertising a range of services for both younger and older patients.

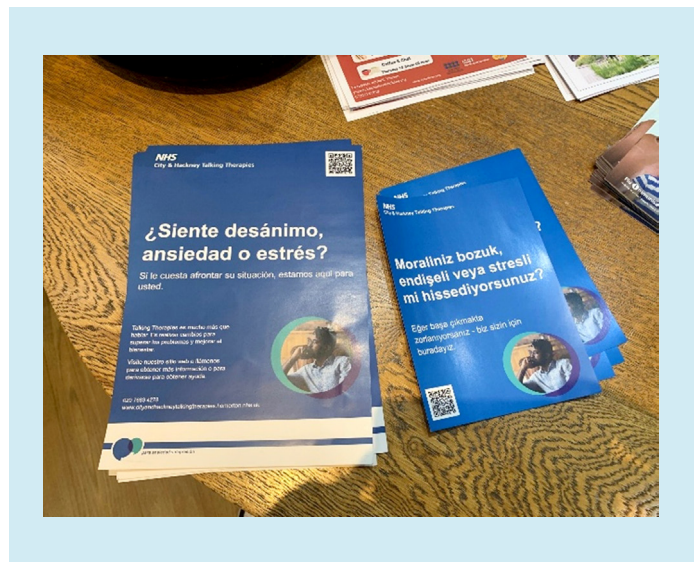


Figure 8.



Figure 9.

## Accessibility

There is a hearing loop in reception with signage advertising this on the reception desk. This is also listed on their website in the disability access section. There are two lifts within the practice and an accessibility ramp to enter the building.



**Figure 10.**



**Figure 11.**

## Other facilities

Baby changing facilities were located on the ground floor and second floor in the accessible toilets.

## Staff

When visiting, staff were well presented, welcoming and knowledgeable about the practice. They were able to advise patients where they needed to go, as well as where the lifts are located and how to use them. Staff had name badges visible during our visit, either attached to their clothing or a lanyard. Many staff had yellow badges to enable easy reading for those with conditions such as dementia and dyslexia.

## Triage booking system

The surgery now operates a triage-based appointment system where patients complete a form via Accurx to request an appointment. The online form first asks patients whether their inquiry is an administrative query, a medical issue, or a request for online advice. Patients reporting a medical issue must confirm that it is not an emergency by reviewing a list of conditions and symptoms. They then describe their problem, its duration, progression, previous remedies, and what assistance they require. Additional optional details such as photo attachments, specific concerns, and preferred contact times can also be provided before submitting the request.

A duty doctor reviews the submitted requests between 08:00 and 18:30 on weekdays and determines the appropriate course of action, which may include (based on the Neaman practice website):

- Emergency referral,
- Same-day appointments,
- Appointments within two weeks, or
- Referrals to other healthcare professionals such as nurses or pharmacists.

Patients can submit the form via the surgery's website or the NHS app. For those who struggle with digital access, appointments can also be booked via phone or in person with the assistance of reception staff.

## Services offered

**Phlebotomist** – On site everyday – except Wednesday

**Respiratory nurse** – On site everyday – except Wednesday

**Cardiology nurse** – On site everyday – except Wednesday

**Transport to Homerton Hospital** – As required

**Together Better** – Volunteer Centre Hackney – Multiple sessions per week

**Locomotor service** – St Leonard's – Once per week, Tuesdays

**SMI nurse** – Once per week, Wednesdays

**Social prescriber** – PCN – Once per week, Wednesdays

**Dietician** – PCN – Once per week, Wednesdays

**Stop Smoking service** – Once per week, Fridays

**First Contact Physio** – Once per week, Fridays

**ECHO therapy** – Barts – Once per month

**Toenail cutting** – Homerton Health – Once per month

**Young People's coach** – PCN – Adhoc

**Home List Care Coordinator** – Adhoc

**Dermatology clinic** – Adhoc



# Feedback

## Management/GPs

During our visit, we spoke to three senior members of staff and asked them a series of questions to prompt discussions regarding the following areas:

### Appointment booking/consultations

The management team emphasised that face-to-face appointments are always available for those who want them, and patients could request them through the online triage form. They just need to specify when, either by completing their form online or telling reception that they would like an in-person appointment. GPs are also able to make notes on a patient's file so they can add details such as "the patient prefers in-person appointments where possible" which will flag up every time their record is accessed by staff.

The practice has implemented several strategies to ensure appointment accessibility, including:

- Allowing patients to specify preferred dates and times as this enables patients have more control over their care.
- Designating a duty doctor with no pre-booked patients who attends to extra demand on the day.
- Collaborating with Primary Care Network (PCN) practices that provide evening and late-night appointments on a scheduled basis for those who would benefit.

### Triage booking system

The management team stated that they feel the new system is efficient and effective. They highlighted several benefits, including:

- Patients needing GP consultations are seen within 72 hours.
- Those needing alternative services or treatment are signposted to the correct health professional for them in a timely manner.
- The system allows patients to specify their preferred consultation method (face-to-face or telephone).
- It reduces morning call queues, helping both patients and reception staff to communicate with each other better.
- Doctors receive more detailed patient notes in advance as the form is thorough.



**Figure 12.**

- The DNA (Did Not Attend) rate has decreased because only patients who need an appointment to see a GP are booked one.

### Accessibility

When talking about accessibility, the management team stated that the GP surgery is committed to meeting the individual needs of its patients by ensuring accessibility, communication assistance, and tailored support for vulnerable individuals. We were told that the building is fully accessible, with staff available to assist patients as needed. One example used was showing patients where the lifts are or taking them to the room they need to go to. A flagging system is also used on patient records which enables staff to identify and accommodate patients with hearing impairments, mobility issues, or language barriers etc. The management team says this will flag up every time a member of staff clicks on the patient's record and can include details about needing an interpreter. Non-English speakers have access to Language Line, a 24-hour telephone interpreting service, while some receptionists are multilingual and can assist directly.



## Training/induction

The management team talked us through the training process for GPs, which varies depending on their level of qualification/experience. For trainee GPs, they will receive a week of induction, which includes shadowing all staff members in the practice as well as any mandatory training and attending meetings as required. For qualified GPs who are just new to the practice, they will receive a three-day induction covering only the areas that may vary from practice to practice. GPs will then start to see patients, although this is still supervised for trainee GPs. GPs are also required to complete 50 hours of training per year. Some of this is mandatory, while other training is optional, with doctors able to choose what they would like to study, based on their own interests or personal development. GPs also have a biweekly meeting where they will invite a speaker to inform clinical staff about a particular subject e.g. ENT.

## Staff

We spoke to several members of staff during our visit including receptionists, nurses and other support personnel. We asked them a variety of questions on the following areas:

### Appointment booking/consultations

One staff member stated that they offer in-person slots for socially isolated patients to give them an opportunity to talk. However, another staff member mentioned that at times, demand for face-to-face appointments exceeds supply.

According to staff, most appointments run on time, with proactive management of delays via text messages or calls if needed. Patients are also given the option to wait or reschedule if their appointment is delayed, and they won't be penalised for cancelling an appointment if it has overrun. The doctors' schedules include a built-in 10-minute buffer every hour to help manage overruns. This isn't foolproof, however, and delays do still occur, but the practice has a good system in place for managing this, and staff stated they have no issues when trying to rebook a patient if they can't stay for their late running appointment.

### Triage booking system

Overall, staff seem happy with the new triage system and how it works; they also appear confident about providing help to complete the form, with many receptionists stating they have advised patients how to fill in the form over the phone. Despite its advantages, some staff expressed concerns that certain groups may

struggle with the system, particularly:

- Non-digital patients
- Patients confused by the NHS app verification process
- Working patients with restricted time availability

The practice has processes in place such as receptionists assisting patients with the form and being able to signpost them to digital support, where needed. There is also flexibility for patients who work or have caring responsibilities, trying to accommodate preferred appointment times where possible.

## Accessibility

Staff mentioned there are numerous ways to support patients with accessibility or other special needs. These include use of a lift, hearing loop and interpreter services where required. They also stated that all staff have completed online training on supporting patients with disabilities, as well as some staff being aware of what hidden disabilities are. One staff member mentioned that some patients with accessibility needs struggle to know when it is their turn to go in for their appointment. So, instead of expecting these patients to rely on screens, medical or reception staff will fetch them personally from the waiting room.

## Training/induction

The induction process for admin and other non-clinical staff is one week. There is a similar induction process for trainee GPs in terms of familiarising themselves with the building, shadowing other staff and completing training. Staff complete online training as part of their induction and must do required refresher training as well. When we visited, some staff said that they would like more face-to-face training as they feel it is more beneficial in some areas. There are also regular meetings with the staff team as well as reviews/appraisals completed by line managers.

## Support for staff

Staff and the management team both told us that they feel supported by their line managers and feel that the team works well together. They know whom to go to for support if needed and staff report feedback being accepted well by the management team, with them working to rectify issues quickly. One member of the management team told us that they would like to do more team building activities or training days to boost team morale and strengthen the relationship of the team. Another staff member suggested that they would like more social events for staff to

attend, as this would also strengthen the team as well as creating a sense of belonging within the team.

## Patients

We spoke to six patients on the day who had varying experiences at the practice. They were asked a small selection of questions on the following areas:

### Appointment booking

From the patient perspective, booking experiences are mixed. While some find it easy and efficient, others struggle with the new online system or waiting to get through to reception on the phone. The practice has addressed the concerns regarding call wait times and appointment booking, which is why they have implemented their new triage system. They are working closely with their patients and Healthwatch to ensure that the new system is accessible or there is adequate support available to patients who need additional help completing the form. The reception team are welcoming and happy to assist patients however they can. Patients can either call or visit the practice in-person where they will be helped to complete the triage form. However, patients have expressed concern about privacy, particularly after introduction of the new booking system. A conversation between a patient and receptionist can easily be overheard by everyone else in the waiting area. Yet patients who are not comfortable with a digital system, and so require support from receptionists, may need to provide personal or confidential information.

Patients reported varied experiences with telephone consultations. Most respondents had telephone appointments, with some describing them as satisfactory, while others found them either excellent or poor.

### Communication

Both the management team and staff indicated that the most rewarding aspect of their job was helping patients, getting to know them, and reassuring them about their conditions. This sentiment was largely reflected by patients, who described their interactions with staff as helpful and friendly. Patients reported that staff were always willing to help, and to accommodate their needs. Several patients told us that GPs explained conditions and medications well during an appointment, and they felt reassured about how to manage their health issues. Patients also praised the Together Better programme which runs weekly social activities

at the practice, telling us it was “valuable to elderly residents”.

We have, though, received several responses from patients regarding poor staff interactions and not feeling listened to. While we didn’t see evidence of this during our visit, the management team assured us that they deal with all complaints/concerns seriously and ensure that every patient gets the opportunity to be heard. You can find their complaints procedure here on the Practice website.

Patients have also told us that they were not informed about the new triage system and had to figure it out the first time they needed an appointment following this change. Many patients expressed frustration about this, as they were then unsure how things worked and had no information on what was happening or why. Following this, we worked with The Neaman Practice to ensure patients were informed of the new changes and organised several focus groups to review the new system. Dr Hillier attended our first focus group where she explained to patients why the changes were made and how to use the triage booking system. She also took the group through the online form and explained what they needed to do in different scenarios.

### Feedback

The surgery provides multiple channels for submitting feedback and complaints, including:

- Letter
- Email
- Direct conversations with staff
- Website

Complaints are handled by the management team, thoroughly investigated, and responded to within 28 days. The management team explained to us the process and how they investigate any concerns patients may have. Despite the structured process, some staff were unsure if the complaints policy was clearly visible in the waiting area, with some only noticing a suggestion box instead of clear signage. While some patients understood how to submit feedback and complaints, others were unaware of the process.

The Patient Participation Group (PPG) plays a valuable role in engaging patients and providing feedback on services. The practice told us there are 20 people signed up to the PPG although attendance may vary each meeting. The management team encourages PPG members to help spread awareness of available healthcare services and changes coming up at the practice, as well as listening to their feedback regarding the practice. However, many patients were unaware of the group, and even

among those who knew about it, most had never attended a meeting. Only two patients reported receiving text invitations, suggesting that more effective outreach and engagement strategies may be necessary to increase participation.

## Conclusion

Overall, our visit to The Neaman Practice was positive with some areas for improvement identified. Below, we have highlighted some of the aspects we observed and have included our recommendations for improvement as well.

In general, staff communicate well with patients; receptionists give clear information to patients over the phone and doctors can explain matters to patients during their appointments. Patients told us that they feel listened to, and that staff take the time to understand their issues. Staff reflected this and said that they enjoy the patient interaction in their work. Indeed, this was the best part of their job for some.

Despite multiple communication channels being in place, there are indications that a large part of the patient population is not fully aware of key information, such as the feedback and complaints process or the existence of the Patient Participation Group (PPG). Management and staff are making efforts to inform patients through digital screens, posters, and direct conversations, but some patients still report a lack of awareness. This gap raises concerns that crucial changes, such as the new booking system, may not be fully understood by all patients, leading to frustration when they attempt to access care.

The transition to a triage-based appointment system has been viewed positively by most. We have heard there has been an improvement in accessibility, efficiency, and patient prioritisation. The system ensures that those requiring medical attention receive an appointment within 72 hours while also directing others to alternative healthcare professionals such as pharmacists or physiotherapists where appropriate. Additionally, it allows for GPs to manage who needs an appointment urgently as cases are assessed as they come in and triaged to the most appropriate healthcare professional. Patients report more timely responses since the new system was introduced, and greater flexibility in meeting their healthcare needs, now that they can complete the form online.

There have, however, been some issues regarding communication about these changes, as patients were left unaware of the switch to a triage-based system, which caused

some confusion. The practice worked with the reception team and Healthwatch City of London to rectify this, and ensure that patients were aware, as well as assisting them, to use the new system. This is still a work in progress, and we will monitor the feedback we receive regarding the triage system to assist the practice in improving this if needed.

Within the surgery, there are three waiting areas, the rooms are well lit and there is ample seating. There are various leaflets and posters around the practice, advertising different services and changes. There are two lifts as well as stairs which are signposted from reception.

Despite this, we observed several issues with the environment at the practice which we have addressed in our recommendations. These include a lack of clear directional signage throughout the building, unclear opening hours outside the practice, and their complaints procedure which wasn't displayed. We were also told that the lifts are unreliable and often break down, having a severe impact on patients who rely on them.

There is a thorough training pathway for all personnel. This differs for GPs and other staff but covers the same practice induction. This includes reading policies, shadowing other staff to understand each role and mandatory training e.g. safeguarding, fire safety. All staff regularly complete refresher courses and have the option to complete additional training where available. Staff report feeling supported by management and can discuss any issues or concerns when needed. Staff can request additional support or training via their line manager, and this is discussed during their review meetings on a regular basis to see if there was anything that would help them in their role.

Some staff felt there was a need for more training face-to-face as much of it is online currently. In-person training can be a beneficial learning style and helpful for where a more practical approach is needed. Staff also told us that they would like to see more team-building activities.

Overall, we observed many areas of good practice, and it is clear that staff are committed to their roles as well as to helping patients. We received many positive comments from patients regarding the care and compassion from staff, and several patients told us they really felt listened to.

Below we have identified some recommendations we feel would improve the patient and staff experience at the practice.

# Recommendations

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Recommendations have been made based on our observations and patient/staff interviews. The Practice Manager at The Neaman Practice was asked to respond to the following recommendations:

**1) We recommend reviewing how the practice communicates with patients, particularly regarding important information or changes to the practice so that patients are fully informed about what is happening. This could also be useful for identifying how to advertise services patients can access at the practice or groups like the PPG.**

## **Practice response: Improving Patient Communication and Service Accessibility:**

Effective communication with our patients is a core priority at the practice. Over the past few years, we have significantly expanded and diversified the ways we communicate with our patient population. This includes trialling and implementing SMS messaging, launching a redesigned website, introducing digital apps, updating digital and physical posters throughout the surgery, and installing a new phone system with multiple options to help direct patients according to their preferences.

One of the key developments has been the introduction of an online triage system. This new system streamlines the patient journey by eliminating unnecessary steps and allowing patients to be directed straight to the appropriate clinician or team member best suited to address their needs.

We acknowledge that a major change such as the transition to the new appointment booking system—should ideally have been communicated more widely to our patient base. Unfortunately, our ability to send mass messages via SMS was unexpectedly limited due to changes in our Accurx SMS usage cap which we discussed with Healthwatch on their visit. This occurred just as we were preparing to roll out the new system in late 2024, and as a result, we were unable to communicate the change as broadly as we had intended.

Despite this challenge, we proceeded with the triage system implementation using all available resources. We worked closely with Healthwatch, the Patient Participation Group (PPG), and relied on in-practice materials and direct communication to support patients through the transition in the absence of SMS outreach.

We remain committed to transparent, accessible, and patient-focused communication and will continue refining our methods to better serve the community. Since the change and the visit in February, the way we communicate with patients has been streamlined. Although the cap on SMS messaging still exists, we have now clarified the use of email communications, which we are able to send. At the time, the ICB had not provided clear guidance on how Accurx usage would be charged to the practice, but the surgery has now received full clarification.”

The practice has reviewed the use of SMS messages within the practice. We have received consistent feedback from patients expressing concerns about receiving too many non-essential messages from the practice. A significant portion of our patient population has indicated that they prefer not to be contacted about services they are not currently using or interested in, such as the Patient Participation Group (PPG), Healthwatch activities, or other optional community services events which throughout the year organisations send consistently.

Patients have communicated this feedback both directly through complaints and informally during interactions with staff. Many have shared that they prefer a more streamlined communication approach, where the practice contacts them only when necessary for their direct care—such as appointment reminders, test results, or medication-related issues.



While we understand the importance of promoting engagement and raising awareness of available services, we must also respect the preferences of the wider patient population. Over-communication risks causing frustration and disengagement and can lead patients to ignore or opt out of important practice messaging altogether.

In response, we have adopted a more balanced strategy. We continue to promote key initiatives like the PPG through annual messages, practice posters, and targeted outreach via community channels. This ensures patients are still informed and able to engage if they choose to, without feeling overwhelmed by frequent updates they may not find relevant.

**Our Patient Participation Group (PPG)** has been featured on the homepage of our website for some time, and we regularly send annual messages and updates to our patients. However, to maintain a sustainable balance, we also need active engagement from our patient community.

We understand that not all patients use digital platforms, so we've taken additional steps to improve visibility. Clear signage has been placed along the route to the consultation rooms for those attending the practice in person, and we've also promoted key information through local community channels, including the Barbican.

We remain committed to keeping patients informed, but with a population of over 9,000, we encourage the use of the tools we've put in place to stay connected and involved.

## **2) The booking process for follow up appointments is unclear. We recommend reviewing the process for this and sharing this with patients, as they are unsure whether they need to book these, or if the practice will do this for them. There is no information available to support this.**

### **Practice Response to Follow-Up Appointment Booking Process:**

We understand that some patients have experienced confusion regarding whether they need to book their own follow-up appointments. In response, we have taken several steps to improve clarity and consistency:

- **Staff Re-briefing:** All clinical and non-clinical staff have been reminded to clearly inform patients during consultations whether a follow-up appointment has been booked for them, or if they are expected to contact the practice to arrange it themselves.
- **Website Update:** We have updated the Appointments section of our website to include clear guidance on how follow-up appointments are managed. This includes steps for patients to follow depending on whether their follow-up is clinician-led or patient-initiated.
- **Reception and Online Support:** Patients can easily indicate that they require a follow-up when submitting an online consultation form, or by informing reception who are happy to assist and clarify the process. Doctors in the practice actively monitor their patients and contact non responders when they have disengaged when needing to follow up with their health.

## **3) We recommend that staff are reminded of process and procedures within the practice such as the process for medication reviews, NHS health checks, follow up appointments etc, so that staff are consistent with the information they are sharing with patients.**

### **Practice Response to Staff Consistency on Processes and Procedures:**

The processes for medication reviews, NHS Health Checks, follow-up appointments, and similar procedures have remained consistent over time. There have been no recent changes to these processes themselves.

We have reminded staff to continue following these established procedures and to communicate them clearly and consistently to patients. Information is readily available online and within the practice for both staff and patients.

Any confusion observed is likely related to changes in the appointment booking system (such as the introduction of online triage), rather than the underlying clinical or administrative processes. We will continue to support staff to ensure patients receive clear, consistent information. At this time, based on my review and investigation, I have not identified any discrepancies in the information provided to me regarding this process. However, I welcome Healthwatch to share any specific observations they may have that could help highlight where any inconsistency might exist.

**4) Outside the practice, the opening hours state the hours they are open, but not the days. We recommend this is updated clearly to state what days and times the practice is open, as well as what to do if they are closed. It may also be helpful to note that the practice does offer extended hours on some days.**

**Practice Response to Opening Hours Signage Recommendation:**

We appreciate the recommendation regarding clarity of our opening hours displayed outside the practice. The current permanent signage attached to the building, referenced in the report, includes outdated times that do not reflect our current schedule.

We have previously attempted to remove or update this fixture; however, due to the age and condition of the mounting hardware, this has proven challenging. We will proceed with removing the incorrect times to avoid any confusion.

To ensure patients have easy and immediate access to accurate information, we have added the current opening times to the front doors of the practice. However, these details have not been added to the permanent external fixtures due to logistical challenges with updating them with damaging the building.

The practice operates every working day during standard hours, and these opening days remain consistent and unchanged as per NHS England guidelines to opening contracted hours. While we understand the suggestion to add further details such as extended hours and instructions for when the practice is closed, updating permanent external signage is difficult and involves significant constraints and we have taken the time due to recommendations to explore the update with the printers and the owner of the building.

We continue to provide clear and up-to-date information on opening times and out-of-hours procedures through other channels such as our website, appointment letters, and internal signage within the practice.

**5) We were unable to find the complaints information displayed in the practice during our visit, we recommend that this is displayed clearly in the waiting areas in an accessible format. It may also be helpful to display these in different languages or have copies of these available upon request.**

**Practice Response to Complaints Information Display Recommendation:**

We were surprised to learn that complaints information was not observed during the visit, as signage is displayed prominently on each floor between the lifts. Following recent management updates, we have replaced old signage featuring the previous practice managers name with updated signs reflecting the current management team these are being laminated and readed in the waiting areas, with the option to provide more informal feedback with the addition of new suggestion boxes displayed centrally on each floor as the previous suggestion boxes were outdated.

To reduce confusion caused by an excess of posters, many notices have been transitioned to digital display screens throughout the building. However, complaints information has always been maintained and is now will also be featured on digital screens additionally for greater visibility, especially for patients who may not notice wall signage.

Additionally, suggestion boxes are available within the practice for patients wishing to provide feedback or raise concerns, practice feedback in writing. Our website also offers multiple channels for patients to submit compliments, complaints, suggestions, or to express interest in joining the Patient Participation Group (PPG), further encouraging patient voices to be heard.

We are always open to adding further signage or alternative formats to enhance the accessibility and visibility of complaints information for all patients if required.

**6) We recommend there be information displayed in the waiting room stating that patients can request a private space to talk, if they would prefer this. Patients have expressed concern particularly following the change to a triage system, there may be more opportunity for privacy issues to arise, and patients may not want to share details of their condition at the reception desk.**

#### **Practice Response to Privacy and Private Space Request Recommendation:**

We recognise the importance of patient privacy, especially following the introduction of the triage system, and the need to support patients with additional needs.

The practice has recently completed staff training focused on understanding and accommodating patients who require private or quieter spaces to express themselves, particularly those with additional needs such as autism. The practice has been awarded an Autism Awareness badge in recognition of this training.

To support this, signage informing patients that they can request a private space is now clearly displayed at each reception area across all floors. Reception staff are also trained to proactively offer private conversations when appropriate, ensuring all patients feel comfortable and respected when sharing sensitive information. We are committed to fostering an inclusive and supportive environment where all patients feel understood and respected, and we continuously seek to improve staff skills to meet diverse patient needs.

**7) Staff expressed an interest in more face-to-face training sessions as they find this a helpful learning style; we also recommend that staff complete more in-depth training on disabilities and patients who have communication needs e.g. language barrier, elderly**

#### **Practice Response to Staff Training Recommendation:**

We acknowledge the value of face-to-face training, as expressed by our staff, who find this approach particularly effective for learning.

The practice actively participates in a variety of training opportunities, including those offered by Northeast London (NEL) Clinical Commissioning Group and other providers. We hold Protected Learning Time (PLT) sessions quarterly, during which the practice closes for approximately four hours to allow staff to engage in in-depth training.

Due to the COVID-19 pandemic, many training sessions and professional development activities have shifted to online formats. Despite this, we remain committed to ensuring staff receive comprehensive training. Mandatory training

**8) The lifts are often out of order and are prone to breaking due to being old. We recommend a review of this, as regular breakdown can cause a significant impact to patients with access needs attending appointments.**

#### **Practice Response to Lift Maintenance Recommendation:**

We acknowledge the concerns regarding the reliability of the lifts and the impact this can have on patients with access needs.

While lift engineering is not our area of expertise, we have investigated the reported issues and engaged with the current maintenance company, although their responses have been limited. To ensure a thorough assessment, we have arranged for an independent third-party inspection of the lifts and are actively in discussions with the landlord regarding necessary repairs or upgrades.

It is very rare that both lifts are out of order at the same time; typically, at least one lift remains operational to assist patients. In the unlikely event both lifts are unavailable, we have developed a strategy to manage the situation. This includes a protocol to prioritise patients with mobility difficulties by ensuring they are seen on the ground floor or in areas accessible without using the lifts, minimising disruption to their care.

We are committed to resolving these issues promptly to maintain safe and accessible services for all patients. We are currently still exploring where the issues lay in terms with the lift but are confident will be rectified with the persistent approach we have taken.

**9) The PPG is a useful tool in gaining feedback from patients however most patients aren't aware of the group. We recommend advertising the PPG to all patients and ensuring it's organisation is inclusive e.g. thinking of shift workers or parents, to encourage uptake in members.**

**Practice Response to PPG Awareness and Engagement Recommendation:**

We recognise the value of the Patient Participation Group (PPG) as a tool for gaining patient feedback. To increase awareness, we have added additional signage throughout the building to inform patients about the PPG and how to get involved.

We continue to use SMS messaging platforms annually to promote the group and encourage new members to join. Information about the PPG is also widely available on our website and is actively shared with Healthwatch and within the local community.

Although we actively ask patients for their preferences regarding participation, feedback indicates that many from the wider patient population choose not to attend for various reasons. To accommodate this, we cater to both virtual meetings and festive face-to-face events for current PPG members. And have recently received feedback that the active members prefer the virtual settings and gather at the festive time.

We remain committed to adapting to the evolving needs of the group and ensuring the PPG remains inclusive, accessible, and responsive to patient input.

Our primary focus remains on delivering high-quality patient care, and we actively promote patient engagement as an essential part of that commitment.

**10) The signage within the building is limited and can be confusing for patients when accessing the practice. We recommend clearer signage to direct patients around the building and ensuring there is no confusion with external services on other floors.**

**Practice Response to Signage Recommendation:**

There have always been signs on each floor within the building, including clear markers in the shared staircase area and doors indicating whether the services on that floor are NHS or provided by Evolve who share the same facilities as the practice.

Additionally, we have recently added further signage, including signs identifying consultation rooms that are visible from the waiting areas, as well as signs directing patients to the stairs.

We will continue to review and improve signage where possible to ensure patients can navigate the building easily and without confusion.



# Message from the Neaman Practice:

## **Thank You to Healthwatch !**

We would like to sincerely thank Healthwatch for attending the Neaman Practice and for their continued support to both our patients and the practice over the years. Your dedication to listening to the patient voice and promoting improvements across services is greatly appreciated.

We invited Healthwatch to visit at a time when the practice was undergoing several significant changes, particularly due to a new management structure and patient access due to change in the appointment triage process. Since then, we have worked hard to address many of the items highlighted in your report and continue to build on the feedback received.

We were particularly grateful for the eye-catching and thoughtful observations made from a service user's perspective. While there may not have been a large volume of feedback, the quality and insight it provided have been very helpful in guiding further improvements.

We would be very pleased to welcome Healthwatch back to the practice at any time to see the progress we have made and to continue this valuable partnership.

We remain committed to providing a high standard of care and continuously improving the services we offer. We would like to thank all those who contributed to this review and welcome any further suggestions or feedback from patients, Healthwatch, and our Patient Participation Group (PPG) members. If there are any concerns or ideas for improvement, we encourage them to be shared directly with the management team. We are always open to constructive feedback and will actively work to make positive changes wherever possible.

*Sinead R Downes – Operations Manager*

# Appendix

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## Questions for GP's/Management at the Neaman Practice

1. **Name of Authorised Representatives (if applicable):**
2. **Date:**  
Appointment booking:
3. **When booking an appointment, please explain the methods available to patients.**
4. **Do patients have the option of a face to face or telephone appointment and how do they specify this?**
5. **Is there any special provision in place for people known to have other needs? (such as disabled people, those without computers/phones, or foreign language speakers)?**
6. **Does the practice provide access to interpreters if needed? What is the process for this?**
7. **Do you have a procedure for patients that regularly cancel or don't attend appointments?**
8. **Do you have a system in place to monitor phone calls? Does this work well?**
9. **What do you feel works well about the new booking system?**
10. **What do you feel could be improved?**

## Consultations:

11. **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?**
12. **Are patients asked if they have any preferences about the consultation method (such as in person, telephone, or video)? Are the preferences taken into account?**
13. **Is there any flexibility for people who work, or look after school-aged-children (either when booking or attending appointments)?**

- 14. How long are patients allocated with the doctor? What is the procedure if this runs over? E.g how are other patients informed.**
- 15. Do you know if telephone appointments are generally on time, and is there any procedure if running late?**
- 16. What do you feel works well about the consultation system?**
- 17. How long is the emergency appointment slot? What is the process for this being booked?**

### **Engagement and Feedback:**

- 18. Are patients encouraged to give feedback (such as compliments or concerns)? If so, how?**
- 19. Is there a PPG? If so, how many attend etc?**
- 20. Is there a clear complaints process in place? Is the complaints policy on display in the waiting area?**
- 21. What is the procedure for dealing with complaints?**

### **Staffing:**

- 22. How many GP's and nurses are employed here?**
- 23. Do you recall having received an induction?**
- 24. Have you received any training, including recently?**
- 25. Are you aware of the Accessible Information Standard (AIS)?**
- 26. Have you been provided with training on how to support patients with:**
  - Visual impairments: blind & partially sighted
  - Online
  - Face to face
  - Both
- 27. Hearing impairments: profoundly deaf & hard of hearing**
  - Online
  - Face to face
  - Both

## **28. Learning Disabilities**

Online

Face to face

Both

- 29. How would a patient that has a specific need be identified? i.e had hearing impairments, visual impairments or learning disability?**
- 30. Is there a hearing loop in the surgery, if there is what type of loop is it?**
- 31. How would a patient with a hearing impairment know that they had been called for their appointment?**
- 32. Do you feel that management are supportive towards staff generally?**
- 33. Regarding your work and working conditions, do you feel that anything could be improved?**
- 34. Can you tell me what you enjoy most about your job?**
- 35. And what do you find most difficult?**

## **Governance and information**

- 36. Have you received GDPR training? When was that?**
- 37. How do patients who aren't digitally literate (don't have a phone or computer) receive test results, information about vaccinations or screenings?**
- 38. How are people made aware of the other services offered e.g. Pharmacy First Scheme and the Physio First scheme?**
- 39. How many patients are registered at the surgery?**
- 40. (If talking to a GP) How many patients do you see on an average day?**

## **Questions for Staff at the Neaman Practice**

**1. Name of Authorised Representatives (if applicable):**

**2. Date:**

Appointment booking:



3. **When booking an appointment, please explain the methods available to patients.**
4. **Do patients have the option of a face to face or telephone appointment and how do they specify this?**
5. **Is there any special provision in place for people known to have other needs? (such as disabled people, those without computers/phones, or foreign language speakers)?**
6. **What do you feel works well about the booking system?**
7. **What do you feel could be improved?**

### **Consultations:**

8. **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?**
9. **Are patients asked if they have any preferences about the consultation method (such as in person, telephone, or video)? Are the preferences taken into account?**
10. **Is there any flexibility for people who work, or look after school-aged-children (either when booking or attending appointments)?**
11. **Do you know if remote appointments are generally on time, and is there any procedure if running late?**
12. **What do you feel works well about the consultation system?**
13. **How long is the emergency appointment (call) slot?**
14. **How are people made aware of the other services offered e.g. Pharmacy First Scheme and the Physio First scheme?**

### **Engagement and Feedback:**

15. **Are patients encouraged to give feedback (such as compliments or concerns)? If so, how?**
16. **Is there a clear complaints process in place? Is the complaints policy on display in the waiting area?**

## Staffing:

17. Do you recall having received an induction?
18. Does the practice provide access to interpreters if needed?
19. Are you aware of the Accessible Information Standard (AIS)?
20. Have you been provided with training on how to support patients with:  
Visual impairments: blind & partially sighted  
Online  
Face to face  
Both
21. Hearing impairments: profoundly deaf & hard of hearing  
Online  
Face to face  
Both
22. Learning Disabilities  
Online  
Face to face  
Both
23. How would a patient that has a specific need be identified? i.e had hearing impairments, visual impairments or learning disability?
24. Is there a hearing loop in the surgery, if there is what type of loop is it?
25. How would a patient with a hearing impairment know that they had been called for their appointment?
26. Do you feel that management are supportive towards staff generally?
27. Regarding your work and working conditions, do you feel that anything could be improved?
28. Can you tell me what you enjoy most about your job?
29. And what do you find most difficult?

## Questions for patients at the Neaman Practice

### Appointment booking:

1. How do you book your appointments?
2. Were you able to make the appointment easily? (is the online system easy to use? Did it take long to get through on the phone? Was the appointment at a convenient time for you?)
3. Were you happy with the length of the wait between trying to make the appointment and seeing the GP?
4. Were you offered an appointment with your usual doctor? A nurse practitioner? A specific service? (asthma clinic etc)
5. If you needed to book a follow up appointment, how easy was it do to?

### Consultation:

6. Have you had online/phone consultations?
7. If so, how have the online/phone consultations been in terms of quality, duration and scheduling?
8. Have the scheduled appointments (online/virtual/phone/in person) been on time?
9. Are you happy with the quality of your treatment? Are there any areas of concern or improvement that you can identify?
10. Have you been given choice regarding where you can attend your specialist appointments? For example, X-RAYS, physio and blood tests.

### Engagement, Feedback and Experience:

11. Are you aware of the feedback procedures available at the surgery? (For example, compliments or concerns).
12. Are you aware of the complaints process in place? Have you noticed the complaints policy display in the waiting area?

- 13. What is your general experience of dealing with the staff members? (Do you feel supported, well-heard, treated with dignity and compassion?)**
- 14. Are you aware of the Patient Participation Group (PPG) at the Neaman Practice?**
- No  
Yes, I have attended  
Yes, I have not attended
- 15. Have you ever received a text message from the Neaman Practice inviting you to their PPG meetings?**
- Yes  
No
- 16. Are there any other comments you would like to make?**





# healthwatch

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