



Enter & View

Three Spires GP Surgery

healthwatch
Cornwall

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1 Introduction

1.1 Details of visit

Service provider: Three spires GP practice

Service Address: Truro Health Park, Infirmary Hill, Truro

Date: 14th July 2026

Authorised representative: Nigel Oakes

1.2 Purpose of visit

The purpose of this Enter and View visit was to observe how patients experienced the practice, hear directly from patients, carers and staff, identify examples of good practice and highlight any opportunities to improve access and patient experience

1.3 Acknowledgements

Healthwatch Cornwall would like to thank patients and staff who took the time to share their experiences during this visit.

1.4 Disclaimer

This report relates to findings observed on the specific date above and is not a representative portrayal of the experiences of patients, carers and staff, only an account of what was observed and contributed at the time of the visit. Findings should be interpreted as a snapshot of observations on the day of the visit and not a judgement of clinical effectiveness.

1.5 About Healthwatch Cornwall

Healthwatch Cornwall is an independent organisation committed to amplifying the voices of Cornwall's residents in the planning and delivery of health and social care services. Through public engagement, we gather their views and experiences with these services. We ensure these perspectives are represented in decision-making processes both locally and nationally, driven by the belief that community feedback is vital to improving standards of care.

1.6 What is Enter and View?

As a local Healthwatch we are authorised to "Enter and View" health and social care services through the Local Government and Public Involvement in Health Act 2007 and Local Authorities Regulations 2013 (part 4). These services can include hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies.

Enter and View visits are an opportunity to see services in action, listen to and understand the experiences of individuals who use them, and make recommendations where there are areas for improvement. The visits are organised based on feedback received about individual services or in response to themes identified in our research.

2 Visit Summary

Conversations with staff

Healthwatch Cornwall spoke with 5 administrative and clinical support staff during the visit

Conversations with patients

Twenty patients and carers were asked about their experience of the practice

Observation of facilities

Observations were made throughout the visit, focussing on the condition of the facilities, administrative procedures and patient experience.

Overall, observations on the day and feedback from patients was largely positive and noted good practice alongside areas for improvement.

3 Service overview

Three Spires medical practice is in shared premises as part of the larger Truro Health Park. This is located close to the city centre of Truro. The practice operates from a single site and has approximately 17,500 registered patients, mostly from Truro city and surrounding semi-rural areas. The practice team has 14 GP's, 4 paramedics and 7 nursing staff, supported by administrative and domestic teams. The practice was rated as overall 'Good' when inspected by CQC in 2022.

4 Observations

Truro Health Park had a large, shared car park serving Three Spires Medical Practice and other services within the building. There were no free spaces during the visit and patients were seen waiting for spaces to become free. The car park appeared to operate on a 'one in, one out' basis. There were several disabled parking bays, but these were all full for the duration of the visit. There is a bus stop located at the entrance to the car park and several busses were seen arriving and departing during the visit.

On entry to the building there are numerous signs indicating the location of the practice. Accessible lifts were available and in working order. There is an independently operated pharmacy located in the building, which was open during the visit. There is a cooled vending machine in the building, selling snacks and drinks, including some low sugar options. Single sex toilets were available, as were disabled toilets adapted for patients with limited mobility.

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The practice reception desk has an automated check in screen adjacent to the desk. Patients were observed using this during the visit and three observed were having difficulty in

accessing their appointment details, which required them to join a queue to speak to a member of the reception team. A volunteer team member was seen to be approaching patients in the reception queue and asking if they needed help using the automated booking in system.

The reception desk was staffed throughout the visit. Staff were observed communicating clearly with patients and assisting with queries. During the visit, two patients were seen to be displaying signs of frustration with the reception team. The reception team staff spoke calmly, explained processes, and continued the interactions without escalation. Both patients left the reception area after a discussion, and one was heard to apologise for their behaviour. At no point did the interaction escalate or raise any safeguarding concerns and it appeared that the reception team were confident in their dealings with the patients. Other staff interactions observed during the visit appeared similarly respectful and patient centred. No safeguarding incidents were observed or concerns reported during the visit.

There were notices throughout the reception areas and waiting room, containing information on local support groups, selfcare, safeguarding and results of patient feedback. All notices were displayed neatly and were in date.

There was a separate desk and chair area that had a comments and suggestions box, there was a supply of pens and paper as well as family & friends feedback forms.

Electronic information screens displayed information for patients when it was time for their appointment, they showed the patient name, which member of the clinical team they were seeing and in which room. These messages were displayed for a short period and then disappeared. Two patients told us they had been unable to read the message, and one other told us that they only managed to read part of the message. Reception staff were seen to help in these situations and on one occasion a member of healthcare staff was seen to enter the waiting room and call a patient by name.

5 Patient feedback

Digital access

Patients described mixed preferences for accessing appointments, with some valuing the convenience of online triage and booking while others preferred telephone contact. Patients described having a choice between online and telephone access. Those unable or preferring not to use the online system reported receiving support from the practice. Six patients told us that they preferred to not use any on-line service to make an appointment. One said, 'I don't have any technology so can't go online, but it's fine as they know I can't, so they are always happy for me to ring and they go through the form for me'. Another said, 'I'd rather talk to a

human and don't really trust the technology'. They went on to say, 'I think it's quicker to ring, so I'm sticking to that'.

Twelve patients/carers spoke in positive terms about the on-line triage system. One told us, 'I wasn't keen at first, but once they had showed me how to use it, I was happier and now I'm a convert'. A carer for a young child said, 'It's a brilliant system, I went online and got an appointment for 45 minutes later, it's straightforward and easy to navigate'.

Access to car park

Ten patients told us that car parking had presented a problem. One told us, 'I came 45 minutes early for my appointment as you can never park, so I just wait for someone to leave'. Another patient described the parking situation as 'horrendous'. They told us, 'There seems to be so much wasted space on this site, I don't know why they can't make more parking spaces and I'm never sure where else I can park if I can't get in'. One patient told us they had given up driving to the surgery and were consider moving practices to somewhere with better parking.

Experience of care

All twenty patients and carers spoke in positive terms about their experience of care. Twelve described the staff as kind and caring. A carer for a young child told us, 'They are brilliant here, they take the time to listen and explain everything to you'. Another patient said, 'I got to see the paramedic, and they were amazing, so professional and a really lovely person, I feel properly looked after'.

Two patients told us that being able to see a female Doctor was important to them. One said, 'I really appreciate that I can see a lady Doctor, it makes a huge difference to me discussing my problems with her'. Another commented, 'I'd struggle with a male Doctor and would feel a lot less comfortable'.

Four patients commented on the positive attitude of the reception staff. One told us, 'It's so lovely to be greeted by a happy smiling face, they always seem to be bright and cheerful, even though I'm sure they have to put up with a lot'. Another said, 'I came on the wrong day but the lady in reception sorted it out for me so I could wait and be seen later this morning, I'm so grateful, they are so accommodating'.

A patient who had recently moved to the County commented 'I'd say it's a hundred times better than my last doctors'.

Timeliness of appointments

Three patients told us that their appointment was running late, in one case by 20 minutes. One said, 'The notice tells you to report it if you're more than half an hour late, but that's quite a long time to be kept waiting'. Another said, 'It's frustrating, because I rushed to get here

because I couldn't park and now I'm just sat waiting, so it would be all the same if I'd turned up late'.

6 Staff feedback

Management reported that three GPs reviewed care requests and assigned an urgency level, with urgent cases offered same-day care and routine requests managed according to clinical priority and demand.

Management also described challenges associated with operating from a large shared building, particularly in relation to parking and signage.

Staff spoken with described positive working relationships between the clinical and administrative teams. They were also able to explain the safeguarding reporting and escalation procedures relevant to their roles.

7 Recommendations

Healthwatch Cornwall have offered some recommendations based on observations and feedback from both patients and staff to improve experiences in the home.

- 1) Patients told us they experienced difficulty finding a parking space, with some arriving significantly earlier than their appointment time or waiting for a space to become available. This contributed to delays and frustration for some patients.
The practice may wish to consider whether providing additional information about nearby parking options, including accessible spaces, could support patients in planning their visit and reduce stress on arrival.
- 2) Some patients reported they were unable to read the information displayed on the electronic screens in the waiting rooms before it disappeared, and others reported only being able to read part of the message. The practice should review the accessibility of information displayed on waiting-room screens, including the length of time messages remain visible, text size, contrast and the availability of an audible or staff-supported alternative for patients who cannot read the message
- 3) Patients were observed having trouble using the electronic check-in screen, with some needing to queue at reception for assistance. This may contribute to delays and increase demand on reception staff. The practice may wish to consider reviewing the functionality and usability of the system, as well as how patients are supported to use it on arrival.

8 Provider feedback

Healthwatch Enter & View Recommendations Response

- 1) Patients told us they experienced difficulty finding a parking space, with some arriving significantly earlier than their appointment time or waiting for a space to become available. This contributed to delays and frustration for some patients. The practice may wish to consider whether providing additional information about nearby parking options, including accessible spaces, could support patients in planning their visit and reduce stress on arrival.**

New bus stops have recently been installed outside the Health Park on the Infirmary Hill entrance. The latest bus timetables are available on our website.

We previously communicated directly with patients regarding the parking difficulties at the Health Park. However, it became apparent that highlighting the issue in this way was increasing concerns and contributing to unnecessary anxiety about parking availability.

We would like to reassure patients that we continue to regularly raise their concerns with the Health Park building management team. They are fully aware of the parking challenges and are actively exploring options to improve the situation.

We would also like to confirm that our staff are not permitted to use the patient car park, ensuring that parking spaces remain available for patients and visitors.

- 2) Some patients reported they were unable to read the information displayed on the electronic screens in the waiting rooms before it disappeared, and others reported only being able to read part of the message. The practice should review the accessibility of information displayed on waiting-room screens, including the length of time messages remain visible, text size, contrast and the availability of an audible or staff-supported alternative for patients who cannot read the message**

We have increased the length of time that a patient's name, clinic room, and clinician details are displayed on the electronic patient call screen. Following a trial period, we found that this change has made the information significantly easier to read.

We also recognise that some patients may be unable to use or read the electronic patient call screen. In these circumstances, our clinicians are happy to collect patients personally from the

waiting area. Patients simply need to let one of our receptionists know when they arrive for their appointment, and arrangements will be made accordingly

- 3) Patients were observed having trouble using the electronic check-in screen, with some needing to queue at reception for assistance. This may contribute to delays and increase demand on reception staff. The practice may wish to consider reviewing the functionality and usability of the system, as well as how patients are supported to use it on arrival.**

We will ensure that the electronic check-in screen is fully operational each morning before the and will carry out regular checks throughout the day. We will also review the instructions provided to patients to ensure they are clear, accessible, and easy to follow. In addition, we will carefully consider patient feedback to better understand any difficulties they experience when using the screen, identify specific areas for improvement, and continue to enhance the check-in process to make it as straightforward and user-friendly as possible.

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