Enter & View

Wadebridge & Camel Estuary Practice

healthwatch Cornwall

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1 Introduction

1.1 Details of visit

Service provider: Wadebridge & Camel Estuary Practice
Service Address: Brooklyn, Wadebridge, PL27 7BS
Date: 22nd June 2026
Authorised representative: Nigel Oakes

1.2 Purpose of visit

The purpose of this Enter and View visit was to observe the environment and care processes within the practice, hear directly from patients/carers and staff about their experiences on the day, and identify opportunities to improve patient wellbeing and quality of life.

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 all residents 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 the Practice Manager and members of the administrative support team.

Conversations with residents
Eighteen 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

Wadebridge & Camel Estuary Practice is situated near to the town centre and is accessed via a short driveway. There is no onsite parking, there are several pay and display car parks within a short distance of the surgery. The practice serves a population of approximately 8,000 registered patients, many of which live in rural or semi-rural areas. The practice has a hub at St Minver located in a shared space at the community centre. This hub is open 2 mornings a week. The practice was rated as 'Good' when inspected by the CQC in 2024.

4 Observations

The reception area had a large number of chairs, including some which were suitable for patients with limited mobility. There was an electronic signing in screen, angled away from the waiting room area. Patients were observed using this independently during the visit. There was a wall mounted hand sanitiser unit, but this was empty. There were a large number of informational posters and leaflets throughout the waiting room. All appeared to be in date and were neatly displayed. There was also a wall mounted television displaying healthcare information on such topics as vaccinations, mental wellbeing and tips for dealing with hot weather. A family and friends/suggestion box was available, along with pens and paper to enter comments.

There were several posters explaining the practice electronic triage and booking system, along with information about technical support for patients to help them use these systems.

Healthcare staff were seen entering the waiting room and calling patients by name. Staff interactions observed during the visit appeared respectful and patient centred. Patients were supported at a pace appropriate to their mobility needs, with staff providing assistance where required.

There were male and female toilets in the reception area, both appeared clean and well stocked with sanitary items. There was also a notice advising that a more accessible toilet is also available.

Copies of a patient participation group newsletter were available in the waiting room. This contained articles on improvements to the online booking system, information on how to book blood tests at local diagnostic centres and a section on technical support sessions on offer to help patients use online surgery services.

The waiting room was not seen to have more than five patients waiting at any one time during the visit.

5 Patient feedback

Staff attitude

Sixteen of the patients and carers we spoke with described the staff as kind, caring or helpful.

A small number of patients reported dissatisfaction with the reception team in the past, one told us, 'I felt that they were talking down to me because I couldn't use the electronic booking system', they added, 'When I got to see the Doctor the care was brilliant, but the receptionist spoilt the overall experience'. Another patient told us that they thought the staff were inflexible on occasion, they said, 'I couldn't get the appointment I needed and was told by reception that I had to keep ringing in and when I asked why, they said the system wouldn't let them book me in, which seems wrong'.

Access to service and surgery

Patients raised concerns regarding the waiting times for non-urgent appointments to see a clinician. Three patients told us that they thought the waiting times to be seen were too long, one said, 'I just wanted to have a quick word with the Doctor, but you can't get an appointment for that without waiting for weeks.' Another patient said, 'I need regular injections, but you can't book them that far in advance and I'm sometimes late in getting them'.

Three patients and one carer told us that the lack of parking at the surgery was a problem for them, one told us, 'I care for a disabled person, and we have to walk here from the car park across the road as there are usually vans parked in the entrance'. Another said, 'If you live here you know parking can be a problem so you must factor that in for your visit. I sometimes get the bus, which is better but it can get very busy in the summer.'

Access to electronic systems

There was variation in patient experience of the booking electronic system, with some describing difficulty completing forms, while others reported the system worked well for their needs

Ten patients expressed concerns around the booking of appointments via the online system and the difficulties with completing the online form. One said, 'I don't use the internet, so I have to ring up and wait in a queue then get one of the receptionists to fill in one for me.' Another said, 'The system they've got isn't much good, it makes you put in all these details then tells you to go to A&E if you've hit certain buttons, then you have to start all over again'.

A patient told us that the electronic system was in their opinion, 'Not fit for purpose'. They said, 'I've got a longstanding condition that affects my whole body, so I find it difficult to point to the exact point on the picture that comes up, so I end up ringing in and get the receptionist to fill it in for me'.

Eight patients told us they had no issue using the electronic triage and booking in system, one said, 'You've got to move with the times, I get my daughter to do it for me and it seems to work well, the system told me I had an appointment with the paramedic, which is exactly what I needed today, so I'm happy'

6 Staff feedback

Management team

The practice manager told us that the surgery had a stable workforce, used locum staff from a regular pool and did not have the need to use agency staff. We were told that vacancies could generally be filled without issue and that the surgery was currently in the process of recruiting two reception staff and a salaried GP.

We were told that most patient complaints received by the surgery were about the length of wait for routine appointments and that plans were being developed to address this issue with the introduction of an improved triage system.

The practice manager told us that space was a challenge and that there were no opportunities for extending the surgery due to its location. They told us that reconfiguration of the internal space had created additional clinical areas.

We were also told that the practice worked closely with their patient participation group, which is a self-led initiative that issues a quarterly newsletter.

Administration team

Staff described a supportive working environment and positive team culture. One member of the team told us that they had been instructed to urge patients to use the electronic triage and booking system wherever possible but that there were certain patients who they would always fill in a form for on their behalf. They said, 'Some patients just don't want to use the system but once we've gone through it with them, they usually end up liking it. It can be a bit frustrating, but it takes time away from the reception duties if we have to fill in a form for them'.

7 Recommendations

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

1) The practice may wish to review whether additional information or signage regarding nearby parking, including accessible parking options, could support patients in planning their visit. The practice may also wish to consider whether there are opportunities to discourage obstruction of the entrance to support safe access for patients with mobility needs.

2) The practice may wish to review how patients who experience barriers to using the electronic triage system are supported, ensuring that appropriate alternative access routes remain available and that patients continue to receive assistance where required.

3) Patients reported long wait times for routine appointments and issues with making regular appointments for planned procedures. The surgery may wish to reflect on the appointment booking process to avoid the risk of long wait times

4) A hand sanitiser dispenser was found to be empty. Hand hygiene is an important step in reducing infection risks so the surgery may wish to review the process for checking and filling sanitiser stations.

5) A small number of patients described negative interactions with reception staff. The practice may wish to review this feedback to determine whether any additional support, guidance or training would help ensure all patients receive a consistently positive experience.

8 Provider feedback

1. Signage is already in place to discourage parking within the designated turnaround area. We will also ask the Patient Participation Group (PPG) to include an article in their next newsletter highlighting the availability of nearby parking and the importance of keeping the turnaround space clear for its intended use.

2. Patients who are unable to access the online booking system can contact the surgery by telephone, and a member of the reception team will complete the form on their behalf. In addition, we are exploring the possibility of investing in technology for the waiting room that would enable patients to access and complete the online form independently while on site.

3. Since the Healthwatch visit, our reception team has worked exceptionally hard and made significant progress in reducing waiting times for patients. The practice is also exploring the implementation of an alternative online triage platform to further improve access and efficiency, subject to approval from the Integrated Care Board (ICB).

4. The hand sanitiser dispenser identified during the visit is obsolete and will be removed. Alternative sanitiser dispensers are available at the front desk. Ensuring that these dispensers remain adequately stocked forms part of the practice's daily opening and closing procedures.

5. We are sorry to hear that some patients feel they have had negative interactions with members of the reception team. We encourage patients to raise any concerns directly with the practice so that they can be reviewed appropriately. This allows us to discuss individual experiences with staff members and provide additional support, guidance, or training where necessary to ensure a positive patient experience.

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