

Hampton Hill Medical Centre

Enter and View Report



94-102 High Street,
Hampton Hill, Hampton
TW12 1NY

Visit Dates: Monday 21st and Tuesday 22nd July 2025

Introduction

This report outlines our findings from two Enter and View visits to Hampton Hill Medical Centre in July 2025. It presents a literature review, including relevant quantitative data. We then give detailed feedback summarising our observations, conversations with patients and conversations with staff. At the end of our report, we make recommendations to the practice and include their response.

We thank:

- Hampton Hill Medical Centre for their open co-operation in this process;
- Patients who gave us their honest feedback and thoughts; and
- Our Authorised Representatives for taking part in this research – Suzanne Kapelus, Katie Rogers, Phil Bunnell and Bethel Tezara.

We hope that this is a useful and insightful report that provides assurance about the service delivered by Hampton Hill Medical Centre.

Background

Healthwatch Richmond is a charity independent from the NHS, established by the Health and Social Care Act of 2012. Our purpose is to gather patient experiences in order to inform improvements in health and social care services. As part of the legislation establishing Healthwatch, we are entitled to “Enter and View” health and social care premises.

In practice, Enter and View consists of a team of trained Authorised Representatives visiting health and social care premises to understand how services are being provided. This includes talking to patients and staff and making observations about the service. Importantly, Enter and View is not an inspection. Authorised Representatives have a lay perspective and focus on understanding the views and experiences of staff and service users.

General Practice Patient Survey 2025

The General Practice Patient Survey (GPPS) is an independent survey run by Ipsos on behalf of NHS England. It is designed to give patients the opportunity to give feedback about their experiences of their GP practice and other local NHS services. The survey is exclusively quantitative and only collects data from a small number of patients. In 2025, 121 patients from Hampton Hill Medical Centre completed the survey.

The GPPS results in 2025 for Hampton Hill Medical Centre included the following:

- 42% of patients said it was very easy or fairly easy to contact their GP practice on the phone;
- 81% of patients said that the reception and administrative team was helpful; and
- 71% of patients described that overall experience of Hampton Hill Medical Centre as very or fairly good.

General Practice Appointment Data

Every month, NHS England publishes data recording how many appointments take place at GP practices. For Hampton Hill Medical Centre, the May 2025 data shows:

- 8,675 patients were registered at Hampton Hill Medical Centre;
- 2,916 appointments took place in May 2025, ranking 13 out of 23 in Richmond for appointments per 1,000 patients;
- 35.8% (1043) of these were same day appointments; and
- 28.8% (841) of appointments took place more than 15 days after the patient requested an appointment.

Healthwatch Richmond GP Practice Patient Survey

In Spring 2024, Healthwatch Richmond ran an online survey to find out what local residents thought about contacting their GP practice, remote consultations and additional roles in general practice.

We received 116 responses from patients registered at Hampton Hill Medical Centre. Key findings include:

- 70% of patients reported a negative experience phoning the practice;
- 56% of patients reported that their needs were fully met when they last interacted with Hampton Hill Medical Centre; and
- 71% of patients reported having a positive experience of an in-person appointment.

Care Quality Commission Inspections

The Care Quality Commission (CQC) carried out an inspection of Hampton Hill Medical Centre in November 2019. The practice was rated as good overall and as requires improvement in 'Well Led' because several staff had not completed essential training. The CQC carried out an announced desk based, focussed inspection in August 2020 as a follow up. They found that staff had completed their mandatory training and rated 'Well Led' as good (CQC, 2020).

Please note that at the time of writing this report, the full inspection report from November 2019 cannot be found on the CQC's website. This has been raised with the CQC and we are awaiting their response.

Methodology

The Enter and View programme began with background research of the practice, outlined above. This was done using NHS, CQC and practice reviews that are available online as well as Healthwatch Richmond's previous research and our patient experience library.

Following the research, a visit was arranged with the GP practice manager to allow trained Authorised Representatives to visit the practice, conduct interviews with both staff and patients, and make observations about the premises. Two Enter and View representatives conducted announced visits on:

- Monday 21st 2025 July: 8:30am - 11:00am
- Tuesday 22nd July: 2:00pm - 4:00pm

Data was gathered from semi-structured observations undertaken by the authorised representatives. We conducted semi-structured interviews with 30 patients and 5 members of staff. To the fullest possible extent, confidentiality of responders has been retained by removing identifiable details from quotes.

We also concurrently ran an online survey asking patients about their GP practice. This online survey was advertised through posters put up in the GP practice, through our newsletter and on social media. We received 14 responses from patients registered at Hampton Hill Medical Centre. These responses have been incorporated into the report as quotes.

Limitations

The observations and feedback presented in this report reflect the two visits Healthwatch Richmond conducted. The methodology used is intended to provide assurance rather than allow for comprehensive analysis of the practice's performance.

Observations

Entering the Building



Image 1 – street view of Hampton Hill Medical Centre

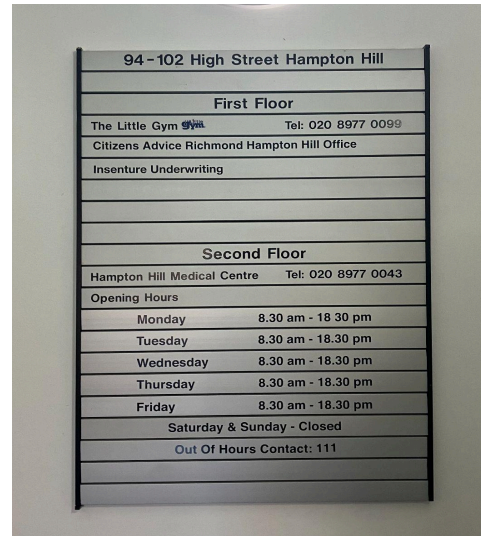


Image 2 – sign at the entrance

Hampton Hill Medical Centre is located on the second floor of a purpose built building. Within the same building, there is a gym, a 'Little Gym' for children, a Citizen's Advice Bureau and an office for an insurance firm. Outside, there are a number of parking spaces, including one accessible space. There is a clear sign on the street advertising the practice, as can be seen in the photo above.

There is a raised pavement surrounding the front door of the building, as can be seen in the above photo. We did not see a dropped curb on our visits, which may present concerns for wheelchair users. The front door was automatic.

Inside the building, there was a sign on the wall with directions to Hampton Hill Medical Centre and the other services in the building (image 2). There was a set of stairs and two lifts. One lift was out of order on Monday 21st and Tuesday 22nd of July, however, the other lift was still in use. Inside the lift, the button for the 2nd floor was unlabelled which caused some confusion for our Authorised Representatives.

On both visits, we exited the one operational lift on the 2nd floor. There is a door between the lift corridor and the practice. This door can be opened with the push of a wheelchair-accessible button or manually.

The turn from the one operational lift to the entrance of the practice was very tight. While it was not brought up by any patients, we do have concerns about wheelchair and pram access due to the limited space for maneuvering around the corner.

Reception

Inside the practice, the first point of contact is the reception area, where patients are greeted by the receptionist behind a large plastic screen. There is enough room for three receptionists to attend to patients. There was nothing affixed to the plastic screen which could impair communication; however, some patients remarked that they had trouble hearing the receptionist through the screen:

"The people behind the screen don't talk loud enough and it is difficult to hear through the screen anyway. It is a problem for older people who are hard of hearing. They just need to speak louder."

A hearing loop system was also present at the reception desk, however it was not easily visible.

The receptionists were wearing lanyards with a name tag; however, their name was written in small font and this was hard to see.

There is a door to the right of the reception desk which leads to the staff areas. This door is kept locked at all times as a safety measure for staff.

In the reception area, there is a table with chairs. On the table are pens and Friends and Family Test surveys. There was also a bottle of hand sanitiser on this table, which was almost empty.

There is a self-check-in screen for patients to use in the corner, next to the door to the waiting room.

Off the reception, there are two small rooms with chairs. These rooms were not labeled in any way. When we asked reception, they said that they could use these rooms if a patient wanted to discuss an issue privately. The practice manager also said these rooms could be used for breastfeeding. However, these rooms and their potential uses were not signposted to patients.



Image 3 - reception desk



Image 4 - self-check-in at reception

Waiting Area

There is a fire door between the reception and waiting area. We witnessed multiple patients struggling to open the fire door. This included patients with buggies, people with mobility issues and a wheelchair user. We raised this issue with the practice manager who said that they would like to keep the door open but it is a fire safety risk. The practice manager said that the receptionists are meant to keep an eye out and help patients if needed; however, we did not witness the reception helping patients with the door during our visits. One of our authorised representatives helped a wheelchair user and a parent with a pram. It would also be difficult for reception to see someone who needed help leaving the waiting room.

The waiting area is large with approximately 30 seats and multiple tables. The seats were comfortable and in good condition for patients. There was a mini book shelf with a selection of books. Behind the bookshelf was an information board with posters promoting the patient participation group and local services for patients. There were also two TV screens, one displayed information and one was turned off. There was no other patient information in the waiting area.



Image 5 - section of the waiting room



Image 6 - bookshelf and display board in waiting room

In our conversation with the practice manager, she said she had taken a dementia awareness course and learnt the importance of having a tidy waiting room. She reported that when she became practice manager she took down posters and leaflets. The practice manager said she wants the reception and waiting area to be “a minimal calming place.”

On our first visit, the floors were clean with no obvious debris. On our second visit, there was some debris on the floor but this is to be expected by late afternoon. On both our visits, a thin layer of dust covered the dado rails and the window ledges in the waiting room.

We sought, but did not observe, fire exit signage in the waiting room.

During both our visits, the air conditioning was on. We found the room cold and were slightly concerned about the comfort for patients.

One of the ceiling tiles in the waiting room was obviously stained from a previous leak. We asked the practice manager about this, who assured us the leak had been fixed.



Image 7 - damaged ceiling tile in waiting room

Patients were called into their appointments from two different sides of the room: the back and the right. This meant that many chairs were facing away from the clinician calling the patient's name. We witnessed one occasion where the patient didn't hear the clinician as they were seated at the other end of the room with their back towards the clinician.

There was a small room off of the waiting area labelled the 'Diagnostic Room'. This contained a blood pressure machine and a wall-mounted height rod.

Toilets

There were two patient toilets, including an accessible toilet, which were both spacious and in good condition. However, neither toilets were signposted from the waiting room which made it a challenge for our authorised representatives to find them. We did find that one of the toilets had a partly broken flush, which would be difficult to clean (image 10).



Image 8 - accessible bathroom



Image 9 - patient bathroom



Image 10 - broken flush in patient bathroom

Other Patient Areas

The corridors outside of the waiting room leading to the consultation rooms had some information boards which contained information about contraception, NHS health checks and information about the practice. We wondered how many patients would see this information. One of our Enter and View representatives thought the corridors were poorly lit. In some areas, the carpeting in these corridors was stained.

There was also a water dispenser and scales outside one of the consultation rooms, however these were not signposted in any way and there were no cups.



Image 11 - water dispenser and scales

Patient Feedback about the Environment

Overall, patients were positive about the practice environment:

"It's clean and bright. Pleasant."

"The waiting room is nice and airy. It's big enough for all the patients waiting."

"The waiting room is lovely and light. It's airy. There is enough seating."

We agree that the waiting area is well lit, mainly due to the sky lights in the ceiling. It is also spacious with ample seating. Four patients commented on the waiting room lacking in decor:

"It's quite clinical. It would be nice to have some plants. I feel the waiting area is a bit neglected."

"I think the practice could do with a little paint and maybe a plant to brighten it up."

"The waiting room needs a spruce. It could do with a few plants. It would be really nice if there was a kiddie area of stuff for kids."

"The practice premises seem huge and a bit cavernous. More pictures, leaflets and useful information in the waiting room would be welcome as it can seem very sterile."

Patients raised some concerns in regards to accessibility:

"I'm sure you noticed but the lift is broken. It's a bit of a pain with the buggy."

"It's really easy to get here but it's sometimes difficult [navigating the building] with the pram. The fire door between reception and the waiting room is difficult and the lift."

Patient Feedback

We spoke to 30 patients at Hampton Hill Medical Centre and received 14 online survey responses from patients at the practice. We spoke to 5 staff members.

Appointment Booking

Patients commented on how difficult they find booking appointments:

"It's really hard to get an appointment. I often get phone appointments because there is no availability for face-to-face appointments. I much prefer face-to-face appointments."

"I used to be able to ring at 8am and get a same day appointment. Now with the triage system you have to go through various hoops and can't get an urgent appointment. For today's appointment I waited for 3 weeks and had to do the online triage form twice."

"It's fine. It's really hard to get an appointment. My daughter and her boyfriend have moved to another practice because it's so hard to get an appointment here."

While we go into more detail about phone access and total triage below, the above quotes demonstrate the challenges that patients are facing. The first quote comes from a patient who told us that they have learning difficulties and experience challenges with communication. In light of this, it is saddening to hear that they are frequently only able to access phone appointments.

Total Triage

Hampton Hill Medical Centre has moved to a 'total triage' model. This system, provided by Accurx, asks patients to provide information before an appointment is booked. This information is provided through an online form, which can be found on the practice website or the NHS app. Alternatively, patients can call or visit the practice and fill out this form with a member of staff. The patient's information and request is then 'triaged' by the practice. The system enables the GP surgery to "prioritise their limited capacity to support those most in need of care" (Accurx website, 2025).

In talking to the staff at the practice, we heard that there are numerous benefits to the online system. Firstly, it is a lot "easier and slicker" for staff to manage patient's requests using the online system. Second, staff reported that staff receive less harassment from patients since the online system has been introduced.

Some patients at Hampton Hill Medical Centre expressed positive opinions on the triage form:

"I filled in the triage form this morning and was given a same day appointment. The form is good as you are able to put everything down."

"I use the online triage form. It's very good. It's much better than the old system."

"I like the online triage system because I don't have to call and wait on the phone for hours. They usually call back within a few hours."

For these patients, we can see that the online triage form works well. They highlight the advantage of not having to wait on the phone and being able to fully describe your symptoms and situation. Patients also highlighted the speed with which they get a response, for which Hampton Hill Medical Centre should be praised.

However, many patients also complained about the online form:

"I go online and make appointments. I don't like the online system. I think it's nonsense and bureaucratic. I don't think it's serving patients."

"The new triage procedure where I need to spend 10 minutes to write all the symptoms and almost self analyze myself is a bit ridiculous."

A number of patients raised issues with the online form:

"I use the online triage form. This is ok. The only issue is if they message you, sometimes you can't reply so you have to fill out the triage form again."

"I phone. I use the online booking system which is fine for some stuff. I needed to book an appointment with the nurse and I had a 'computer says no' response when filling in the online form. So I had to come in to book this appointment with the nurse. Coming into the practice is better than [mucking] around with the computer."

"But I don't like that they only have the online form open during working hours. It doesn't make sense to me."

All three of these patients highlight the limitations of the online system. In the first two quotes we see patients highlighting limitations with the system itself: issues replying to messages and trying to book an appointment with a specific member of staff. In both cases, patients had to find alternative ways of communicating with the practice, causing more work for both the patient and the practice.

In the final quote, we see a patient complaining that the form is only open during practice opening times. This is a complaint we have heard in other patient engagement work (Healthwatch Richmond, 2024). From talking to practices, we know that they have to close the form during working hours to ensure they are not overwhelmed with responses and for risk management. For instance, if a patient were to request an urgent appointment on a Saturday, the practice would not be able to respond until Monday morning, potentially endangering the patient. However, from the patient feedback we received, it is clear that this has not been adequately explained to patients.

A number of patients also raised the issue of digital literacy:

"I phone up to make an appointment. I haven't got a computer so I can't use the online form. I don't want to use a computer. They call it progress but I call it a pain in the arse."

"You have to fill in the online thing. I worry that it's difficult for patients who are elderly and who are not online. I also think the new system discourages people from making appointments. It raises more barriers."

"I use the online form. They don't allow you to call or pop in anymore... Reception are very helpful but never help you make an appointment when you are there. They only do that for elderly patients. They just send you the link."

We raised this issue with the practice manager at Hampton Hill Medical Centre who said that any patient who does not wish to use the online form can call reception or come into the practice. The patient can then fill in a paper form or the receptionist can fill in the form for the patient. As outlined in the third quote, this is not always the case.

Another issue patients raised was the prioritisation of young children through the total triage form:

"Triage form is a pain if it is urgent. It can be a couple of days before you get a response and then a few weeks for an appointment. It's really quick for children. My 8 year old had a rash and I filled in a triage form for them. We received a call within half an hour and an appointment within an hour. It's very good for children but it's frustrating that they don't respond as quickly for adults when we need an urgent appointment."

Phone Access

We received limited feedback about phone access because most patients we spoke to said they use the online app. However, one patient said:

"I have used the phone but you can't get through so I come into the practice."

While this is certainly anecdotal evidence from one patient, it is corroborated by the 2025 General Practice Patient Survey in which 44 per cent of patients said it was 'fairly difficult' or 'difficult' to contact Hampton Hill Medical Centre on the phone.

Waits for Appointments

We did not ask patients how long they typically wait for an appointment but patients raised the issue with us.

"I don't like wait times for appointments. I had to wait 2-3 weeks for a blood test."

"The practice is fine apart from waiting times. In the past, you could get an appointment within a week of asking. I waited three weeks for my appointment today. You have to make yourself available for appointments when they are available."

"When you get to see staff, they are very competent. It's hard to get an appointment."

This patient feedback is reflected in the General Practice Appointment Data for May 2025 which reported that almost a third of patients are waiting more than 15 days for an appointment.

Communication

We asked patients about their experience of receiving communication from the practice, for example appointment reminders, vaccination invites and screening invites. We received the following feedback from two patients:

"They have stopped sending appointment reminders. This was helpful."

"I don't get text reminders for appointments. Today I had my appointment in my calendar but wasn't sure about the time so I had to ring reception to confirm. It would be good to get a text."

This was an issue raised at the January 2025 meeting of Hampton Hill Medical Centre's Patient Participation Group. The minutes report: "We asked why text reminders seem to have stopped – there is a limit to the number of texts included in the current phone package" (2). We followed this up with the practice manager who said that the channel through which appointment reminders are sent depends on the patient's communication preferences. They will first try to send an appointment reminder through the NHS app, then email and as a final resort SMS. However, as demonstrated in the quotes above, patients reported that reminders had stopped completely.

Prescriptions

We asked patients if they had ever received a prescription from the practice and, if so, what their experience was.

"Prescriptions take several days. I would like to be able to order repeat prescriptions earlier."

"With repeat prescriptions, when it's up and running, it's really smooth. But if there are any changes in your prescription it's clunky. You used to be able to book an appointment with the pharmacist but you can't now. I just think it's hard to access services now if you are feeling unwell."

"I get batch prescriptions. This is pretty good. I did have a hiccup recently. My batch prescription had come to an end and no one had redone it. But it was resolved quickly when I came into the practice."

All three of these patients reported using the NHS App or the Patient Access app to order prescriptions. They all highlight issues with ordering prescriptions relating to the systems: limitations on when prescriptions can be ordered, issues ordering repeats if there are changes and batch prescriptions coming to an end. In each case, the patient needed to

contact the practice, creating more work for staff. It is unclear whether these issues are limitations with the technology or barriers created by the practice. Notably, however, this is anecdotal evidence received from a small number of patients.

Referrals

We asked patients if they had ever been referred by Hampton Hill Medical Centre to another service. The two stories below are notable:

"I have a serious health condition that they picked up quickly. They could see I was in pain. They sent me to the gynae for tests. They picked it up and were very good. They have been very supportive."

"Referrals are very good. I had one occasion where I wasn't referred. I waited 3 weeks and contacted the practice again. I had to be re-referred to the hospital. I am having treatment now but it was three weeks wasted."

In the first quote, we see a clinician at Hampton Hill Medical Centre listening to the patient and quickly referring her to the appropriate service. This patient had also said that her previous GP practice had said her symptoms were normal. The Hampton Hill Medical Centre GP not only took action on her behalf but also supported her while waiting for the referral. The GPs should be commended for good care in this instance.

However, in the second quote we see issues with a delayed referral. In this case, the patient said the GP had omitted to send the referral and that the patient had to take this up. While the patient didn't disclose what condition they were receiving treatment for, a three week delay is notable.

Clinical Staff

We asked patients about their experiences with clinical staff at the practice.

"The doctors are very lovely. I usually see female doctors. I can request to see a female GP. Today I have an urgent appointment with a male GP which is okay because he won't need to touch me. Generally the doctors are lovely."

"The nurse Lisa is lovely. She's great with my daughters."

We also asked patients if they can request to be seen by a specific staff member.

"I've never asked to see the same GP. I take whatever I can get with appointments. I don't have a long term condition so it doesn't really matter to me."

"I can't see who I want now, always get different people who don't know me. I would prefer to see the same person. I try to request people but say they don't have availability or I have to wait three weeks. It's disgusting."

"I've had some very good GPs but it's a bit of a mixed bag. I would like to have consistency with one doctor. I've had times when I've asked to see a female doctor and I didn't. I was quite upset about that."

As can be seen from the quotes above, we received varied responses. What is notable in the first two quotes is that patients are weighing up the benefits of seeing the same doctor with appointment wait times. They have to sacrifice continuity of care with seeing a doctor within a reasonable time frame. This may change in the future due to national policy through which GPs are now incentivised to identify patients who would benefit most from seeing the same GP at every appointment (DHSC, 2024).

We heard conflicting information from patients about whether they could ask to see a specific member of staff on the online triage form. We were told that there used to be a list of different GPs and you could select if you wanted to see a particular one. This has since been removed. When we asked the practice manager, she said that patients could request to see a specific member of staff but it would need to be written out by the patient in a free text box.

We also heard from a number of patients that they thought there was high staff turnover at the practice:

"Staff are smashing. But so many come and go."

"When I first came, I loved the practice. There were several GPs that I would be happy to see. A few have left over the years but now there are a few I would be happy to see."

"I think they do what they can. There is a high turnover of staff. I think they've lost lots of good clinical staff."

Patients were quite sad about this: they had built relationships with clinical staff who then left. We asked the practice manager about this who said that this was the result of being a training practice.

Reception

We asked patients about their impression of the reception staff. Overall, we received positive feedback as illustrated by the quote below:

"The reception staff are very good. They are excellent. They are always helpful and listen to your problems."

However, some patients also highlighted times when they had negative experiences:

"Reception staff are generally quite defensive and worried you're going to challenge them. very quick to say 'can't help with that'"

Some patients raised the issue of difficulty hearing the reception staff:

"Some receptionists are quiet, this is an issue for my grandma who is unable to hear them."

We also noticed that though reception staff were wearing name badges, the text was very small. This makes it very hard to read the names.

Conclusions and Recommendations

Overall, we feel that this is a positive report. We hope that this report provides assurance, especially in relation to patient satisfaction with the practice.

We want to thank Hampton Hill Medical Centre for their openness and transparency in this process. We thoroughly enjoyed visiting and talking to patients and staff. We hope that this report is useful and insightful.

Recommendations

In the bullet points below we make formal recommendations to Hampton Hill Medical Centre.

Recommendation	Response from Hampton Hill Medical Centre
Share positive feedback and findings from this report with all staff and the patient participation group.	We will share this report and discuss in detail with our PPG at our next meeting. We will share this report and discuss with all staff at our next meeting, due 06/09/2025.
Review patient feedback of the appointment booking process , including total triage. As part of this, we would suggest creating a webpage and poster explaining how the online booking system works to patients. Another suggestion could be to hold an event to help those less digitally literate by teaching them how the system works.	We currently have a webpage already on our website explaining how our triage system works. We will produce a poster as suggested and display in our waiting room and reception area.
Review phone access. Following on from patient feedback and the GPPS, we would recommend reviewing phone wait times and putting in place a plan to increase patient satisfaction with phone access.	We will review wait times for phone calls using the data from our provider. We will then address this issue and provide more call handlers during busy times.
Display more information for patients in the waiting room. While we applaud the practice manager's wish that the waiting room be a calm environment, we think that there is a missed opportunity for patient education by not displaying more information in the waiting area.	This decision was not a personal wish. Creating a calm and welcoming waiting room environment is a priority for our practice, particularly to accommodate the needs of our dementia patients and those who are neurodiverse. We understand that too many posters and excessive information can be overwhelming and may cause anxiety for some individuals. By maintaining a minimalist approach with fewer posters, we aim to reduce sensory overload and create a

	more serene atmosphere. This helps in making the waiting experience more comfortable and less stressful for patients who may be sensitive to visual stimuli. Our goal is to ensure that all patients feel at ease and supported while they wait for their appointments. We have a TV screen on at all times which rotates information that we think may be beneficial to our patients. We will add another notice board to the waiting room.
Review the fire door between the reception area and waiting room to ensure that patients can easily access both spaces.	We will contact our landlords to request an automatic door.
Clean the dado rails and window ledges in the reception and conduct regular checks.	We will contact our cleaners, this should not have been the case, apologies for this oversight.
Fix the toilet flush in the one patient bathroom.	We have contacted a plumber, we were not aware of this issue.
Improve audibility of reception staff for patients. This could be achieved in a number of ways, including removing or perforating a section of the plastic screen between the reception desk and patient area of the waiting room. We welcome other suggestions from the practice.	We will proceed to get quotes for adaptations to the screen, or purchase a new screen.

Below, we have made **suggestions** to the practice. While not essential, we do feel like these would improve patient experience:

Suggestions	Response from Hampton Hill Medical Centre
Fix the lift button to indicate the 2nd floor.	We have contacted the landlord regarding this, we are awaiting there reply.
Have wall-mounted hand sanitiser placed in both the reception and the waiting area.	We will also get 2 wall mounted hand sanitisers installed.

<p>Improve signage throughout the practice, highlighting where the bathrooms, water fountain and scales can be found.</p>	<p>We have addressed this, we have ordered new signs.</p>
<p>Replace name badges to improve legibility.</p>	<p>We have addressed this, we have ordered new badges with much larger font, the ones we currently have are unsuitable and not fit for purpose for our reception staff.</p>

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