

# Enter and View Report:

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## NORTH ROAD SURGERY

**Address:**

North Road Surgery  
77 North Road  
Kew, Richmond  
Surrey  
Tel: 020 876 4442  
Website: [www.northroadsurgery.nhs.uk](http://www.northroadsurgery.nhs.uk)

**Date of visits:**

22<sup>nd</sup> (am) and 27<sup>th</sup> April (pm)

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## Introduction

In February 2014 Healthwatch Richmond held a public GP Forum with local residents, GPs and key organisations involved in General Practice. We asked the community for feedback about their experiences of using the GP services. The feedback we received encouraged us to further investigate the level of service provided in the Borough.

Healthwatch Richmond analysed data collected in the Ipsos Mori July 2014 and January 2015 GP Patient Report. We triangulated this data from practices across the borough with data available on NHS Choices between January and September 2014, data collected for the Healthwatch Richmond Infobank, the Friends and Family Test and our GP Report, March 2014. This information indicated that there was a variation in patient experience of GP services across the borough. We identified practices with high, medium and low levels of patient satisfaction and cross-referenced these with comments on NHS Choices. Based on this we identified a number of practices to visit across the range of patient experience. It was based on these findings that North Road Surgery was selected to receive visits.

Our intention in conducting Enter and View visits to GP surgeries, was to identify both positive practice and any issues on which we may make recommendations for improvements.

North Road Surgery is located in Kew and has a total of 6,893 patients registered. The surgery received a huge influx of patients in 2012 as a result of the closure of Kew Gardens Surgery. The practice has one practice manager, five doctors (two permanent, two part-time and one semi-retired), one healthcare assistant, one practice nurse, seven receptionists and one practice secretary.

# Methodology

## Setting up the visits

The visits to North Road Surgery took place on the 22<sup>nd</sup> and 27<sup>th</sup> April. Each visit was undertaken by two staff or volunteer authorised Enter and View Representatives, and lasted two hours; one visit took place in the morning and the other in the afternoon to ensure greater accuracy and representation in our data. Enter and View Representatives undergo a thorough recruitment and training process including application, references, interviews, Enter and View training, specific training on conducting visits in GP Practices, and DBS checks. All the Enter and View representatives carried photographic identification cards at all times during the visits.

The practice was contacted in advance and mutually acceptable dates were agreed for the visits, which was then confirmed in writing. The visits were conducted in line with the Healthwatch Richmond Enter and View Policy, a copy of which was provided to the practice before the visit.

## Conducting the visits

Enter and View representatives approached patients in the waiting room of the practice, introducing themselves, Healthwatch Richmond and the purpose of the study. Patients were then asked for their consent and, once given, volunteers conducted a semi-structured interview. Our interviews with patients encouraged comments on both positive and negative aspects of the practice and focused on:

- Access to services
- Quality of care
- Overall satisfaction with the practice
- Any improvements patients would like to see

In addition, practice staff were interviewed and an observational audit of the service was carried out at each visit.

Each of the four Enter and View Representatives provided written reports of their findings, which were analysed by Healthwatch staff to identify trends and key issues arising from the data collected. These findings are presented below.

## Limitations

Whilst we tried to ensure accuracy in data by conducting our visits on one morning and one afternoon, it became clear that most of the patients we spoke to were either retired or currently not working. It is important to note that this may have had an impact on our findings, particularly in relation to opening hours and accessibility of booking appointments.

## Overall Findings

Overall, our findings correlate with those found in the Ipsos Mori July 2014 and January 2015 GP Patient Report - that patients at North Road Surgery are highly satisfied with their experience of the surgery.

Most significantly, patients singled out the high quality of care delivered by the whole staff team, noting that the best thing about the surgery was the “*people.*” In particular, patients perceived the doctors as “*excellent,*” because, “*they pay attention to your condition and they listen to you.*” Our findings also suggest that the practice proactively promotes patient advocacy, ensuring that changes to the surgery are based on patient voices.

However, our research also exposed a number of challenges and areas for improvements. The surge of patients diverted to North Road surgery from Kew Gardens Surgery has presented the practice with a demand that outweighs capacity. In particular, many patients were unsatisfied with the appointment booking system and found it difficult to get a same day appointment. Our findings also suggest that the surgery’s premises are too small for the number of patients attending the surgery. The practice is hoping to move to new larger premises to resolve this issue.

## Physical Environment

The practice is located on a quiet residential street and is easily accessible to the public with just a five minute walk from Kew Gardens station.

There is clear signage outside with details of the practices' senior partners, opening hours and what to do when the surgery is closed.

The entrance to the surgery includes a ramp, suitable for wheelchairs and prams. However, we observed that a ninety degree turn through the narrow door to reception could potentially provide difficulties for wheelchair access. The practice told us that they have never received complaints about wheelchair access and that a wheelchair bound receptionist that worked at the practice for many years, never complained of experiencing any difficulty accessing the practice premises.

The surgery is well lit, with bright lighting and big windows. During our visits, there was plenty of seating available for patients but we were told by patients that this was very unusual and that usually it was full. The waiting room also includes an air conditioning unit.

The majority of patients we spoke to felt that the premises were too small for the number of patients. The Practice Manager confirmed that the space available has become insufficient as a result of the two thousand new patients taken on by the practice in 2012 (from the Kew Gardens Surgery closure). This was further emphasised by staff, who noted that space restrictions have had implications on the "*day to day working*" of the practice and also on, "*the overall capacity for appointments.*" Furthermore, without a room of her own, the Practice Manager is also unable to meet with patients privately to discuss matters, such as complaints.

The practice told us that they have gained planning permission for new premises and are awaiting funding from NHS England for progress to continue.

On speaking to patients about the issue of space, the general consensus was that a move would be beneficial but also might compromise some of the surgery's positive attributes. One patient noted that, "*The building is not designed to cope with the numbers, but a big building would destroy the intimacy and friendliness.*" Another was concerned by transport links, "*The new location will prove difficult for me; I am concerned about getting the bus.*"

We recommended that the surgery ensures that patients are kept informed of the potential move and that information, such as directions and transport information is clearly advertised well in advance if the move does take place. We suggest that whilst plans for the new move is mentioned in the PPG section of the website, this information should also be present in the practice.

In regards to disabled access to the surgery, we recommended that the practice ensure that there is suitable disability access at the new practice premises. The installation of power assisted doors to the practice help to ensure this.

We also recommended that all staff wear name badges to ensure that patients are aware of the clinical staff available to them.

### Practice Response

The practice told us that they have never received complaints about wheelchair access and that a wheelchair bound receptionist that worked at the practice for many years, never complained of experiencing any difficulty accessing the practice premises.

## Patient Advocacy

### Patient Feedback

Our findings suggest that the practice takes a systematic and proactive approach to complaints and patient feedback. Patients are able to feedback through the Friends and Family test, which was presented clearly at reception. The Practice Manager told us that feedback is also reviewed from NHS choices and the “[www.iwantgreatcare.org](http://www.iwantgreatcare.org)” website. Any issues that cannot be resolved are referred to the Practice Manger who explained to us that if it is not resolved, a formal complaint would need to be set in writing. The complaints process can be easily accessed through the website, although we did not observe this information displayed inside the practice.

Our conversations with staff also suggested that the Patient Participation Group (PPG) has become increasingly engaged and any feedback gathered from the group is proactively responded to. In particular, the PPG and practice have worked together to improve the availability and experience of booking appointments by informing patients, via the website and practice leaflet, to the days and hours that the GPs work.

However, while information on the PPG is available on the website, we did not observe a poster advertising the PPG inside the surgery. Indeed, when asked about the PPG, most patients were unaware of their existence or function within the surgery.

We recommended that the practice displays a poster advertising the PPG in the waiting room so that more patients are aware of their presence and function.

We also recommend that whilst the complaints process is available on the website, this information should also be accessible in the practice.

### Practice Response

The practice told us that they would display a poster advertising the PPG. They also told us that information regarding the complaints process would be displayed inside the practice.

### Information

The practice provided a diverse range of updated information for patients, which was clearly displayed on a table and on notice boards around the waiting room. The information included both medical care advice and information about local community support networks available in the area.

Patients stated that the clinical staff were happy to provide information about services if it is relevant to their condition. This was supported by the conversation with the Doctor, who commented that they try and signpost patients to relevant organisations and will print medical information to hand to patients.

We were also told by the Practice Manager that information available on sensitive issues, such as STDs and abuse, have been placed in the disabled toilet for patients to access in a more confidential and secure place.

While the patient check-in kiosk displayed several language options, our representatives observed little other information provided in other languages. Following our visits, our representatives also noted that the foreign language information links on the practice website are obsolete. The Practice Manager told us that she would like to have information for non-English speakers from other practices.

We recommended that the practice should consider providing information in other languages, or promoting the option for information in other languages, as well as the translation service. Patients using foreign languages should be given online access to information. A card providing a language key is a good way to provide access to information for patients inside the surgery.

This is achieved successfully at Twickenham Park Surgery where a card providing a language key provides access to information for patients inside the surgery.

### Practice Response

The practice assured us that there is information advertised in reception about using language services. They also told us that a receptionist had used it recently to identify which language a patient was speaking. The receptionist then arranged for the language service to be used to facilitate a satisfactory experience for the patient and staff.

## Appointments

### Booking Appointments

During our visits, about half of patients we spoke to found it difficult to get an appointment when they needed one. Currently, most appointments can be booked on the day (70%) and an automated booking system allows patients to call inside or outside opening hours. However, one patient we spoke to said this system meant they had to call at *“1:30am to get a 10am appointment on the same day”*.

This was supported by other patients who commented that they disliked having to phone up so early for an appointment and that it was, *“not a helpful appointment system.”* Alternatively, the rest of patients we interviewed had *“no problems”* with booking appointments, always managing to get an appointment *“in less than 24 hours.”*

Some of the patients had used alternative services because there were no appointments left at the practice, *“I cannot always get an appointment when I need*

*one. Instead, I either wait or in the case of my son, go private.*” Increasing the availability of appointments was noted as key area of improvement for patients as bookings are “*chock-a-block.*” However, these patients also acknowledged that the restriction in the size of the premises probably affected the appointment capacity and therefore hoped that this issue would be resolved by an increased capacity at the new site.

The online booking system has been functioning for two months. Most patients were aware that appointments could be booked online and had seen posters advertising the new system. The receptionists also told us that they were handing out registration sheets for the online system to patients. However, many patients strongly advocated that despite being aware of the online system, they still preferred to use the phone to book their appointments, “*I phone up and it’s very easy.*” The practice’s PPG report explains that a number of options for booking appointments are available to patients, including the online system and the automated telephone booking service, in order to improve their experience.

We recommended that the practice review their appointment booking system to ensure that more patients are able to get an appointment when they need one. Healthwatch Richmond would be interested to understand the steps the surgery is taking to resolve this issue.

### Practice Response

The practice told us that they experiences a high proportion of patients who DNA (did not attend) appointments. In their July Newsletter, it reports that there were 151 DNA appointments in June. The practice has responded to this by ensuring patients are aware of the problem, for example by including a note on the electronic information board in the waiting room area.

The practice also told us that they feel they are already stretched to capacity, offering a mixture of pre-bookable and book on the day appointments at a variety of times during the day, including early morning and late evening opening on one day a week. They stated that they do not feel able to increase the number of appointments on offer any further.

### Waiting times

During our visits, the waiting room was observed to be moderately busy to quiet. Patients told us that they were generally seen on time and if not, within 10-15 minutes.

### Opening hours & Out of Hours

Most people we spoke to were happy with the surgery’s opening hours, stating that it “*suites*” them. However, other patients noted that Saturday mornings and evening appointments would be good to include in the opening times, especially for patients working in the week. These patients noted that they had had to use other services at the weekend, including A&E, as a result of the practice being closed.



Almost half of the people we spoke to, said they wouldn't know how to book an out-of-hours appointment. Others noted that they would, "*call the emergency number or NHS 111.*"

A notice on the out-of-hours service is clearly marked both outside and inside the building. The practice website and leaflet also explains the use of different services.

## Quality of Care

### Training

Staff members interviewed felt well supported in their roles, enjoyed their job and felt that they were offered and encouraged to undertake regular training.

All staff have had infection control training, CPR training, and Level 1 to 3 safeguarding training as applicable to the professional groups (reception, nurses/Healthcare Assistants, GPs).

### Staff

Perceptions about the staff overall were extremely positive. Many of the patients we interviewed felt that the best thing about the surgery was the "*people here*" and the "*care from all members of the practice.*"

### Receptionists

Reception staff were described as "*efficient*" and "*friendly.*" However, some commented that due to the stress receptionists face they, "*can get angry and snappy sometimes when you ask a question.*" Most patients acknowledged that, "*they treat me with respect and consideration.*"

### Nurses and Doctors

Most patients were very positive about the clinical staff, expressing that they were "*lovely*" "*nice*" and "*good at what they do.*" All patients acknowledged that they had the skills to care for them.

The doctors especially were perceived as "*excellent,*" "*superb*" and "*competent,*" despite being "*terribly over-worked.*" Many said that they had confidence in their skills and ability and didn't have any problems in discussing problems with them. Emphasis was also placed on the empathy that doctors shows towards their patients, "*they pay attention to your condition and they listen to you.*"

## Summary

Healthwatch Richmond welcomes the practice's response and commitment to implementing our recommendations. We look forward to receiving assurance that the recommendations have been implemented.

The practice told us that they would display a poster advertising the PPG as well as information regarding the complaints process inside the practice. They also assured us that a small amount of information is available for non-english speaking patients and it does advertise the use of language services in the reception area.

Healthwatch Richmond recognises that the practice's move to a new location is not yet confirmed. We recommended that the surgery ensures that patients are kept informed if this becomes more definite and that information, such as directions and transport information is clearly advertised well in advance of the move. We also suggest that whilst plans for the new move is mentioned in the PPG section of the website, this information should be presented in the practice.

With regards to the provision of information in foreign languages, we recommend that the practice continues to develop the information in multiple languages it provides to patients. For example, at Dr Johnson and Partners practice in Sheen Lane, staff are liaising with Richmond CCG in order to access more information in multiple languages.