

Enter and View Report:

SEYMOUR HOUSE SURGERY

Address:

Seymour House Surgery 154 Sheen Road Richmond Surrey TW9 1UU

Tel: 020 8940 2802 Or: 020 8940 3228 Date of visits:

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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 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 the Seymour House Surgery was selected to receive visits.

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

Seymour House Surgery is located at 154 Sheen Road, Richmond. There are 13,600+ patients registered with Seymour House and its sister practice Lock Road. One Practice Manager provides management for both practices. The staff team included two nurses, one Healthcare Assistant, a phlebotomist and five doctors.

The findings from Seymour House surgery are presented in this report, along with recommendations for improvements to the practice which would enhance patient satisfaction. The report also includes the practice's response to the recommendations made.

The reader may also wish to consider the report of the satellite practice, Lock Road, which is also available.

Methodology Setting up the visits

The visits to Seymour House Surgery both took place on Tuesday 14th October. Each visit lasted two hours and was undertaken by two authorised Enter and View Representatives. Enter and View Representatives undergo a thorough recruitment and training process including an application, references, interviews, training on Enter and View, specific training on conducting the visits in these locations, and DBS checks. Enter and View representatives carried photographic identification cards at all times during the visits.

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

Conducting the visits

Enter and View representatives approached patients in the waiting room of the practice to find out about their experiences of using the service. They gained consent then conducted semi-structured interviews. 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

Practice staff and one of the GPs 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 which were analysed by Healthwatch staff to identify trends and key issues arising from the data collected. These findings are presented below.

Working with the Practice

Following analysis of the data and production of a draft report with recommendations, the practice was contacted and sent the report for comment and response on the recommendations. The following report includes the practice's response to these. The final recommendations provided are further actions for the practice to consider resolving.

We will be working with the practice to follow up on our recommendations and any activity needed to resolve them.

Findings

Access

Booking appointments

We observed that an online booking service is in place and was publicised. There was also an automatic phone booking service.

Most of the patients that we spoke to were positive about the appointment booking system saying that they could make appointments easily: this included one person who was visiting the practice for the first time. Many said they could always get an appointment whether that be with their preferred Doctor in advance, or on the same day.

Online Appointment Booking

There was some confusion about the availability of an online booking system. The practice's Patient Participation Group (PPG) survey identified that 69% of patients would welcome this service. Some of our visitors observed that a system is in place for this. Some patients however told us that there was no online service. This was confirmed during staff interviews where IT problems and the demand on staff time were cited as reasons why this service was not offered.

We recommended that the practice clearly promote their online booking. The practice has invested in a system to enable online booking and the service should be set up and promoted. The practice should be commended on its otherwise positive performance in relation to booking appointments.

Practice's Response

The practice told us that the facility for online booking will be proactively and energetically promoted once the technical problems they are experiencing have been resolved. Online booking is available and is currently used by patients who have registered for this facility.

Repeat Prescription Service

One person we spoke to said that an online prescription service would be welcomed. Given the popularity of online booking identified by the PPG, it is likely that this service would be welcomed by many more patients.

Following the visit, however, we have observed that an online booking and repeat prescription service, provided by Patient Access, is advertised on the Seymour House website http://www.richmondsurgery.co.uk/.

Opening times

At the time of our visit building works were underway and no sign was in place displaying opening hours or doctors' names. We were informed that this would be corrected soon after the works were completed. However, we did observe a large sign on the main road with the name of the surgery and indicating that access to the Surgery was on the side road.

Most people expressed satisfaction with the opening times this satisfaction telling us that they "can be seen up till 6pm most of the day" and "I am happy with the opening hours".

There were however some concerns raised about opening hours. With regard to Saturdays where the practice opens from 8:30-13:00, it seems that not all patients who would like to, are able to make use of this service. One individual interviewed reported that they had attended A&E at weekends to access care. Another interviewee was unaware that the practice had Saturday opening hours.

In addition, some concern was raised about the lack of service during lunch times when the practice is closed from 13:00-14:00 each day. One person told us that there was "no access to the practice at lunch time, not even by phone".

The PPG survey however identifies the lack of lunchtime appointments as an area where few patients express concern. It provides the following information on patient views of opening times:

Is the Practice currently open at times that are convenient to you?

Yes	64%
No	27%
No answer	9%

Which of the following additional opening hours would make it easier for you?

Before 8.30 am	15%
At lunchtime	0%
After 6 30 pm	23%
No answer	62%

The GP told us that extended hours were already offered but could not envisage extending them further (e.g. 8am to 8pm) as the practice was so small.

We recommended that the practice ensure its opening times are clearly displayed. We noted that this should focus on the availability of weekend appointments and how to access them. We suggested that these should be promoted to patients as this could encourage more appropriate use of the health system, for example lower usage of A&E or Urgent Care Centres. Additionally we said that the practice should consider the feedback provided by its PPG survey in this area and whether it is meeting the needs of its patients and the requirements for extended opening hours.

Separate to our discussions with the GP practice we now understand that a new service, which may not have been available at the time of the response, is available across the borough. To help manage the demand on urgent and emergency care services, patients with a problem best dealt with by a GP will be able to book GP appointments at four locations in Richmond on Saturdays, Sundays and Bank Holidays during the winter 2014-15 period.

Practice's Response

The practice said that they will ensure opening times and practitioners' names are clearly displayed outside the practice. They assured us that further information will be made available explaining access to medical services when the surgery is closed and at weekends to ensure their patients are aware of the options available. The practice said it was their intention to continue to promote their PPG in order to achieve a group representative of their patient population.

Information

Our visitors observed large amounts of printed information in the practice and reported that the information they saw appeared to be up to date and useful.

A number of patients said that they had found the information displayed in the practice especially useful in relation to their conditions or that they had asked doctors for information and received this.

One patient observed that the display was "cluttered and confusing" and our visitors had mixed views on the way information was provided.

While there was a significant quantity of information in the practice there were some important pieces of information that we did not observe and felt should be provided by the practice. We did not observe any information in alternative languages for people whose first language was not English. The Practice Manager told us that there is a translation service and provided us with the leaflet "Accessing a telephone interpreter".

We recommended that the practice review the signage and information it provides. Clear information should be provided for patients whose first language is not English, including promotion of the translation service. The quantity and relevance of information provided is clearly a strength: however we recommended that the practice review how this is displayed to improve the value of information for patients.

Signage should be present giving details of: opening times, out of hours arrangements, details of services provided (e.g. clinics), the names of doctors and staff and how to make compliments or complaints.

Practice's Response

The practice said that they will review the information provided, its method of display and

the provision of leaflets in other languages.

Quality of Care

Environment

Our visitors found the premises to be generally clean and pleasant and patients reported satisfaction with the environment. People told us that the practice had a pleasant atmosphere, one person told us "The best thing is that I feel relaxed".

We noted that the practice provides a small play area for youngsters and that this was used during our visit. A lift was being installed when we arrived. Staff told us that changes to the building were a direct result of the PPG's activity. This was confirmed after the visit by checking the notes of the PPG available on the website. Some patients told us that the improvements to the environment were a welcome addition and had a meaningful impact on their ability to access the practice.

One of our visitors observed that the floor was quite dirty however this may have been related to the building works underway at the time of our visit. Most of the surfaces, such as ledges, were washable but difficult to keep clean as they were covered with leaflets. We also noted that while most of the seating in the waiting room was wipe clean, two of the chairs were not. At the time of our visit, the toilet light was not working and one of our visitors who uses a hearing aid was unable to use the hearing loop.

However, overall, the environment was positively viewed by our visitors and by the patients.

We recommended that the practice ensure it is easy to clean and maintain the premises. We said that wipe clean seats were advisable in the waiting areas and keeping leaflets in easily moved racks where they are stored on ledges would aid the cleaning of surfaces. We also said that, if one is not in place, a system should be developed to ensure that minor maintenance tasks such as repairing lights are undertaken promptly. Additionally we recognised that the practice has engaged its PPG to drive improvements in its environment. They should promote the achievements of the PPG internally to their patients to drive further patient engagement and externally as an example of the impact that patient can have on helping practices to improve.

Practice's Response

The practice assured us that material seats in waiting area will be replaced by wipe-clean seats and that leaflets will be displayed in dispensers, where possible, to aid the cleaning of surfaces. The practice also said they will continue to promote the PPG and its achievements as an example of the positive impact engaging with patients has achieved.

Staff

Most of the people we spoke to provided positive comments about the practice staff in terms of their attitude and behaviour. Two people provided negative comments about GPs although no specific doctors were named. Two other people expressed disappointment with reception staff, although no specific issues were identified and one said that the experience was improving.

While there were a small number of negative comments about doctors and staff, the great majority of people we spoke to praised them. Most people told us that they had confidence in them, that they felt listened to and that they thought the staff were very good, friendly and accommodating.

Staff told us that they received training and were happy in their jobs. There are team meetings every two months where staff told us that they feel comfortable raising issues. They also spoke of supervision and support being available.

We hope that the practice will pass on the positive feedback that we have gathered about staff from patients and from staff about their roles.

Recommendation

The practice assured us with their responses that they will be promoting online booking once the system has been upgraded, they will be improving displays of information and opening hours. They also said they will be promoting the successes of their PPG to encourage more patient participation. Finally, they assured us that they will be replacing the material seats with wipe-clean seats, and leaflets will be placed in dispensers to aid cleaning.

We would like the practice to consider our final recommendation:

Online Booking

The practice should clarify their online appointment booking and repeat prescription service and ensure that its availability is clearly communicated to patients.

Conclusion

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.