

ENTER AND VIEW VISIT REPORT

*Our Health Partnership - Church Road Surgery
27 February 2019*

Part of Healthwatch Solihull's remit is to carry out Enter and View visits. Healthwatch Solihull's Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Solihull's Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Solihull's safeguarding policy, the service manager will be informed, and the visit will end. The Local Authority Safeguarding team will also be informed.

GP Surgery – Our Health Partnership (OHP) - Church Road Surgery

Service Address: 90 Church Road, Sheldon, West Midlands, B26 3TP

Acknowledgements

Healthwatch Solihull would like to thank the Practice staff and the patients for their co-operation during the visit.

Disclaimer

Please note that this report relates to findings observed during our visit made on Wednesday 27 February 2019. The report does not claim to be representative of all patients, only of those who contributed within the restricted time available.

Authorised Representatives

Nicola Standen
Jenny Marsh

Who we share the report with

This report and its findings will be shared with OHP - Church Road Surgery, the Care Quality Commission (CQC), Solihull MBC, Birmingham and Solihull Clinical Commissioning Group (CGG) and Healthwatch England. The report will also be published on the Healthwatch Solihull website (www.healthwatchsolihull.org.uk).

Background

OHP - Church Road Surgery, located within North Solihull, has a practice list of 11394 patients (<https://www.nhs.uk/Services/gp/Overview/DefaultView.aspx?id=42977>). Church Road surgery has a 'sister' practice - Tile Cross Surgery, Tile Cross Road, Birmingham, B33 0LU. Patients of both Surgeries can access appointments at either of the Surgeries. Clinical systems and staff are shared across the two sites and patient numbers reflect those registered across the two sites.

The Practice Manager told us that Church Road Surgery has recently (May, 2018) merged with a 'Provider at Scale' Organisation – Our Health Partnership. The Surgery's most recent CQC inspection report (March, 2019) provides an overview of Our Health Partnership:

'Our Health Partnership (OHP) currently consists of 189 partners across 37 practices providing care and treatment for approximately 359 000 patients. The Provider has a centralised team to provide support to member practices in terms of quality, finance, workforce, business planning, contacts and general management, whilst retaining autonomy for service delivery at individual practices. OHP also provides a mechanism by which practices can develop ideas to support the sustainability of primary care medical services and provide a collective voice to influence change in the delivery of services locally and nationally' (Source: https://www.cqc.org.uk/sites/default/files/new_reports/AAA1729.pdf).

The Surgery's opening times are:

Monday	07:00 - 18:30
Tuesday	07:30 - 18:30
Wednesday	07:30 - 18:30
Thursday	07:30 - 18:30
Friday	07:00 - 18:30
Saturday	Closed
Sunday	Closed

The Surgery also offers 'extended access' appointments. Patients of OHP - Church Road Surgery can access these appointments by contacting the Surgery directly. Extended access appointments are held at the Harlequin Surgery, 160 Shard End Crescent, Birmingham, B34 7PB between 6.30pm - 8.00pm each weekday, 9.00am - 1.00pm on Saturdays and 9.00am - 12.00pm on Sundays. Harlequin Surgery is part of the Our Health Partnership and provides an example of how resources are pooled within the Partnership.

At the time of our first visit (January, 2018) the Surgery's most recent CQC report had rated the Surgery as 'Requires Improvement' for safety; 'Requires Improvement' for effectiveness; 'Good' for being caring; 'Requires Improvement' for being responsive to people's needs and 'Requires Improvement' for services being well-led with an overall rating of 'Requires Improvement'. The Surgery's most recent CQC report (based on an inspection undertaken in January 2019) has demonstrated a clear improvement with the Surgery receiving a rating of 'Good' overall and specifically, 'Good' for the areas of 'safety', 'effectiveness', 'caring and 'being well-led' but still rated as 'Requires Improvement' for being 'responsive' with patients' experiences of accessing appointments being below national averages cited as the reason for the rating of 'Requires Improvement' within this domain (Source:https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ1729.pdf).

Purpose of our visit

Healthwatch Solihull visited Church Road Surgery on Wednesday 27 February 2019. This was a follow-up to our previous Enter and View visit that took place on 30 January 2018 (to see our previous report please visit our website - www.healthwatchsolihull.org.uk). The purpose of our visit was to explore any actions the Surgery had taken in response to the recommendations identified in our previous report and to explore first hand with patients present on the day of our visit, their experiences of the Surgery.

What we did

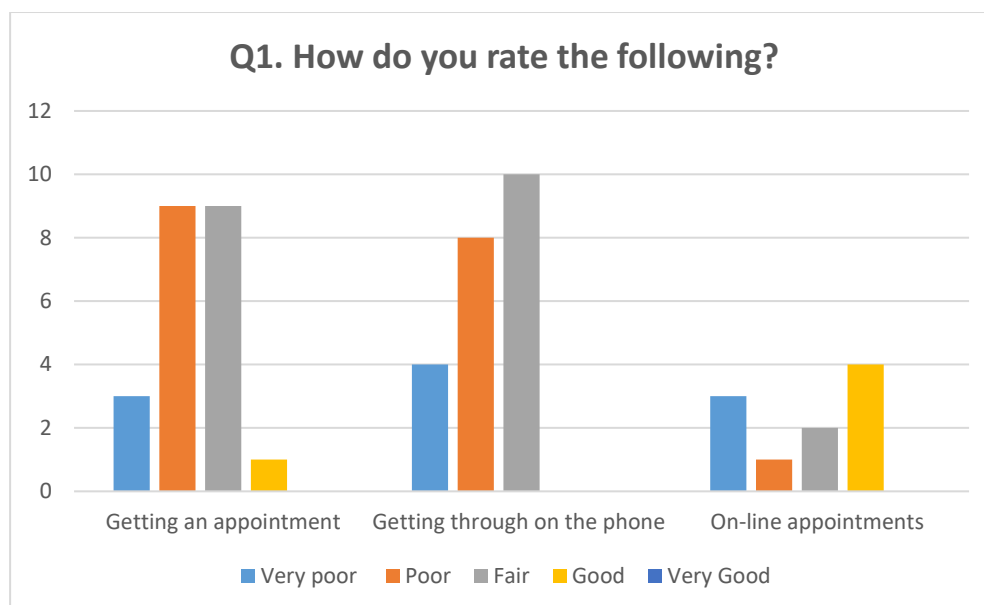
Two Authorised Representatives visited the Surgery from 10.00 am to 12.30pm on 27 February 2019. During our visit we administered 22 surveys with patients and also observed

the environment. The visit was unescorted and at no time during the visit did we enter consulting rooms.

This report will detail a range of recommendations based on the findings of our Enter and View visit and it is anticipated that these recommendations will contribute to improving service delivery within the Medical Centre and in turn service experience for patients registered with the Surgery.

Findings:

- Please note not all patients answered all questions



'Ease of getting an appointment'

In our previous Enter and view report (January, 2018) 'ease of getting an appointment' received largely mixed responses with 50% (N=13) of respondents giving a rating of 'fair' to 'very good' and a further 50% (N=13) rating 'ease of getting an appointment' as 'poor' or 'very poor'. Overall slightly less positive findings emerged during this visit with more than 50% (N= 12 of the 22 respondents who answered this question) rating 'ease of getting an appointment' as 'very poor' or 'poor' and just under 50% giving a rating of 'fair' or 'good' with none of the respondents rating 'ease of getting an appointment' as 'very good'. These findings are reflected in some of further comments made by survey respondents,

'Struggle to get routine appointments'

'Quite hard to get routine appointments / same day appointments for any urgent purpose'

'Fully booked by 8:05am'

However, despite the difficulties experienced by patients with accessing appointments, one respondent told us that the Surgery provides an *'Extremely good service in arranging follow ups and reviews after investigations'*.

'Getting through on the telephone'

Similar findings emerged when we asked patients about their experiences of getting through on the telephone, with findings demonstrating a reduction in patients' ratings from those in

our previous Enter and View visit in January, 2018, and again, no patients rated getting through on the telephone as 'good' or 'very good':

Getting through on the telephone	January 2018 (N=26 respondents who answered this question)	February 2019 (N=22 respondents who answered this question)
Very poor or poor	7 (27%)	12 (55%)
Fair	9 (35%)	10 (45%)
Very good or good	10 (38%)	0

Comments received from respondents to this question elaborated on difficulties they had experienced in 'getting through on the telephone',

'When lines open they are regularly engaged at 8am. It has taken up to 30 attempts to get through to be told no appointments available'

'Ringing from 8 - 8:30am, when get through no appointments'

'If get through on phone, often appointments gone - never go on phone'

'Easier to drive at 8am to book than ring the Surgery'

'Ring at 8am, takes ages to get through and when eventually do, no appointments'

'Takes 20/30 times of calling to get an appointment'

'Difficult to call at certain times for appts when at work'

In our previous Enter and View report (January, 2018), we recommended that *extra staff and/or extra phone lines and/or the installation of an 'on-hold' messaging service which indicates where patients are in the queue be installed at the surgery to address patients' concerns at getting through on the telephone.* As part of Enter and View visits, Healthwatch Solihull's Authorised Representatives spend time speaking with the Practice Manager, usually at the end of the visit, to supply initial feedback and ask any questions for clarification. The Practice Manager informed us that on the basis of our recommendation they have undertaken a review of patients access to appointments including 'getting through on the telephone'. The Practice Manager told us that a key issue for patients identified through this review, was that of getting an engaged tone when calling for appointments and having to keep calling back until patients were able to get through. Currently the Surgery is under contract with a telephone provider until September 2019 and once this contract has come to an end a new telephone system will be installed in September 2019 that will place patients in a queue, and inform them of where they are in the queue. It is hoped the Practice Manager informed us, that the new telephone system

will address patients' frustrations with finding the telephone engaged and along with the availability of extended access appointments, the Surgery anticipates that such changes will improve appointment access and getting through to the Surgery by telephone and, in turn, patient care.

We would recommend that once this new system is in place, the Surgery undertakes a review of patients' experiences of the new system and any other initiatives they may implement in addressing access issues for patients of the Surgery.

'Online appointments'

The survey further asked patients to rate their experiences of using the on-line booking service. Four survey respondents rated their experience of the on-line booking service as 'very poor' or 'poor', two respondents as 'fair' and four as 'good' with no respondents rating on-line booking as 'very good'. However, only ten of a possible 22 survey respondents answered this question. That fewer respondents answered this question may be indicative that the on-line booking system is under-utilised. This is, to some extent, supported by our findings where a number of respondents told us that they *'Don't use on-line'* or *'Never used on-line before'*. In exploring reasons for this, patients provided a range of responses. For some respondents, not using on-line booking was related to awareness of how to book appointments on-line. For example, *'Don't use online - not sure how to'* whilst for others it was related to the availability of on-line appointments:

'Can never book online - can never get an appointment'

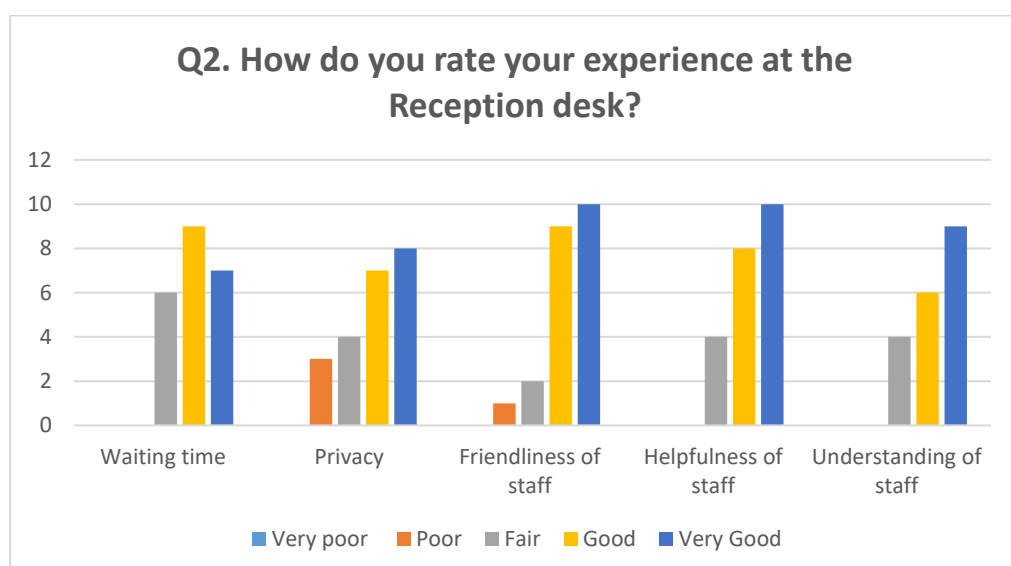
In our previous Enter and View visit (January, 2018), similar findings emerged in relation to patients' use of on-line booking facilities and our report recommended that *'the online appointment booking service should be explained and promoted to patients to increase usage and take pressure off the telephone booking system'*. At the end of our visit, we asked the Practice Manager about any actions the Surgery had taken in response to our recommendation and we were told that the Surgery had implemented a number of actions including:

- Inclusion of an on-line booking registration form in packs sent out to new patients registering with the Surgery;
- Active promotion of on-line booking facilities to patients by reception staff;
- Promotion of the on-line booking facility to patients who have contacted the Surgery to express their concerns about not being able to get through on the telephone;
- Increase in the numbers of 'on the day' appointments available through the on-line booking facility.

The Practice Manager also informed us that all 'on the day' appointments are released at 8am and can be booked on-line, in person or by telephone. In addition, the Surgery 'releases' 10 on-line pre-bookable appointments each week and should all 10 appointments

be booked by patients, the Practice Manager will 'release' more pre-bookable on-line appointments.

However, given that the respondents who completed the survey on the day of our visit are still reporting an under-use of the Surgery's on-line booking facilities, we would again recommend that further consideration is given to promoting on-line booking which may increase usage and uptake and, in turn, reduce pressure on the telephone booking system. This could perhaps take the form of a 'promotional stand' in the waiting area that provides information about on-line booking and guidance on how patients can register for the service. We also recommend that the Surgery undertakes an evaluation of their recent initiatives for increasing the use of on-line booking facilities to better understand patients' experiences of on-line booking and identify any barriers to its usage. Given their role as a vehicle for providing a voice for and understanding the experiences of patients, the Surgery's Patient Participation Group (PPG) may be ideally placed to undertake this work.



Having explored patients' experiences of accessing appointments, we were also interested in finding out more about patients' experiences once they were at the Surgery. As first point of contact for patients is usually with Receptionists, we asked patients about their experience of waiting times, privacy once at the Reception desk and the friendliness, helpfulness and understanding of Receptionists.

Overall, respondents who completed our survey reported positive experiences, with all respondents who answered this question (N=22) rating waiting times at the Reception desk as 'fair' to 'very good'. During our visit, we observed that there was an electronic booking-in system available for patients to use and that patients did not appear to be waiting in the Reception queue for excessive periods of time. Our survey further asked respondents how they rated the privacy of the Reception area and 68% (N=15 of the 22 respondents who

answered this question) rated this as 'fair' to 'very good' and a further three respondents rated this as 'poor'. During this and our previous visit, we noted that, owing to the open plan nature of the Reception area, it may be possible that those in the waiting areas are able overhear conversations between Reception staff and patients. However, we also noted that there was a sign in Reception requesting patients who are queuing to stand back from the Reception desk for issues of privacy and asking patients to let Reception staff know if they wished to have a confidential discussion and that this request would be accommodated.

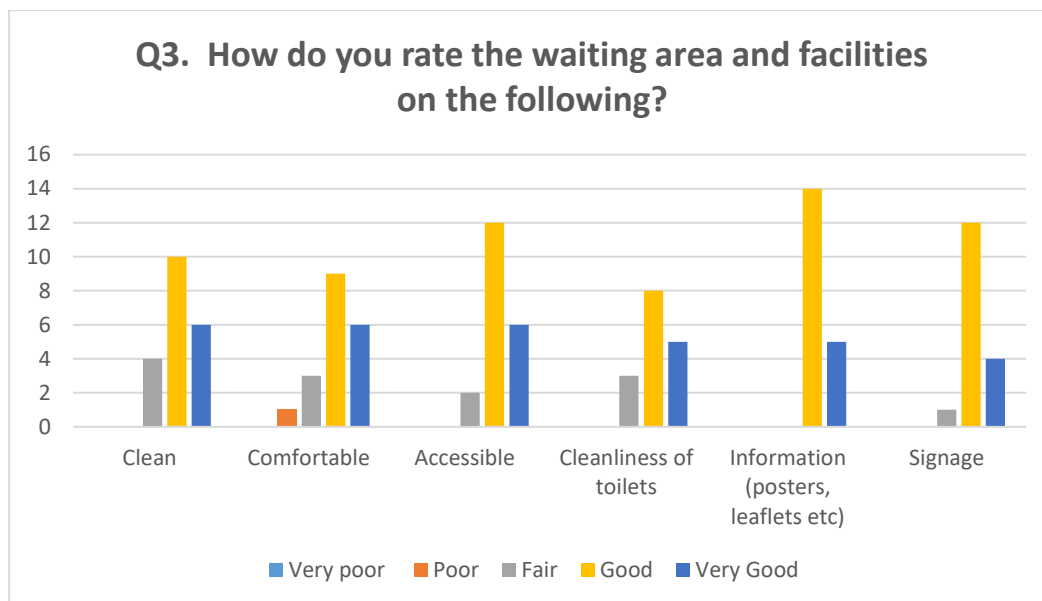
As with our previous visit (January, 2018), overall the friendliness, helpfulness and understanding of Reception staff was again ranked highly by patients with all respondents rating the helpfulness and understanding of Reception staff as 'fair' to 'very good' and 95% of respondents rating the friendliness of staff as 'fair to 'very good'. During our visit, we also observed Reception staff being friendly and welcoming. However, some of the further comments that we received from respondents to this question indicate that patients' experiences of Reception staff differed depending on the Receptionist:

'Some Reception staff are arrogant towards people'

'Sometimes disinterested. You can see other staff behind counter even when there is a big queue'

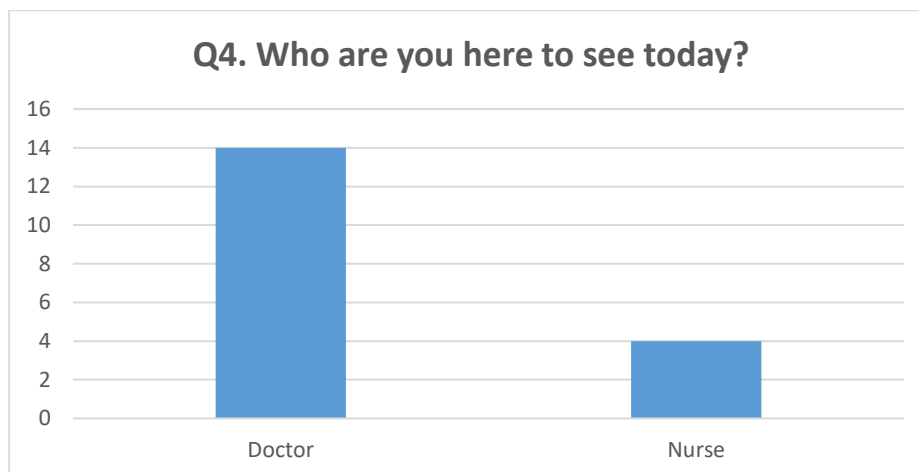
'Depends on Receptionist on duty'

These findings indicate that there appears to be a level of inconsistency with patients' experiences of Reception Staff depending on which Receptionist they speak with and we would recommend that a review of the training or support needs of Receptionists is undertaken.

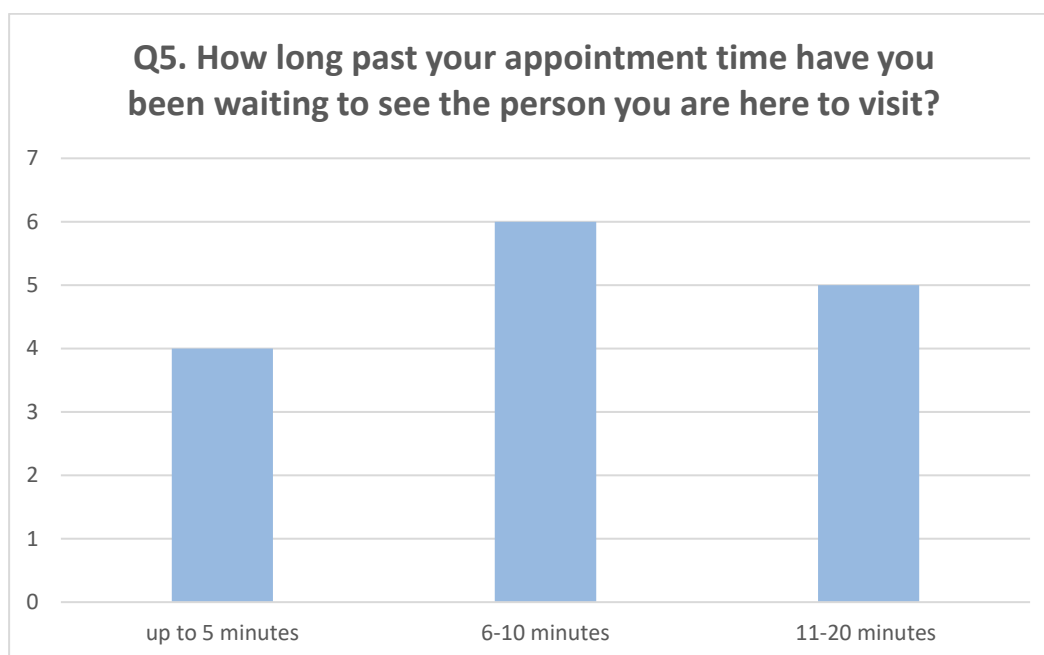


The responses relating to the waiting area and facilities were again positive with all respondents who answered this question rating the cleanliness of the waiting area and toilets as 'fair' to 'very good' and 18 of the 19 respondents who answered this question rating the comfort of the waiting area as 'good' or 'very good'. There is one waiting area in Church Road Surgery and we observed that whilst looking a little dated, the waiting area was clean and fairly comfortable. We also observed that the toilet facilities were clean and well stocked and that there were accessible toilets for disabled people and baby changing facilities available.

Church Road Surgery is located all on one level and 90% of respondents (N=18 of the 20 respondents who answered this question) rated accessibility into the building and once within the building as 'good' or 'very good' and we noted that all consulting and other rooms were clearly signposted. We also observed a number of notice boards in the waiting area displaying a range of information including details of community activities and support groups, information on NHS111, condition-related health awareness and health promotion information, including cancer awareness information, information on health checks, screening and vaccinations and information on the Care Quality Commission's (CQC) rating of the Surgery. During our previous visit, we noted that there was a carers' notice board which the Practice Manager informed us was currently being updated. During this visit, we observed a range of information aimed at carers on a 'bespoke' carers information section.

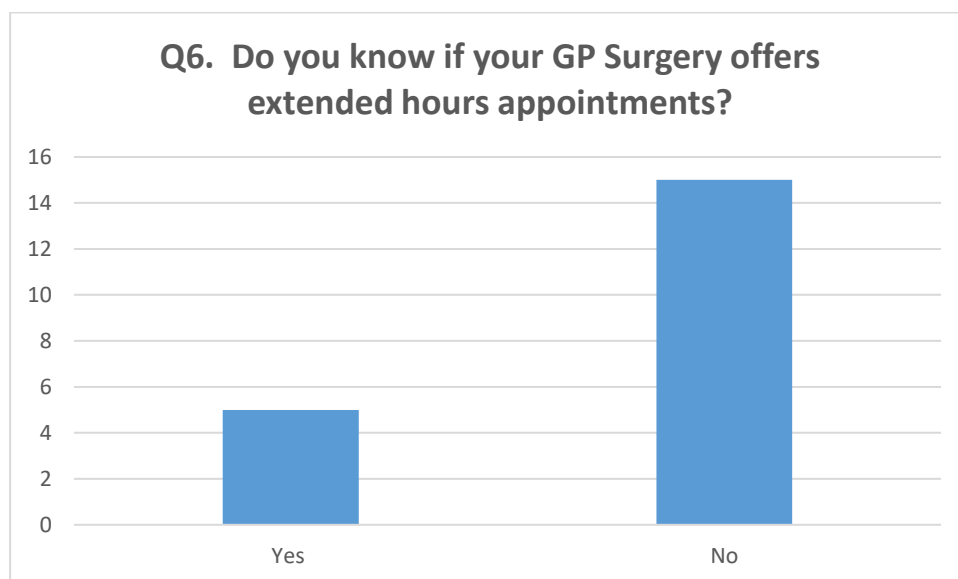


We asked patients who they were at the Surgery to see that day and the majority of patients (N=14 of the 18 respondents who answered this question) were there for appointments with a GP and a further four for an appointment with the Nurse.

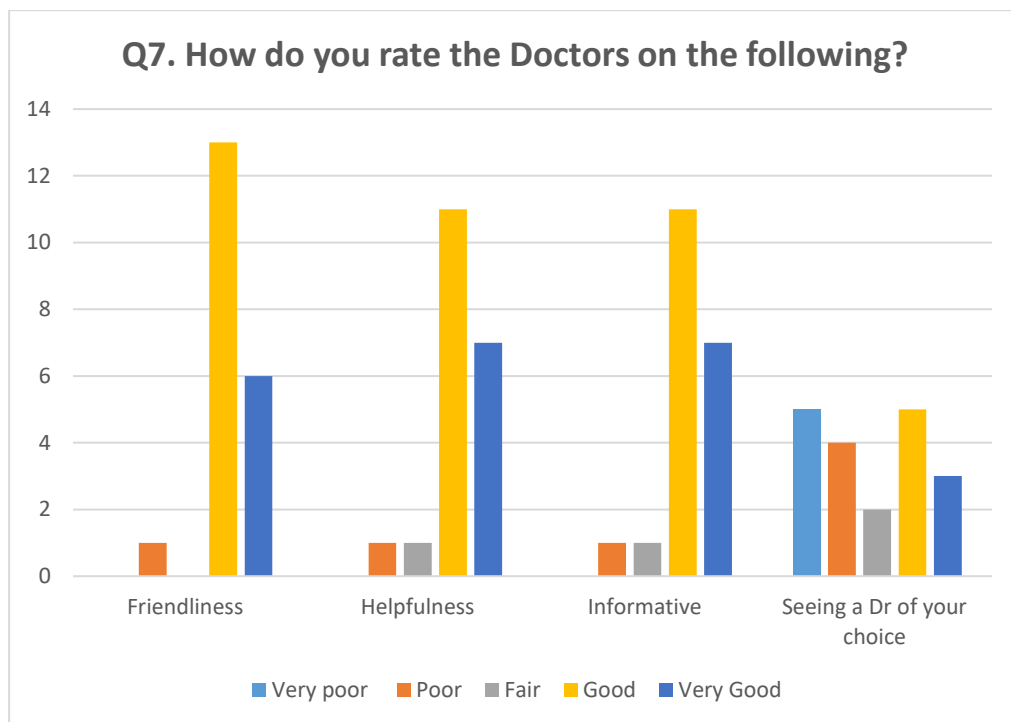


Of the 15 respondents who answered this question, four had been waiting for less than five minutes to be called for their appointment, six respondents for between six and ten minutes and five respondents between 11 and 20 minutes, with no respondents reporting waiting times of more than 20 minutes. During this visit, we asked the Practice Manager about waiting times and whether the Surgery had any procedures in place for informing patients if appointments were running late. We were told that generally appointments run to time

within the Surgery but on occasions where appointments are running late, patients are informed on their arrival.



A recent initiative within Primary Care services has been the introduction of 'extended' opening hours to accommodate appointments for patients, to fit in with their work, family and other commitments. At the end of our visit, we asked the Practice Manager how Church Road Surgery was using 'extended opening hours'. The Practice Manager told us that patients of each OHP surgery - including those of Church Road - can book extended hours appointments for its patients. These are held at the Harlequin Surgery (the OHP extended hours hub) between 6.30pm - 8pm each weekday, 9am -1pm on Saturdays and 9am - noon on Sundays. During our visit, we also observed that information on extended opening hours appointments was 'advertised' on the entrance into the Surgery. However, only five of the 20 respondents who answered this question were aware of their availability. Given this finding we would recommend that the Surgery actively promotes and advertises the availability of extended hours appointments to improve patient awareness.



Overall, the Doctors were ranked positively by patients with 19 of the 20 respondents who answered this question rating the Medical Centre’s GPs as ‘good’ or ‘very good’ for being friendly and 18 out of 20 respondents who answered this question rating the GPs as ‘good’ or ‘very good’ for being helpful and informative. However, more mixed experiences were reported by respondents when rating ‘seeing a Doctor of your choice,’ with eight of the 19 respondents who answered this question giving a rating of ‘good’ or ‘very good’, two as ‘fair’ and nine as ‘poor’ or ‘very poor’. These findings are echoed in the some of the further comments received from respondents:

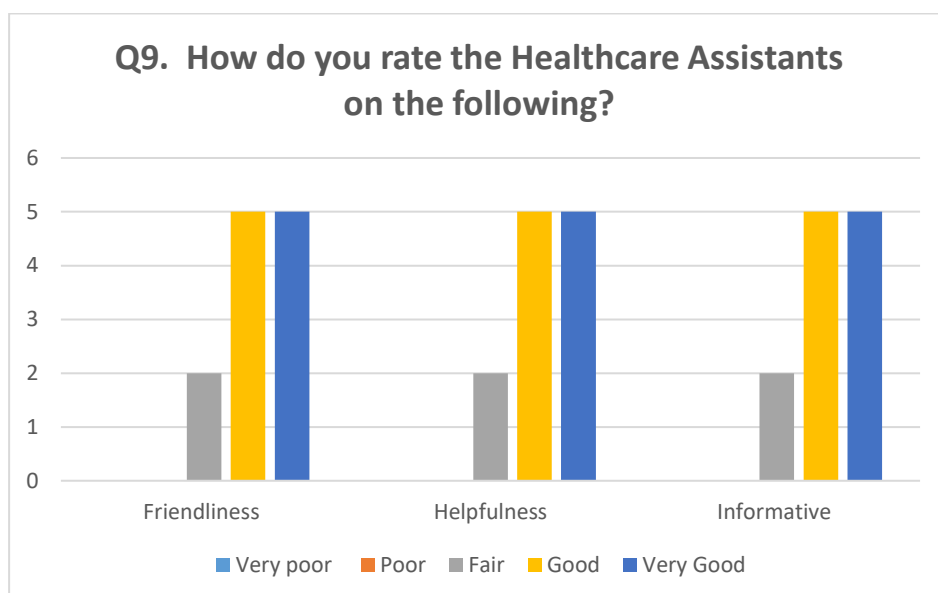
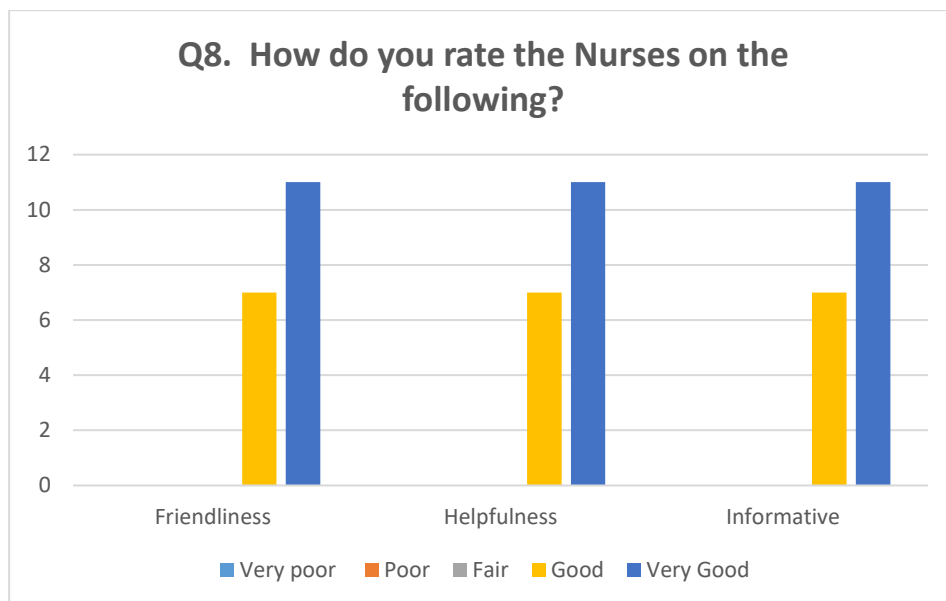
‘Long wait to see doctor of choice’

‘Asked to see particular doctor once and had to wait four weeks’

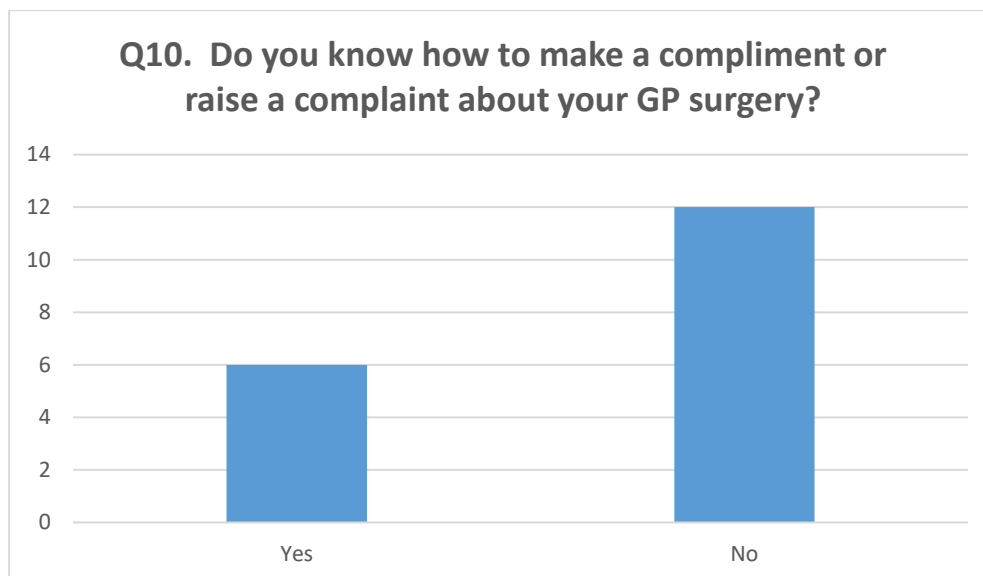
‘Rarely see doctor of choice’

‘Don’t get to pick’

Our findings suggest that satisfaction with seeing a Doctor of choice is fairly low among those who completed our questionnaire and we would recommend that where this can be accommodated, appointments are arranged with patients’ GPs of choice.

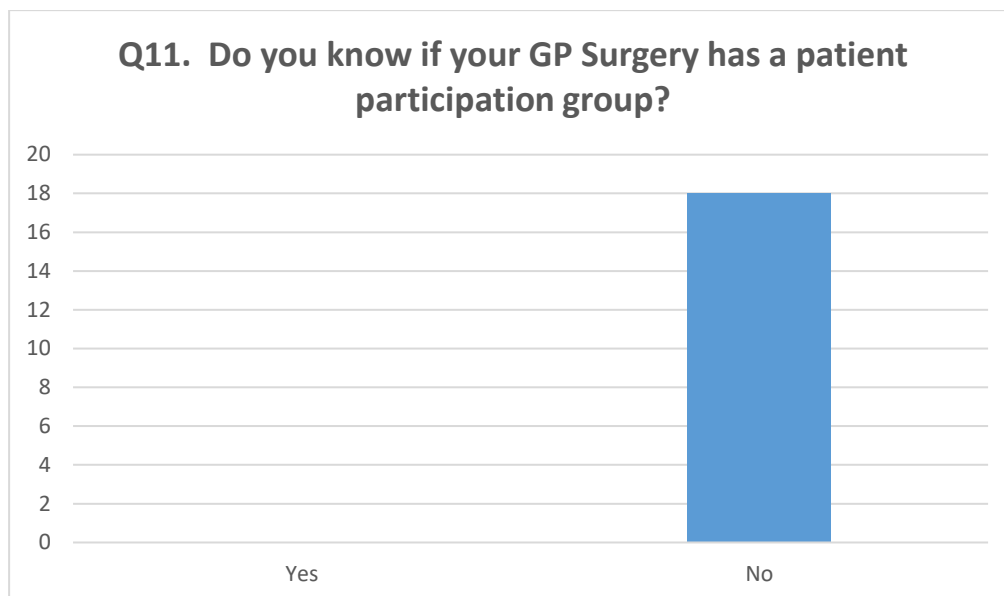


As with GPs, again overall the Nurses were ranked positively by patients with all respondents rating the Nurses as 'good' or 'very good' for friendliness, helpfulness and being informative. Further comments received from respondents indicated a high level of satisfaction with the Nurses: *'Wonderful staff, especially [name of Nurse]'*. Healthcare Assistants also received positive ratings from patients for being friendly, helpful and informative with no respondents rating them as less than fair. It is perhaps worth noting that fewer respondents completed the question about Healthcare Assistants than for GPs and Nurses as presumably not all respondents will have had contact with a Healthcare Assistant.



Question 10 of our survey asked respondents if they were aware of how to make a compliment or how to raise a complaint within the Surgery should they wish to do so. Our findings indicate that awareness of the process for making a compliment or raising a complaint appears low among the respondents who completed our questionnaire, with only six of the 18 respondents who answered this question, being aware of the process. During our visit, we observed that information on how to make a complaint was included on the notice board in the main waiting area. However, despite this information being provided to patients, our findings indicate that awareness of the process for making a compliment or raising a complaint appears low among the respondents who completed our questionnaire and we would recommend that the compliments and complaints processes are actively promoted within the Medical Centre.

At the end of our visit, we asked the Practice Manager how patient feedback is shared within the Medical Centre. We were informed that feedback is collected through 'Friends and Family' feedback forms and that these findings are discussed in the Medical Centre's staff meetings. On the day of our visit, we observed that 'Friends and Family' feedback forms were available for patients to complete and that pens and a box in which to 'post' the forms were available at the Reception desk. The Practice Manager also told us that patient feedback is shared with patients of the Surgery through a monthly newsletter and we also observed minutes of the meetings of the Surgery's Patient Participation Group on the Surgery's noticeboards. We would recommend that the Medical Centre continues to encourage patient feedback and continues to share this feedback with staff at the Medical Centre. It may also be good practice to share this feedback with other patients and outline what actions the Medical Centre may have taken in response to the feedback received. This be included on noticeboards and could take the format of 'You Said, We Did'.



Patient Participation Groups (PPGs) are groups of patients working together with GP surgeries to improve services and quality of care and provide a forum for interested patients to be actively involved in supporting their GP practice. Given the importance of these forums for strengthening the patient voice within service delivery, we asked respondents if they knew whether the Surgery had a Patient Participation Group (PPG). As with awareness of the complaints processes within the Surgery, awareness of the PPG was also low among respondents, with none of the 18 respondents who answered this reporting that were aware that the Surgery did have a PPG.

We asked the Practice Manager about the Surgery's PPG and were informed that they did have an active and supportive Patient Participation Group (PPG) that has grown from three members in 2017 to currently having nine members. The PPG meet quarterly and are involved in a range of activities, including acting as a 'Sounding Board' for the Surgery in exploring fairness in appointments, changes to the phone system and how to extend membership of the Group. The Practice Manager also informed us that the PPG is not representative of all demographics across the Solihull Borough especially in relation to age, gender and ethnicity and that the Surgery recognises this and is working with the PPG to address the representativeness of the Group's membership.

Given this, and that awareness of the PPG appears to be low among those who completed our questionnaire on the day of our visit, we would recommend that the Surgery continues to address the issue of representativeness of the Group and continues to actively raise awareness of the role and function of PPGs, ensuring that patients of the Surgery are provided with opportunities to become members of their PPG.



At the end of the surveys we asked patients to rate their overall experience. During our visit in January 2018, 25 patients completed this question with three respondents rating their overall experience as 'very good', 18 respondents rating their experience as 'good' and four respondents as 'fair'. Again, similar findings emerged during this visit and the majority of respondents who answered this question rating their overall experience as 'good' or 'very good'.

Recommendations and Follow-Up Actions:

- That the Surgery undertakes an evaluation of patients' experiences of the new telephone system once it has been installed and also reviews any other initiatives the Surgery implements for improving 'access to appointments';
- That the Surgery continues to promote on-line booking facilities and undertakes an evaluation of recent initiatives for increasing the use of on-line booking facilities to better understand patients' experiences of the on-line booking and identify any barriers to its usage;
- Where this can be accommodated, appointments are made with patients' GPs of choice;
- That a review of the training and support needs of Reception staff is undertaken;
- That the Surgery actively promotes and advertises the availability of extended hours appointments to improve patient awareness;
- That the Surgery continues to encourage patient feedback and continues to share this feedback with both patients and staff of the Surgery, and that patient feedback and any actions taken in relation to this feedback are also communicated to patients;

- That the Medical Centre actively raises awareness of the role and function of PPGs and opportunities for involvement in the Group and aims to improve the representativeness of the group.