



Details of visit

Service address:	Biggleswade Health Centre, Saffron Road, Biggleswade, SG18 8DJ and Langford Surgery, 111 Church Road, Langford, SG18 9QA
Service Provider:	Dr Kirkham & Partners
Date and Time:	8th June 2015 - 14:00 – 16:30 30th June 10:00 – 12:00
Authorised Representatives:	Diana Blackmun, Dave Simpson, Linda Harrison
Contact details:	Healthwatch Central Bedfordshire Capability House, Wrest Park, Silsoe, Bedfordshire, MK45 4HR Tel: 0300 303 8554

Acknowledgements

Healthwatch Central Bedfordshire would like to thank the service provider, patients and staff (clinical and non-clinical), for their contribution to the Enter and View Programme.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all patients and staff (clinical and non-clinical), only an account of what was observed and contributed at the time.



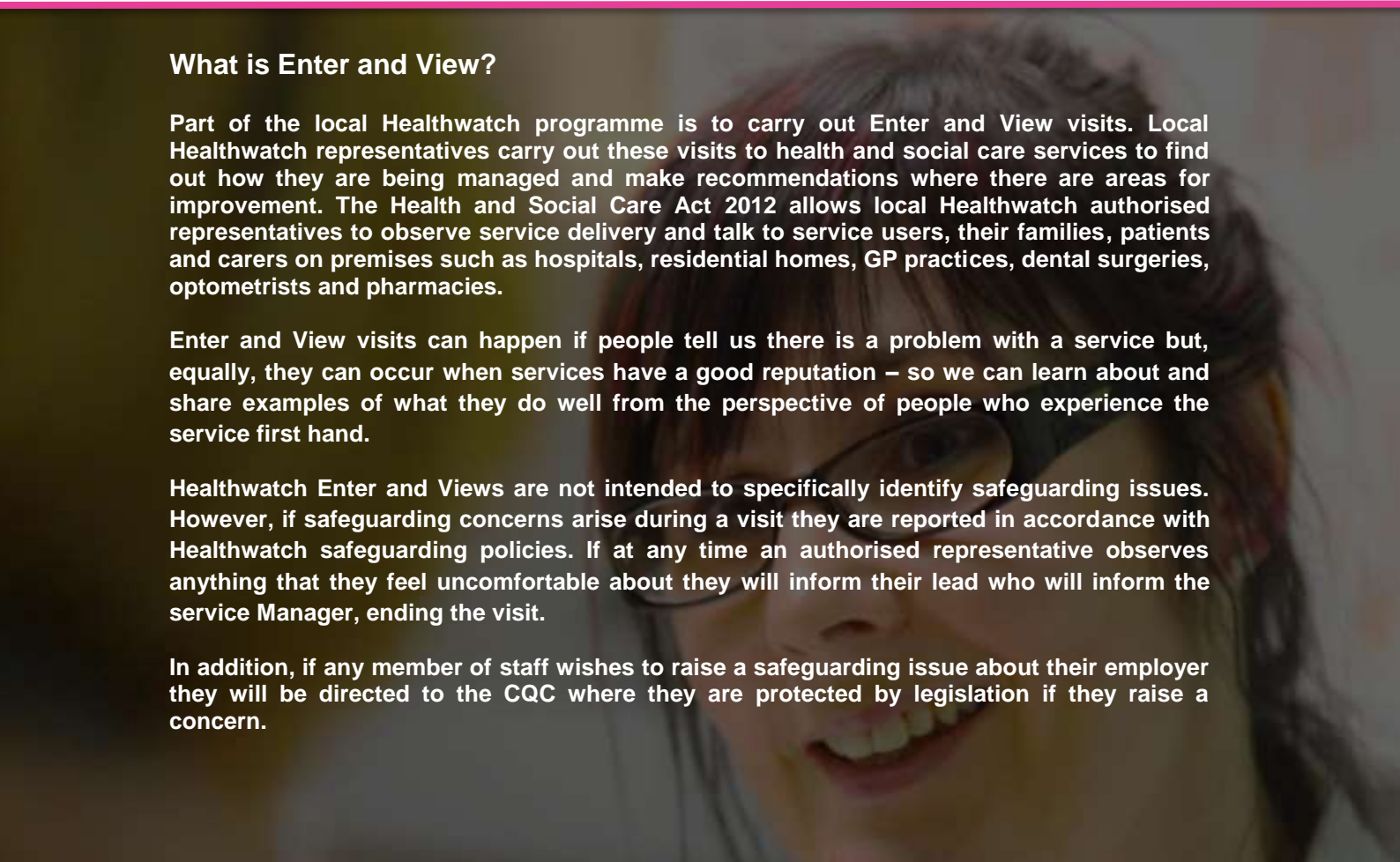
What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being managed and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families, patients 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 Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they will inform their lead who will inform the service Manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.



Purpose of the visit

- To engage with patients of GP Practices and understand how dignity is being respected;
- Identify examples of good working practice;
- Observe patients engaging with staff (clinical and non-clinical), and their surroundings.



Strategic drivers

- Care Quality Commission dignity and wellbeing strategy.
- GP Surgeries are a Local Healthwatch priority.

Methodology

This was an announced Enter and View Visit carried out at the Biggleswade Health Centre and Langford Surgery sites on two separate occasions.

A letter and posters announcing HWCB visit were previously sent to the surgeries. A questionnaire was also sent to the Practice Manager to complete prior to the visit. At the suggestion of the Practice Manager, Healthwatch Central Bedfordshire also delivered copies of a questionnaire for patients to fill in, together with a 'response box', to post their completed questionnaires, prior to HWCB's visit. The purpose was to minimise disruption and inconvenience to patients during the visit. As an example of good practice HWCB has included this procedure in all future visits to GP Surgeries.

On the day of the first visit, to the Biggleswade site, the Practice Manager arranged 'booked slots' for HWCB representatives to talk to several GPs and members of their administration and clinical staff. This was in addition to speaking to patients in the waiting area. Representatives also undertook a tour of the premises to observe accessibility, including disabled access, the availability of patient information and condition of the building.

On the day of the visit to the satellite (Langford) site, HWCB representatives also completed a tour of the premises. HWCB representatives spoke with members of staff (clinical and non-clinical), and engaged with patients in the waiting room.



Summary of findings

Dr Kirkham & Partners Practice operates on two sites in Biggleswade and Langford. The Health Centre in Biggleswade is rented from 'PropCo' (NHS Property Services Limited) and the property is shared with SEPT. Propco are responsible for the maintenance of the whole building and currently the daily upkeep is the responsibility of SEPT. The Practice Manager advised that this has led to frustrations and delays in maintenance and improvements to the premises due to the Practice's lack of direct access and engagement with the landlord.

Staff

The Practice has the following members of staff (who, apart from the receptionist, work across both surgeries):

- Seven GPs (five are partners); three male and four female GPs;
- Three Minor Illness Nurses;
- Three Practice Nurses;
- One Assistant Practitioner;
- One Phlebotomist;
- 16 reception staff;
- Four dispensing staff;
- Three secretaries;
- Midwives (provided by Bedford Hospital);
- District Nurses (provided by SEPT Community Services);
- Health visitors, 0- 19 Team also known as Health Visitors (provided by SEPT Community Services);
- School Nurses (provided by SEPT Community Services);
- Physiotherapists (provided by SEPT Community Services).



Specialist Services provided

- Phlebotomy;
- Minor Injuries Service;
- Clinics: COPD; Asthma; Diabetes; Baby immunisation;
- Vaccinations: MenC for 'freshers'; Pneumococcal; Rotavirus; Shingles; Influenza;
- Near Patient Testing;
- MMR Catch-up programme (over 16s);
- NHS Health checks;
- Stop Smoking service;
- Sexual Health services.

Surgery Hours

Monday to Friday 08:00 - 18:30* (Biggleswade), 08:00 - 11:30 (Langford)
Extended hours service on selected days.

*HWCB was advised that the public can call the Biggleswade surgery from 08.00 for appointments and can also contact the surgery at any time up to 18.30. However; doors to the building are generally open at 08.00 and close at 18.00.

Results of visit

Environment

Biggleswade Health Centre is a single storey building of modern design, set just outside of the main town of Biggleswade. The grounds are well maintained on scrub and grass areas although the sign for the Health Centre is in a poor state of repair.

The internal decoration, on first impression, appears rather gloomy and one representative felt that the main doors were not wide enough to manoeuvre a mobility scooter.

Prams and buggies are not permitted in the reception and clinic areas but there is a covered pram, buggy and bicycle parking area outside the main entrance. One patient commented on HWCB's questionnaire that it was *'Not easy for patients with buggies to use the surgery'*. HWCB have surmised this means an inability to navigate the buggy inside the surgery.

Patients book in on arrival using a 'SystemOne' touch screen adjacent to reception. The reception desk is cordoned off to afford some degree of privacy; however it is still very close to the waiting area.

The dispensing area is sited next to the reception area. Corridors are sited off the main reception area leading to the consulting rooms.

Other observations included:

- Clear signs to rooms, opening hours and toilets with a range of literature available to patients;
- PPG Information displayed;
- Equipped with hearing loop and disabled toilet;
- Complaints information clearly displayed;
- Clear guidance on how to inform reception of your arrival;
- Friendly and approachable reception staff;
- Electronic patient feedback tablet at suitable height for patients; asks patients for 'real-time' feedback on their experience with the service;
- Call system for patients via screen in waiting area;
- Names and photographs of GP's clearly displayed;
- NHS England poster displayed although this had come away from the wall at the time of the visit and would be difficult for patients to view;
- Baby changing facilities were not apparent;
- The HWCB poster was not displayed on the wall, but was incorporated into the TV information display in the waiting room.

Langford Surgery operates on the ground floor of a detached red-brick house opposite St Andrews church in Langford. The external and internal décor is in need of some attention, and HWCB representatives were informed that new flooring was due to be fitted in the waiting room and corridors.

Access to the building is up two steps to the front door; there is a portable ramp which is used to facilitate access for wheelchairs etc., however, HWCB representatives noted that the top step is in need of some remedial cement work as there is a shallow hole which could pose a trip hazard.

The room housing the reception desk is set back from, but open to the entrance hallway, and opposite the waiting area. Privacy and confidentiality could be at risk at very busy times; however HWCB representatives did not foresee this as a major issue on a 'normal' day to day basis. An electronic feedback tablet is not currently available; the surgery use paper based feedback postcards. Representatives were advised that the surgery is currently

investigating costs to install and electronic booking in system, along with a TV screen system, for displaying information etc.

The GP consulting room is accessed off the main corridor which also has a door into the rear of the reception desk. The GP used this door to call for the next patient. The treatment room is at the end of the hallway and patients were called for by the Assistant Practitioner coming into the waiting room.

The waiting room has a comprehensive display of patient information; HWCB posters were clearly displayed and the 'response box' and patient questionnaires were also in sight. Representatives engaged with several patients in the waiting area and also spoke to members of staff.

HWCB representatives observed the interaction of staff, both clinical and administrative, with patients who were courteous, professional and friendly, and witnessed one patient who came in specifically to bring cakes for the staff, which is apparently a regular occurrence.

The members of staff representatives spoke to were all very happy to be working for the Practice and felt supported and listened to. This was evidenced by the Nurse Practitioner who advised HWCB representatives that when she realised the five minute appointment slot for phlebotomy was causing delays and frustrations for patients; she instigated an increased appointment time to 10 minutes which has improved the patient experience.

Car Parking

Car parking at the Biggleswade site can be a challenge. The car park is shared with SEPT and has a limited number of spaces, which are quite narrow. One patient commented on HWCB's questionnaire that the '*Carpark is always full*'.

However, HWCB observed no parking restrictions at the Langford site at the time of the visit, as the surgery uses the adjacent car park belonging to the school. Representatives were advised that since the school has become an academy, the future use of the car park is uncertain, and the surgery may have to revert to using the designated car parking area which is directly across the main road. HWCB representatives consider that this could pose a hazard for patients.

Patient Information

The surgeries have a good and varied selection of leaflets available for patients. The Biggleswade surgery displays a selection of information on the TV screens. HWCB representatives were advised by the Practice Manager that there is a move to display more information on the screens and less in paper format to assist with infection control.

Registration at the Practice

HWCB representatives were advised that patients can register at the Biggleswade Practice with proof of address and ID; current exceptions are travellers and the homeless.

The Practice operates a policy whereby people can be seen as a temporary or immediately necessary patient for urgent acute problems if their own GP is not in the local area. This also applies to the Acute Treatment Scheme.

A Practice booklet is made available to patients on registration.

Patient Participation Group (PPG's)

The Biggleswade surgery currently operates two PPG's; one virtual and one physical. The latter group meet every 4 – 6 weeks. The Practice Manager confirmed that the group provide very useful feedback; the average age range is 45 – 75. At the time of the visit, HWCB representatives were advised that the physical group consists of approx. 12 patients and the virtual group, 101. Both groups are very active and are, for example, involved in helping to

promote the flu clinics by supporting the team and directing patients. They also fought for the Phlebotomy service because this is what patients said they wanted.

The PPG is advertised on the Practice website and on the Biggleswade TV screen in the waiting room. The PPG's AGM is advertised in the local paper. However staff indicated that it is difficult to recruit to the PPG and more young people were needed.

HWCB representatives were advised that GP's at the Practice attend the PPG's however this is not on a regular basis due to workload and commitments.

Patient Consultation

The Practice Manager advised representatives that the Biggleswade surgery had previously conducted surveys on their telephone triage system and, as a patient, what they would like to see in the waiting room. However they found that patients needed encouragement to complete the surveys which could be time consuming. The Practice uses both the National surveys, patient feedback via tablet, paper surveys and surveys for individual services such as the Stop Smoking Service.

The Practice Manager advised HWCB representatives that their 'received complaints' had been instrumental in making changes within the Practice, for example, following a complaint about the midwifery service, their pregnant patient packs were redesigned and following patient feedback, the Practice now offers an 'On Line' appointments system.

Appointments System

The Practice Manager confirmed that patients can book appointments in person and on the telephone when the Practice is open and on line, 24 hours, seven days per week. Late evening appointments are available Monday or Wednesday evening, every other week (alternated). One patient, who commented on the telephone appointments system, stated: *'I don't like the new telephone system, I have to keep pressing redial for up to 20 minutes, rather than wait in a queue which is easier when trying to get children ready for school and fairer as the first ones to ring get through first'*. Another patient mentioned that *'The waiting time on the phone in the morning is incredibly long (over 30 minutes) when I cannot be on hold and wait in a queue as it told me the line is busy. So it disconnects and I bounce back again and again. After 30 minutes of trying to be answered I often hear that three doctors are fully booked and please try tomorrow or some time later'*

For emergency appointments a duty doctor is available every day and the Biggleswade surgery also has an emergency clinic in the afternoons. The Patient Liaison officer will ask the reason for the appointment in order to signpost patients to the most appropriate service. In some circumstances, they can deal with the query over the telephone and save time for patients when they do not need to come in for an appointment.

The Practice operates a text reminder service for appointments 48 hours prior to appointment time. Home visits are mostly for housebound patients and palliative care patients; the duty doctor will decide whether a home visit is required.

HWCB representatives were advised that appointment times are allocated for 10 minutes although patients can request longer.

One patient commented on appointment bookings as follows: *'Too many people in Biggleswade and not enough Doctors / Surgeries to go around. It really is virtually impossible to get an appointment'*.

Out of Hours Care

Out of hours care in Biggleswade is provided by M-Doc based at Biggleswade Hospital. The Practice relay information about this service to patients via the practice leaflet, on their

website, on their telephone answer message and in their Newsletter. The latter was initiated by the PPG; hard copies of the Newsletter are displayed on reception.

Medication & Prescriptions

The Dispensary is based in the Biggleswade surgery; opening hours are 08.30 – 12noon and 14.00 – 18.00. Dispensing medications depends on individual circumstances and patients can order repeat prescriptions on line or in person. An individual with chronic disease medication will be managed by a nurse at the Chronic Disease Clinic. The Practice Manager advised HWCB representatives that there are plans to develop a 'Heart Failure' clinic at the Biggleswade surgery as well.

Patient Questionnaire Results

The Practice currently has 13,531 patients registered. A total of 28 survey questionnaires were completed between the two sites.

Results of the questionnaires, for both surgeries were as follows:

1. The majority of patients recalled receiving a practice leaflet when registering at the surgery;
2. A high percentage of patients said they found it easy to register at the Practice;
3. Only 46% of patients who completed the questionnaire confirmed they were aware the Practice has a PPG and 54% answered that they did not know if the Practice had a PPG;
4. None of the patients who completed the questionnaire was a member of the PPG;
5. The percentage of 'how patients book appointments' was fairly evenly distributed between the telephone, in person and 'on line';
6. The majority of patients were aware that late appointments were available for booking;
7. Just over half of patients who completed the questionnaire felt they could access an appointment when they needed one however, 25% felt they could not get the appointment they needed;
8. Almost all the patients who completed the questionnaire confirmed they received a text reminder about their appointment with a very small percentage indicating they did not have a mobile phone;
9. All patients spoken to and who completed the questionnaire confirmed they were given a choice of health professional when booking the appointment;
10. 75% of patients who completed the questionnaire were aware of the surgeries opening times;
11. A range of responses was given to the question regarding what to do if 'out of hours' care is needed; the most popular response was to ring the 111 number closely followed by calling the surgery out of hours number. Only a small percentage knew about the M-Doc service;
12. The majority of patients answered positively to the question whether they feel they have enough time with the GP to discuss their issues;
13. Over 80% of patients felt that the GP listened to their concerns and considered their opinion;
14. Over 80% of patients found the staff at the Practice helpful and understanding;
15. 78% of patients would recommend the Practice to other people; a very small percentage said they would not and 14% were 'unsure'
16. Only 57% of patients were aware the Practice has a complaints policy and knew how to complain; 36% did not know and 7% were 'unsure'.

Interaction between Patients and Staff

HWCB representatives spoke with patients in the waiting room area of both surgeries. The majority of patients spoken to stated that they felt the main surgery at Biggleswade provided a good service and some patients stated the care was '*excellent*' and '*a good surgery*'.

However, one patient who completed HWCB's questionnaire said they were unhappy and mentioned a member of staff who they felt was '*obstructive and condescending*'. An example of this was given as '*I have been told details of what is on my prescription when I can read it myself and also told that doctors are unavailable for the foreseeable future, which is very unhelpful!*' However, the majority of staff were described as '*extremely polite and helpful*'.

Representatives observed staff engaging with patients in the waiting area; the receptionists appeared relaxed and accommodating when talking to the patients showing courtesy and respect. Other comments from patients include: '*We have always had an excellent service from our GP's although I am sure this is delivered with much time, stress, etc to themselves, however they never let this show*'.

Clinical and non-clinical staff

All staff seen and spoken to during the visit(s) was friendly and helpful to the representatives and to the patients they were observed interacting with. This included both clinical and non-clinical staff. Staff spoken to during the visit(s) explained that they liked working at the Practice and felt the service provided at the medical centre was good. The majority of staff also felt supported in their work and indicated there was adequate clinical staff available, although the Practice has the usual challenges when staff leave, and one staff member felt there was insufficient cover for administration staff during periods of sickness and holidays. In addition, HWCB representatives were advised that new staff clearly need time to get up to speed which can also be a challenge and one staff member stated that '*we could always do with more clinical staff*'. However, one staff member conceded that '*the Practice could always offer more appointments however that can put an additional strain on the service and we need to make the system more manageable*'. Praise was afforded to the Minor illness Nurse and the Nurse Practitioners who take 'pressure off' GP's at the Practice, as on average, they will cover 75 hours normally taken up with GP time which effectively frees up the GP's to see other patients.

All staff confirmed they regularly attend various training courses for their role, including in-house training, on line courses, learning events, specific courses for minor surgery, chronic disease management, minor illness training, Prescribing and GP training. Annual appraisals take place and clinical meetings are held every month; significant events are discussed and daily meetings are held with the Nursing Team.

When asked if there were any changes staff would like see at the Practice, the majority of staff were concerned about the environment and condition of the building, which they would like to see improved, as they are professionals but '*look unprofessional*' in their present setting. However, all agreed that the patients are very well looked after and they strive to work *with* their patients to give the best possible service. One member of staff indicated that patients may need to have a better understanding of Practice resources, as part of their role is to manage patient expectations and this can be challenging if patients are unaware of Practice restrictions, for example, prescribing budgets etc. They also recognise and acknowledge that it is very important for patients to have 'choice' over their care and treatment.

Concerns/Complaints Procedure

The Practice Manager informed representatives that the Practice has a complaints procedure. A Patient Complaint Form will be given to a patient who has a concern about the service received. The patient would need to either complete the form or write directly to the Practice Manager. The Practice acknowledges a complaint within 3 working days and aims to fully investigate within 10 working days. The Practice Manager has confirmed that they take steps to ensure they learn from their complaints and services are improved as a result.

Clinical staff appeared less well informed about the Practice complaints process/policy and most stated that they would try to resolve the matter informally at first. Others were unclear

about the procedure and would simply tell the patient to put their complaint in writing, speak to the receptionist/Practice Manager or direct them to the Practice website. One staff member had heard of the PALs service and would recommend to a patient if they felt it was appropriate, another staff member would signpost to advocacy support; however the majority of clinical staff spoken to were unaware of other support services available to patients to assist with their complaint. Staff confirmed that complaints are discussed at monthly clinical meetings.

Additional Findings

Since HWCB's visit, and following HWCB's Mystery Shopper report into Investigating the Complaints Process in General Practice, the Practice has now added a '*How did we do?*' button on the front page of the Practice website to receive and gather comments from patients. HWCB is very appreciative of this move and would recommend this action to other practices within Central Bedfordshire.

General comments received from patients included:

'Excellent care and service'

A good surgery'

'Very positive experiences'

'For any documents they charge a lot of money and even after 100 phone calls and three months later the paperwork is not ready!'

Having been a Dr's receptionist for some time in a different town it makes me feel lucky to have access to this surgery'

'I was phoned at 7.30pm one evening to let me know that the blood test I had that day was in order, in case I was worried'

'A centre of excellence; they keep us up to date by text'

Recommendations

HWCB recommends that urgent repairs are made to the steps leading to the front door of the Langford site as this is a potential trip hazard.

In light of the uncertainty shown by some senior clinical staff members regarding the complaints policy/procedure, HWCB recommends that a programme of Complaints Policy refresher training for all staff be implemented to include awareness of local support organisations that can advocate for patients.

HWCB further recommends that the Practice review their telephone appointments system as some patients are clearly frustrated with the process, particularly having to keep redialling rather than being kept on hold (in a queue), for the line to become free.

Healthwatch Central Bedfordshire recommends that this report is shared with the patients and staff (clinical and non-clinical) of the Practice and to advise that if they should wish to contribute any additional comments about the report, to contact Healthwatch Central Bedfordshire direct on 0300 303 8554.

Service Provider response



Dr Kirkham and Partners welcomes the Healthwatch report on our surgeries.

We have noted the helpful comments regarding the interior of our main health centre and its carpark. The Practice had approved plans for the significant refurbishment in 2012 but the funding was withdrawn in the reorganisation of the NHS that year. The deficiencies identified in the report would have been addressed by this development. We have reported your concerns to the current Landlord, PropCo and we will continue our efforts to secure capital investment for this.

We also acknowledge the observations with regards to our branch surgery at Langford and will work towards addressing those which are within our influence. Unfortunately, the carpark falls outside of this.

Our appointment system is under extreme pressure due to the growing number of patients registering with the practice and with the difficulties of recruiting additional General practitioners. We have addressed and are addressing this by increasing the numbers of other highly trained healthcare professionals such as minor illness nurses. We encourage patients to book in with them where they are advised to do so by our patient liaison officers.

We have considered the results of the patient questionnaire and will strive to address our performance in the areas of deficiency identified. We have to acknowledge that in spite of our best efforts, dedication and hard work; we will not always be able to satisfy all of our patients at any given time. We are, however, committed to continuously improving the quality of the service which we provide,

Although we gain real time patient feedback via the methods outlined in the report, Healthwatch has highlighted areas for further training on the complaints policy. This has now been addressed.

We would like to thank Healthwatch for their valuable work and the learning it has imparted and we would be pleased to cooperate with further visits in the future.

Clare Saravacos
Practice Manager
Dr Kirkham and Partners

