



## Details of visit

<b>Service address:</b>	<b>Ivel Medical Centre, 35-39 The Baulk, Biggleswade, Bedfordshire, SG18 0PX</b>
<b>Service Provider:</b>	<b>Ivel Medical Centre</b>
<b>Date and Time:</b>	<b>20th August 2015 10:00 – 12:30</b>
<b>Authorised Representatives:</b>	<b>Dave Simpson, Steve Nash, Margaret Roberts</b>
<b>Contact details:</b>	<b>Healthwatch Central Bedfordshire Capability House, Wrest Park, Silsoe, Bedfordshire, MK45 4HR Tel: 0300 303 8554</b>

## 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.



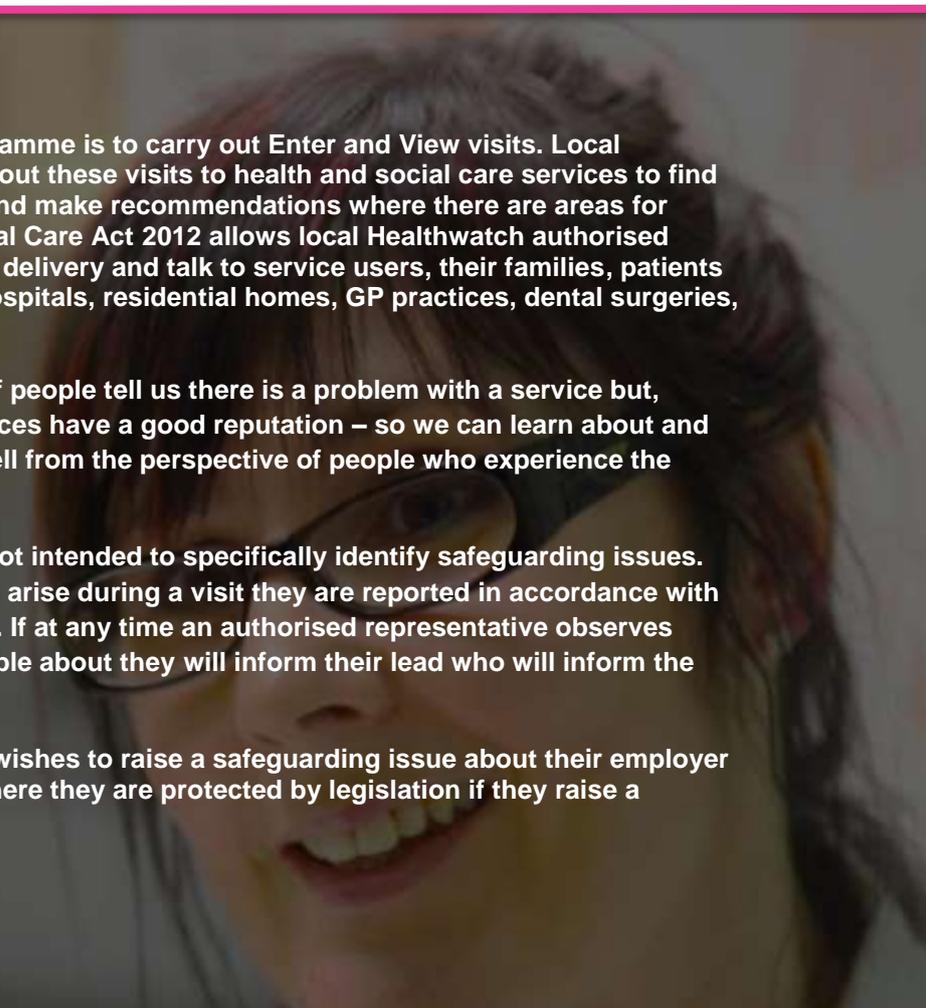
## What is Enter and View?

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 Ivel Medical Centre. A letter and posters announcing Healthwatch Central Bedfordshire's visit were previously sent to the practice. A questionnaire was also sent to the Practice Manager to complete prior to the visit.

Healthwatch Central Bedfordshire (HWCB) 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.

The Practice Manager had 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 several members of the PPG who were in attendance as patients. Representatives also undertook a tour of the premises to observe accessibility, including disabled access, the availability of patient information and condition of the building.



## Summary of findings

The Ivel Medical Centre currently operates from premises which were originally three Victorian terraced houses which had been converted into one building. The building therefore has an interior which may be described as a 'rabbit warren' with offices and consulting rooms scattered throughout the building and accessed by several different flights of stairs and corridors.

It is reasonable to suggest that the premises are no longer suitable as a 21st century Medical Practice, particularly considering the age ranges of the majority of patients which is largely 'senior'. (This is evidenced throughout this report but should not be taken as criticism of the staff, both clinical and administrative.)

HWCB is pleased and reassured to know that the practice will be relocating in the near future to modern premises at The Acorn Centre on Chestnut Avenue.

Healthwatch Central Bedfordshire's representatives were made very welcome by the Practice Manager and all of her staff, who responded to and assisted the team as much as possible.

### Staff

The Practice has the following members of staff:

- Eight GPs, four male and four female
- Five GPs are partners, three are salaried, plus one or two locums on an 'ad hoc' basis;
- Three Practice Nurses including one nurse prescriber and one Minor Illness Nurse;
- One Practice Matron;
- Two Healthcare Assistants
- Ten reception staff, two of whom are Phlebotomists and one who assists in the dispensary;
- Ten other staff;
- Community Midwife (based at Biggleswade Health Centre);
- District Nurses (based at Biggleswade Health Centre);
- Health visitors (based at Biggleswade Health Centre);
- Physiotherapists (based at Biggleswade Health Centre).

### Specialist Services provided

- Phlebotomy – In-house and domestic;
- INR Star – In-house and domestic;
- Clinics: Diabetes; Asthma; COPD; Travel Immunisation; ;
- Other services hosted: Counselling; Dieticians; CALS; Hearing Aids; Mental Health;
- Nurse Treatment sessions;
- Housebound patient Care & Support;
- Minor Operation sessions;
- Gynae sessions;
- Shared Care Substance Misuse sessions;

### Surgery Hours

Monday	08:00 – 18:30
Tuesday	08:00 – 18:30
Wednesday	08:00 – 18:30
Thursday	08:00 – 18:30
Friday	07:15 – 18:30
Saturday/Sunday	Closed

Additional extended hours 1 - 2 mornings per week, 07:00 – 08:00 and 1 - 2 Saturday mornings per month



## Results of visit

### Environment

The premises in which the Practice currently operates is owned by the Partners of the Practice. The premises are no longer 'fit for purpose' which is acknowledged by all concerned and as such HWCB considers that it would not be appropriate to list all the defects in this report; suffice it to say that all members of the team at the Ivel Medical Centre work tirelessly to ensure the maximum patient safety within the current limitations.

The premises throughout are reasonably light and airy, with a good ambient temperature. A large reception/waiting area contains a reception desk and a 'SystemOne' terminal which patients may use to record their arrival. Patients are notified when they are ready to be seen for their appointment, by the relevant GP or nurse, coming into the waiting area to call for them.

Other observations included:

- Clear signs to rooms, opening hours and toilets;
- A good range of literature available to patients;
- PPG Information displayed;
- Ground floor toilet is 'Disabled Friendly';
- Hand sanitisers available on the reception desk and in all other rooms;
- Complaints information was displayed;
- NHS Friends & Family Test response box present.
- Friendly and approachable reception staff;
- Electronic booking system at suitable height for patients with clear instructions;
- Names and photographs of GP's were clearly displayed;
- Breastfeeding and baby changing facilities available on request;
- Water and tissues available on request from the receptionist;
- A Hearing Loop is available for use on request;
- HWCB posters were displayed in the waiting room.

### Car Parking

There is no dedicated car park for the surgery which is sited on a main road with very limited on-street parking. The pavement is also very narrow as is the gateway into the front doorway, meaning there is nowhere for mobility scooters to park without causing an obstruction.

### Patient Information

The surgery has a good and varied selection of leaflets available for patients displayed in racks in the waiting areas and on a Community Noticeboard. The Practice website also contains general patient information.

### Registration at the Practice

HWCB representatives were advised by the Practice Manager that patients can register at the surgery by personally visiting the Practice or they can download the relevant forms from the website and bring them to the practice. Each patient is offered a 'New Patient Health check'. As part of this process the Practice will record their family history etc.

The Practice operates a policy whereby people can make an appointment prior to registration and also operates a temporary residents policy.

A Practice leaflet is made available to patients on registration and a more comprehensive booklet is available in the waiting rooms.

### **Patient Participation Group (PPG)**

The Practice operates a PPG which meets every two months and also has a virtual PPG where communications are via email. There are 15 regular members of the PPG and a total of 61 including the virtual members. The Practice Manager confirmed that the group provides very useful feedback; the average age range is 65 – 75. HWCB representatives were advised that the group is very active and helps with flu clinics and with patient surveys. They have also been involved in discussions with the Practice regarding the forthcoming move to new premises.

The PPG is advertised on the surgery website and in the waiting room. Staff indicated that it is difficult to recruit active members to the PPG and more young people are needed.

### **Patient Consultation**

The Practice gains feedback from patients from the following main sources:

- PPG meetings and surveys.
- Patient comments/suggestions directly to the practice in the Suggestions Box.
- Results of the Friends and Family Test.
- NHS Choices website.

Some comments from PPG members included:

*'There needs to be more coordination of discharge of elderly patients from hospital; the hospital needs to improve discharge planning and involve the practice more',*

*'The practice nurses are charming, efficient and effective'*

*'More clinics should be held locally e.g.in Biggleswade hospital rather than having to travel to Bedford or the Lister'.*

### **Appointments System**

The Practice Manager confirmed that patients can book appointments in person, on the telephone or on line, Monday to Friday. Some early morning and late evening appointments are available on certain days as detailed above, and there is a 'walk-in surgery' between 8.30 am and 9.30 am each morning. Patients have to be at the surgery at 8.10 am and appointments are allocated on a 'first-come first-served basis'.

The Practice operates a text reminder service for appointments 24 hours prior to appointment time and this has contributed to the reduction in DNAs (Did Not Attend) to 2.3%.

HWCB representatives were advised that appointments times are allocated for 10 minutes.

### **Out of Hours Care**

Out of hours care in Biggleswade is provided by M-Doc based at Biggleswade Hospital. A patient remarked that *'it is a good service, and you sometimes see a local doctor.'* The Practice relay information about this service to patients via the practice leaflet, on their website and in their Newsletter.

### **Medication & Prescriptions**

The Dispensary based in the Practice is open to patients as follows:

08:30 - 12:15 and 14:30 - 18:00 Monday to Friday

Dispensing medications depends on individual circumstances and is only open to patients who do not live in a built-up area or within one mile of a pharmacy. This in effect means that only those patients living in villages (except Beeston and some areas of Langford) may use the dispensary.

Patients can order repeat prescriptions on line or in person. Repeat prescriptions are available in 48 hours.

### **Patient Questionnaire Results**

The Practice currently has 10,715 patients registered. A total of 24 survey questionnaires were completed during the preceding two weeks.

Results of the questionnaires completed at the Practice were as follows:

1. 50% of patients recalled receiving a practice leaflet when registering at the surgery, 8% said they didn't and the remaining 42% couldn't remember;
2. 71% of patients said they found it easy to register at the Practice, the remainder couldn't remember;
3. 62% of patients who completed the questionnaire confirmed they were aware the Practice has a PPG and 38% answered that they did not know if the Practice had a PPG;
4. Only two of the patients who completed the questionnaire were members of the PPG;
5. 41% of patients who responded to the survey booked their appointments by telephone, 28% booked in person and 31% booked online;
6. 75% of patients were aware that late appointments were available for booking;
7. 88% of patients who completed the questionnaire felt they could access an appointment when they needed one however, one patient felt they could not get the appointment they needed, and 8% gave other qualifying responses;
8. 46% of the patients who completed the questionnaire confirmed they received a text reminder about their appointment, 29% said no, with 25% indicating they did not have a mobile phone;
9. 92% of patients spoken to and who completed the questionnaire confirmed they were given a choice of health professional when booking the appointment;
10. Responses to the question '*What choice of Health Professional are you given?*' were, 45% GP; 36% Minor Illness Nurse; 14% Other Health Professional, and 5% did not answer;
11. 88% of patients who completed the questionnaire were aware of the Practice opening times;
12. 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 surgery out of hours number and almost as many said they would ring 111;
13. 75% of patients answered positively to the question whether they feel they have enough time with the GP to discuss their issues, two respondents said no, and four were unsure;
14. 96% of patients felt that the GP listened to their concerns and considered their opinion;
15. 100% of patients found the staff at the Practice helpful and understanding;
16. 84% of patients would recommend the Practice to other people; a very small percentage said they would not and 10% were 'unsure'
17. 67% of patients who responded were aware the Practice has a complaints policy and knew how to complain; 33% did not know.

### **Interaction between Patients and Staff**

HWCB Representatives observed members of staff both clinical and administrative speaking to patients and all such interactions were conducted in a professional and friendly manner.

### **Clinical and non-clinical staff**

All members of staff seen and spoken to during the visit were 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 explained that they liked working at the Practice and felt the service provided at the Practice was good.

The majority of staff, when asked how they felt about working at the practice, responded with; *'I love working here'*. The majority of staff also felt supported in their work and indicated there was 'adequate' numbers of staff available; comments included *'Administration staff yes, but we are 'a bit tight' on nurses'*, and *'There are days when we struggle, but we're a good team, we help each other.'*

All staff confirmed they attend various training courses for their role, including e-learning, in-house training and GP training. Comments included, *'I have been very well supported and allowed to develop new skills.'*

When asked if there were any changes they would like to make at the Practice, comments from staff ranged from; *'A review of appointments systems'* and *'We really need a rehab hospital,'* and *'more time with my patients'*, to *'a role for internet based consultations'*. However, all agreed that *'the move into new premises will be a great step forward and really benefit the patients.'*

The attitude of the whole practice was summarised by the Practice Manager, as follows: *'Our primary aim is to give good care to our patients, we don't turn anyone away. We are a family looking after an extended family – our patients.'*

### **Concerns/Complaints Procedure**

HWCB representatives were advised that the Practice does have a leaflet relating to their complaints procedure that advises patients to speak to the Practice Manager or the Office Manager. Alternatively they can submit a complaint in writing. A form is not available for patients to complete unless the complaint is being made on behalf of someone else when consent is required. If a concern is raised by letter, in the majority of cases and in accordance with the Practice leaflet, the Practice Manager will contact the patient direct with an invitation to visit the Practice to discuss the issue with the Practice Manager and one of the Partners. The Practice Manager explained that they have found this to be the best way to resolve any issues through a face to face meeting.

Some staff appeared less well informed about the Practice's complaints procedure and most stated that they would try to resolve the matter informally at first. Others were uncertain about the procedure but would all seek advice and guidance from the Practice Manager.

### **Additional Findings**

Healthwatch Central Bedfordshire's representatives were informed that in light of the difficulties many elderly patients may experience in accessing the surgery due to its structure, to address the problem, the Practice created the post of Practice Matron. The post holder is an RGN DN Cert Independent and Supplementary Prescriber.

The role was specifically developed to enable the Practice to reach elderly and housebound patients over 75 who are struggling to access the surgery. These patients will also have direct telephone access to the Practice Matron, who said, *'My role is a really valuable and worthwhile one, with District Nurses not always readily available, I take some of the pressure off the GPs, and I have the benefit of knowing all of my patients and they don't have a stranger calling to see them.'*

HWCB representatives were again informed by a member of staff that the Practice is under increasing financial pressures due to the changes made to GPES (General Practice Extraction Service) and CQRS (Calculating Quality Reporting Service) which leads to delayed payments of invoices.

The Practice Manager informed HWCB representatives that they had viewed HWCB's Mystery Shopper Report 'Investigating the Complaints Process' – General Practice' and noted that the Practice met two of the five measures. They had subsequently made

improvements to their complaints process to ensure that the Practice now meets all five measures.

HWCB representatives were given a printed extract from the 'I Love Biggleswade' Facebook page from August 2015. Within the page, a patient new to the area had asked for recommendations on where to register for GP services. Of the 25 responses posted on the page, 19 highly recommended the Ivel Medical Centre.

**General comments received from patients included:**

*'Surgery staff are always very pleasant and helpful. Online booking system is excellent, online prescription repeat service very efficient. Medical staff are knowledgeable and approachable.'*

*'I have never had a problem getting an appointment. I find the staff are helpful and polite throughout the practice.'*

*'No system is perfect, but I feel the Ivel Medical Centre is very good. The staff respond to me well despite the fact that my neurological illness is generally poorly understood. My levels of physical and cognitive ability still fluctuate although I am still improving. This medical practice is much better at treating patients with ME/CFS than another although there are some competent professionals at the other place as well.'*

*'Excellent service at all times!'*

*'The surgery is excellent. Staff are understanding when dealing with long-term illness. Doctors always return calls when I have asked for telephone advice.'*

*'Excellent service. Friendly staff.'*

*'I always use the walk-in service at 8:00 am'*

*'All staff are helpful and understanding.'*

*'I have been a patient at this surgery for 35 years and all the staff and GPs have been helpful and considerate despite the cramped conditions. I consider myself to be lucky to be registered with this practice.'*

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## **Recommendations**

HWCB recommends that as soon as a date is confirmed for the relocation of the Practice to modern premises at The Acorn Centre on Chestnut Avenue, that the Practice give consideration to all forms of communication in relation to the move to ensure that all existing patients, potential new patients in the area and all key stakeholders are fully informed and aware of the relocation. HWCB would also be happy to post information on our website to advise patients of the Practice relocation. Please contact Steve Nash, HWCB's Communication Officer, by email to [steve.nash@healthwatch-centralbedfordshire.org.uk](mailto:steve.nash@healthwatch-centralbedfordshire.org.uk)

Finally, 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.



## Service Provider response

With regard to the Report from the Visit on 20th August the Partners and I felt that it was a very fair reflection.

**Christina Ward  
Executive Director  
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35-39 The Baulk  
Biggleswade  
Beds**

