

Redwell Medical Centre Patient Experience Survey Report

1. Introduction

In November 2014 Healthwatch Northamptonshire visited Redwell Medical Centre in Wellingborough as part of a county-wide survey of GP practices. The survey aimed to find out about access to services, the patient experience, good practice and what pressures there are within the practice. A summary report of the findings from the countywide survey, including good practice and recommendations, is available on our website¹.

We spoke to ten patients at Redwell Medical Centre about their views, experiences and satisfaction. By speaking to patients face to face we could add depth to the findings of the National GP Patient Survey². We also spoke to the practice manager to find out about services currently being provided, how they are accessed, what they felt worked well and what pressures there were. The questions used are in Appendix 1 and 2.

All information and figures quoted below were correct at the time of the site visit. This report does not reflect any changes or improvements to procedures since that date.

2. Practice information

2.1 Practice size and staffing

Redwell Medical Centre is a medium-sized practice (approximately 13,300 patients) with seven GP partners (four female, three male), one salaried GP and one GP on maternity leave covered by a locum, five practice nurses (one nurse practitioner) and sixteen part-time admin staff.

One vacancy in the admin staff is being covered by temporary help.

2.2 Services provided

The practice provides a range of services, including yellow fever vaccination clinics, as well as clinics for Asthma and COPD, Diabetes, heart and blood pressure, family planning, cervical smears, minor injuries, travel immunisations, and various other health promotion clinics.

Specialists: Additional staff at the practice include a midwife, Macmillan nurse, district nurses, health visitors, and a counsellor.

1

www.healthwatchnorthamptonshire.co.uk/about/docs

² http://gp-patient.co.uk

Shared services: Some services are shared with two local practices. Patients requiring specialised aural toilette (suction for more stubborn ear wax) treatment go to Albany House, and those needing minor surgery will go to either Albany House or Queensway.

Extended opening: Nurses and GPs are available on the second and fourth Saturdays of each month from 8am to 12pm. Late evening openings were tried but were not popular with patients.

Home visits: The duty doctor triages requests for home visits and usually speaks with the patient to decide whether a home visit is appropriate by a GP or nurse or may suggest the patient comes into the surgery. Visits are carried out between 12pm and 3pm.

2.3 Appointment booking system

Appointments can be booked in person, by telephone, and online. Patients may book on-the-day or in advance. Patients need to phone early for an on-the-day appointment with some appointments held back for emergencies. Seven to eight people man the phones in the early morning hours to handle phone bookings. A duty doctor also picks up emergency calls and the Nurse Practitioner picks up any remaining emergency appointments and then refers to a GP where it is deemed appropriate.

2.4 Patient Participation Group (PPG)

The PPG of the practice is very newly established and is currently in its pilot phase. There are also efforts to form a virtual online group. One of the practice patients is also on the Nene CCG Local Engagement Group (LEG).

2.5 Complaints system

Leaflets explaining the complaints system are available in the waiting rooms and information is given on the practice website. Complaint forms are also available on the front desk. Complaints are dealt with in the first instant by the Assistant Practice Manager for discussion with the patient or sending a letter. A meeting with the GP will also be arranged if it is deemed appropriate. If an issue is still unsolved it is referred to the Ombudsman.

2.6 Equality and Diversity

We asked the practice about their equality and diversity policy and how the practice met additional needs of patients. The following were mentioned:

- equality and diversity training for all staff
- hearing loop
- larger print documents and letters with pictures
- colour indication on things such as steps
- translation services (a small percentage of patients need a translation service, which is provided over the phone or in person)

3. Patient experience

3.1 Appointment system

Most patients we spoke to (five out of ten) found it difficult (three) or very difficult (two) to get an appointment when they needed it. Three thought it was 'OK' and two patients found it easy.

Most positive or satisfactory experiences of getting an appointment mentioned the phone system (two). For example:

- One patient found that getting an appointment at the practice was easier than in Northampton.
- One patient said that it was suitably easy to book appointments for a child.

The patient who found it difficult indicated there was often an inconvenient queue on the phone they did not always manage to get an appointment. Other negative points included:

- Two patients mentioned that having to call early in the morning is not always suitable.
- Two patients said that there were sometimes no appointments left after waiting in the phone queue.
- Two patients found that the wait to speak to somebody on the phone could be longer than expected and thought it was difficult to get hold of someone.
- One patient explained that the booking on-the-day system is not always suitable and it would be easier if more advance booking appointments were available.

3.2 Choice of doctor

Most patients did not usually get to see a doctor of their choice but would like to (four). One did not mind about not seeing the doctor of their choice. Two patients said they usually did get to see a doctor of their choice.

- Two patients said it was important to see a GP who knew them and their conditions.
- One patient would like to see the same doctor for continuity and said they had a designated doctor as an elderly patient.
- Three patients implied they could not always see a doctor when they wanted to and that they would have to see a nurse first.
- One patient said having a doctor they knew gave them confidence in their treatment.

3.3 Treatment and quality of care and service

All the patients we spoke to were either usually (4) or always (2) satisfied with the treatment they received. One patient was not satisfied with their treatment for a specific medical issue.

We asked people what they thought could improve the quality of care. Seven people commented.

- Three patients suggested improvements to the appointment system:
 - one thought that getting being able to book an appointment two days in advance would be helpful
 - one thought that having to make a separate appointment if they raised an extra small issue was a waste of appointments
 - one thought the system could be improved and that excessive appointment length resulted in them having to wait a while for their appointment
 - one wanted longer appointments.
- One patient wanted doctors to research more about a diagnosis before the appointment took place.
- One patient wanted a better budget from the government.

We also asked people what works well. Two people told us the doctors were good/friendly and one said Redwell was a "lovely surgery".

3.4 Communication and additional needs

None of the patients had any problems communicating with the doctors or other staff.

We also asked if any of the patients had any additional needs that required support (such as hearing or visual impairment, learning or physical disabilities, English as a second language) and whether their needs were met. One patients told us they had additional needs that were met by physiotherapy and occupational therapy at Isebrook Hospital.

3.5 Additional comments

We asked patients if they had any other comments to make about the practice. There were six additional positive comments and five additional negative comments.

Positive:

- One person said the staff were brilliant.
- One person said the practice had a great bunch of doctors.

- Two people said that the practice was "OK".
- One person said it was easy to get appointments for children.
- One person said the information given was good.

Negative:

- One person thought there was a waste of appointments.
- One person said they had a medication review appointment cancelled by a doctor.
- One person found they had to insist for a follow-up appointment and it was not given automatically.
- One person said there was a lack of resources.
- One person mentioned not having had a discharge letter from a hospital and having to insist on follow up.

We also asked the Practice Manager if they were any more issues, pressures or examples of good practice that they wanted to tell us about.

Issues/pressures

- Patients will tend to go to A&E if the practice is closed and they need medical help.
- The practice would like extra funding for another GP funding on patient numbers does not reflect the increased volume of work.
- There is difficulty trying to find cover for annual leave and sickness.
- Locum cover is costly and there is a lack of locum cover in the area.

What works well?

The Practice Manager feels:

- the practice provides an all-round good service
- there is a good mix of staff to enable patients to be seen appropriately

4. Highlights

The majority of the patients we spoke to were satisfied with the treatment they received at the practice and praised the doctors. However, according to the results of this patient survey and the National GP Patient Survey the practice's appointment system could be working better. Patients told us they were unhappy about having to wait in telephone queues to book an appointment and some found it difficult to book in advance.

5. Recommendations

- 1. The use of additional means to book appointments (such as text messaging) would help patients to be able to book appointments, as patients have struggled to get through on the phone.
- 2. The practice could make it easier to book appointments in advance as same-day appointments are not suitable for all patients.
- 3. The practice could investigate ways to help patients see a doctor of their choice more often.
- 4. We carried out deaf access mystery shopping at 5 of the 25 practices we visited across the county and have found the access and provisions for deaf and hard of hearing patients could be improved. Whilst we did not specifically assess this practice for deaf awareness and access we recommend that the practice carries out a self-assessment of their deaf access and shares the findings with Healthwatch Northamptonshire and Deafconnect with a view to improving deaf access and awareness.

6. Thanks and acknowledgements

Healthwatch Northamptonshire would like to thank the Practice Manager of Redwell Medical Centre for taking the time to talk to us and facilitate our visit, all the patients who were willing to take part in our survey and the Healthwatch Northamptonshire volunteers who visited the practice.

Appendix 1 - Patient survey questions

Q1: How easy is it to get an appointment when you need it? (Please tick one)					
Very easy	Easy	OK	Difficult	Very difficult	
Q2: Please tell us more about your experiences of getting an appointment, including how it is easy or difficult, how long you have to wait to get an appointment, and whether the system works well for you:					
Q3: Do you usually get to see the doctor/nurse/health professional of your choice?					
Yes	No, t	No, but I'd like to		No, but it doesn't matter to me	
Please tell us more about how this is important to you or not:					
Q4: Are there any problems when communicating with staff or doctors?					
Yes □			No □		
Please tell us more:					
Q5: Are you satisfied with the treatment and service you receive here?					
Yes, alway	/S	Yes, usually		No	
Please tell us moi	re:				
Please tell us mor	think could im	prove the pati	ent experience at	your GP practice and	
Please tell us mor	think could im	prove the pati ularly well?	ent experience at /orks well:	_	
Please tell us more Q6: What do you what do you think Improvements:	think could im k works particu any additional	prove the pati ularly well? W needs that rec	orks well: quire support? Suc	your GP practice and	
Please tell us more Q6: What do you what do you think Improvements: Q7: Do you have a impairment, learn	think could im k works particu any additional	prove the pati ularly well? W needs that rec	orks well: quire support? Suc	your GP practice and the as hearing or visual d language, etc.	
Please tell us more Q6: What do you what do you think Improvements: Q7: Do you have a impairment, learn	think could im k works particuany additional ning or physica	prove the pati ularly well? W needs that rec	orks well: quire support? Suc English as a secon	your GP practice and the as hearing or visual d language, etc.	
Please tell us more Q6: What do you what do you think Improvements: Q7: Do you have a impairment, learn	think could im k works particuany additional ning or physica	prove the pati ularly well? W needs that rec	orks well: quire support? Suc English as a secon No	your GP practice and the as hearing or visual d language, etc.	
Please tell us more Q6: What do you what do you think Improvements: Q7: Do you have a impairment, learn Y If so, are they me	think could im k works particuany additional ning or physica	prove the pati ularly well? W needs that red Il disabilities, I	orks well: quire support? Suc English as a secon No	tyour GP practice and the sharp of the sharp	
Please tell us more Q6: What do you what do you think Improvements: Q7: Do you have a impairment, learn Yes	think could im k works particularly additional ning or physical res	prove the pati ularly well? W needs that red Il disabilities, I	orks well: quire support? Suc English as a secon No	tyour GP practice and the sharp of the sharp	

Appendix 2 - Practice Manager survey questions

- Q1: What is the staff makeup of the surgery (+ see briefing)? Do you have any nurse practitioners / prescribers and do you provide a mental health service?
- E.g. Have there been any changes to the surgery staff since the briefing? What are they?
- E.g. Which staff provide mental health care and advice?
- Q2: Have you any GP or staff vacancies? How long have these posts been vacant?
- Q3: How does your appointment booking system work? (only need to ask about what is different to the briefing)
- E.g. the role of the receptionist, whether there is online booking, how far in advance patients can book appointments, how much choice patients have over time and GP, whether they use an 0845 number, how many phone lines they have, telephone triage? What do you do with temporary or unregistered patients?

Have any significant patient criticisms of the appointment system been reported by the PPG and how have these been addressed?

Q4: Does the practice conduct home visits?

Yes

How are these organised?

Q5: What additional facilities does the practice have? (only need to ask about what is different to the briefing) (E.g. specialist clinics, counsellors, blood tests, specialist doctors, dressing changing facilities, drop in sessions)

Do you share facilities with any other GP practices in your locality? Or does your practice or GP cluster have any specialisms/clinics or specialist doctors? If so, what and is this working? Would you like to see any more?

Is there anything else working well in your locality? Are there any plans for further sharing of resources?

- Q6: Does your practice have any extended opening hours or do you plan to (if not mentioned in briefing)? Has this been requested by your PPG?
- Q7: Is the 111 Service prominently advertised by the Practice and does the service provide adequately for your patients and for their out of hours requirements? (Also see PPG and Patient Surveys and Reports)
- Q8: Do you have an active patient engagement group? How is advertised and how can people join? Is it funded by the practice and how often do they meet? (Other than what is mentioned in the briefing)
- Q9: Where is your complaints system publically displayed?
- E.g. Is it in the patient information leaflet, noticeboard, reception desk? How are complaints dealt with?
- Q10. How else do you communicate with patients?
- E.g. noticeboards, leaflets, website, guidelines about best times to call
- Q11: What is your equality and diversity policy? How is it implemented? E.g. How provide access for those with physical, visual, hearing, and/or learning disabilities and autism and non-English speakers. BSL/interpreters? Is there staff training or understanding of obligations?
- Q12: What other staff training does your practice have? What decision aids/training are receptionists given?
- Q13. Are there more patients attending your practice than there used to be? Have you any thoughts on why that is or why there is pressure on GP practices?
- Q14: Is there anything else you would like to tell us about? E.g. things that are working well, challenges the practice faces, additional support needs they have, thoughts about A&E attendance, etc.