

**Enter and View Report**  
**Charlton House, Tow Law Surgery**  
**42 High Street, Tow Law**  
**Bishop Auckland DL13 4DH**  
**Monday 14<sup>th</sup> May 2018**



**Authorised Representatives:** Anne Glynn and Mervyn Hockin'

**Volunteer Support Officer:** Claire Cowell

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## *Acknowledgements, disclaimer and context*

Healthwatch County Durham would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

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 service users and staff, only an account of what was observed and contributed at the time.

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 run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Healthwatch 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 Enter and View 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 need to inform their lead who will inform the service manager, ending the visit.

## *Purpose of the visit*

We ran a successful pilot with two surgeries in 2017, where we used 'appreciative questions' to explore what was working well in surgeries as well as one area for improvement. Key themes that were important to patients were shared with all practices and Enter and View visits were identified by the Clinical Commissioning Groups as a positive way to gather independent patient feedback.

'Your visit has certainly helped us focus our minds not only on what we are doing well, but also on areas where we knew we needed to improve, in addition it has also highlighted further areas where we need to develop and improve our service to patients.

The whole experience, from the initial approach by Marianne through to our involvement with Claire and then the volunteers on the day has been extremely pleasurable and informative; the staff here on the day have all been extremely complimentary of your approach and methods.

In our opinion the Enter and View visits are a great way to break down barriers, give practices an independent view on the success of their service and help them highlight areas for improvement. We would recommend an Enter and View visit to any practice.'

Brian Woodhouse, Practice Manager

We wrote to all Practice Managers and Patient Reference Group Chairs (Appendix A) to offer them the opportunity to request an Enter and View visit, to either gather overall patient feedback or explore a particular topic.

The 'Medical Group' was the first to request visits as they are keen to listen to their patients and learn from their feedback. It is made up of five practices across County Durham - Esh Winning Surgery, Langley Park (Bobby Robson House) Surgery, Meadowfield Surgery, Charlton House (Tow Law) Surgery and Ushaw Moor Surgery.

## *Planning and preparation*

Authorised Representatives who had taken part in the pilot were keen to be involved, as were new volunteers. The survey used was carefully put together beforehand to reflect the 'positive approach' to be taken. This was circulated to staff, Authorised Representatives and the practice manager for comment.

We realised that there might be people who would like to make a comment about the services who were not going to be around on the day of the visit so the surveys were left one week before the visit in the waiting area, on a HWCD display table, with a box for completed surveys to be left in. We also prepared slips which could be handed to a user, if they were to leave mid conversation due to their appointment being called. This meant they could still complete the form, after they had been seen.

We advertised the visit in advance (appendix C) and Fiona Soulsby, the Lead Receptionist, briefed the staff before the day.

We carried out a preparation visit one week before the Enter and View to do a risk assessment and consider areas such as layout, introductions, venue space and safety procedures, the process for taking photographs and we agreed use of a private space for conversations if needed.

## *Information and data*

Using two of the Authorised Representatives we carried out 20 individual conversations with patients and staff, using a set of appreciative questions to give people the opportunity to describe good practice they had experienced or seen.

No surveys were completed prior to the visit.

A representative observed activity and spoke to people during our four hour visit, to collect their own independent impressions of the practice and its services, which they recorded during and after the visit.

A private space was available if patients felt the need to talk in confidence to us.

## *What people told us*

People shared their experience and opinions of the practice, all are noted in Appendix E. Some are unique to individuals but there were several trends that we heard numerous times, which include:

### **Appointment availability/system**

“Phoned today-got an appointment on the same day”

“Using online appointments system is best for me!”

“Always available”

“Keep the diabetic Clinic”

“Appointment system could be better”

“Keep better records of referrals”

“I had a baby 10 weeks ago-get appointment very quickly”

### **Professionalism of staff**

“Reception staff are excellent-you are treated with dignity.”

“I am seen by the practice nurse very quickly!”

“Keep the same reception staff”

“All G.P.’s have been here for years are good, locum staff are not good”

### **Choice and access to GP’s**

“Same doctors and nurses creates a trust-important as familiar faces not strange makes me more comfortable””

“Knowing you as a person gives me confidence –doctors and nurses”

### **Professionalism and empathy of doctors**

“You are treated with dignity, listened to and things are clearly explained”

“Please keep the same staff”

“The doctors listen to what you have to say and asks me my opinion about how best to help-this makes me feel like I count!”

“Good patient doctor relationship”

## **Satisfaction**

“After Crook surgery this place is brilliant”

“No changes please”

“Chose to stay registered with Tow Law although Crook is just across the road to my house”

“Link with other surgeries is good”

“Excellent Service”

## *What we observed*

The patients we observed in Tow Law Surgery appeared to be happy with the services in general

Observations considered the physical space and how it was managed, as well as communication with staff and users

### **Key areas of observation were:**

#### Effectiveness of the physical space and layout

There was a television that was turned off but soft radio music playing. There were limited books/magazines and Toys available for patients.

There seemed to be a lack of privacy at the reception because of available space/layout and barrier of Perspex screen.

There were many information leaflets and notices including information on surgery procedure but no sense of order, so difficult to consider.

We, as visitors, were not asked to sign in.

Other than there not being water/coffee machine available, the set out including chairs seemed comfortable.

## Positive social interaction and communication

The reception staff came across as friendly when approached but were not able to have any social interaction with patients because of screen and talk through box within it. This created an 'us and them' feel.

GP's came and personally called patients to their appointment. Patients were happy to talk to us.

## Dealing with issues that arose

One elderly lady became very confused when trying to access the two sets of automatic opening doors, which were not signed as 'entrance' or 'exit'. We, as Enter and View Reps intervened; staff were not aware as could not see doors from office, maybe.

## *Recommendations for the Medical Group*

We have listed the recommendations below based on what we were told and what we saw and heard, during the visit.

1. Retaining the procedure around appointments was a priority for patients as they felt the present system was, and is, generally good and you are able to get an appropriate appointment. They valued being able to get a prompt appointment and that the doctor/patient relationship was good. There were examples of staff being responsive and taking action quickly, where necessary, that was very much valued by service users.
2. Patients at this practice valued having long standing GP's at the surgery. There were several users who expressed that, although for some, another surgery was more local to them, they chose to remain registered at Tow Law as their experience here was much more positive here.
3. We were told that in terms of improvement, users were generally happy and suggested that nothing should be changed. However people said that it was "nice to have friendly people around to chat to" whilst waiting for their appointment, suggesting that there is not normally social interaction at the surgery.

4. There were some positive aspects observed with regard to the layout of the surgery such as a box for patient feedback, list of prescribed medicines, pictures displayed and good lighting. However there was an overpowering amount of information and publicity displayed. Potentially better management of information may be more effective and useful to patients. The introduction of a water machine would be welcomed and there was a lack of privacy at reception, resulting in people overhearing conversations. There would be some upgrading of signage, colour and textiles when looking at the layout with regard to being dementia friendly. The most obvious barrier we observed was the difficulty to speak to reception staff because of the Perspex screen/talk panel, this made it difficult to have any social interaction between patients and staff and this came across in some of the comments.

## *Service provider response*

Thank you Healthwatch for visiting our practice at Tow Law, Charlton House, we hope you were able to take away information and ideas from viewing our practice that will be helpful in your future work and benefit other GP practices. Your visit has certainly helped us focus on not only what we are doing well, but also on areas where we can improve, in addition it has also highlighted further areas where we would like to develop and improve our service to patients.

It was very satisfying to hear that the majority of patients were happy with making an appointment at the surgery, for others, we hope that the new nurse practitioners who have been employed across the group, will alleviate some of the pressure, in this area.

It is valuable to hear that patients really appreciated the doctor/patient relationship and that patients recognised where staff were responsive and took prompt action on their behalf.

We recognise that there may be some difficulty in the layout allowing for social interaction as well as privacy between staff and patients, so we are currently looking at an alternative to the safety glass screen at reception to ensure we address the privacy/communication issue, whilst maintaining staff security at the same time.

We are confident to report now that notice boards at the practice are being better maintained by staff, in order to be kept up to date and relevant to users. Boards have

been tidied and updated and we are trying to use the surgery TV to promote up to date information regarding local services, self-help and practice systems.

We found the Enter and View visit a great way to get an independent view on the effectiveness of our service and an insight to what was most important to patients, whilst highlighting areas for improvement. We would recommend an Enter and View visit to any practice.

Lesley Hunter (Practice Manager)

Louise Potter (Assistant Practice Manager)

Fiona Soulsby (Lead Receptionist)

# Appendices

## Appendix A



Healthwatch County Durham  
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Email: [healthwatchcountydurham@pcp.uk.net](mailto:healthwatchcountydurham@pcp.uk.net)

14 September 2017

Dear Practice Manager and PRG Chair

### **Enter and View recommendations and opportunity to take part**

As part of the 2016/17 work plan, Healthwatch County Durham carried out two positive Enter and View visits in practices that had scored highly in recent Patient Satisfaction surveys and CQC inspections, to hear from patients what they think their practice does well, and to share that learning throughout Primary Care. Patients told us:

- Being listened to and having a variety of contact opportunities, face to face, phone and letter were important to them, as was the empathy and professionalism of staff
- They valued being consulted on any changes and being told why, if their expectations were not met
- There is positive culture at their practice. A culture of team working that promotes no hierarchy seems very valuable and is evident to patients
- The physical space is important to them. They believe this should be well thought out and users given the opportunity to share their views on the environment
- Access to appointments was a real priority for them and they told us their practice has a system that works for them. They valued knowing they could have a same day appointment, even if this is over the phone
- They valued having choice and flexibility around seeing a particular GP, especially where they had an underlying medical support need, as this gave people confidence around effective diagnosis

*'The Enter & View experience gives an overall independent view of how practices run and highlight areas of improvement across the board'*

**Great Lumley Surgery**

*'In our opinion the Enter and View visits are a great way to break down barriers, give practices an independent view on the success of their service and help them highlight areas for improvement. We would recommend an Enter and View visit to any practice'.*

**Silverdale Family Practice**

The full reports are available on our website [www.healthwatchcountydurham.co.uk/enter-view-reports](http://www.healthwatchcountydurham.co.uk/enter-view-reports) and our Board and the Director of Primary Care have now agreed to offer this programme to other practices who would like to use patient voice and independent observations to identify what they are doing well and any areas to improve. To find out more about requesting a visit, please contact Marianne Patterson, Programme Manager at [marianne.patterson@pcp.uk.net](mailto:marianne.patterson@pcp.uk.net) or 0191 3787695.

Yours faithfully,

*BJackson*

Brian Jackson, Chair  
Healthwatch County Durham

## Appendix B

**Enter and View Questions for GP practices in County Durham** Thank you for your time today. Healthwatch are here to speak to patients about the GP practice and to hear the stories behind your views. We will share that learning with other practices, make recommendations about how others could achieve better results.

Please can you tell me about a good experience that you have had at your GP practice? (Prompt questions if needed: What made it a positive experience? Who was involved? How did you feel?)

What is the best thing about your GP practice? (Prompts: What makes it stand out for you? Why have you chosen this?)

If you could make sure your GP practice kept one thing, what would it be? Why is that? (Prompt if needed: one thing could be a service, facility, process, behavior or person)

If your practice could do one thing to make it even better, what would that be?

## Appendix C

### Enter and View-14.5.18

#### Tow Law Surgery

#### Programme

12.45pm-1.00pm	Photographs/Brief/Programme	
1.00-2pm	Survey	Claire
	Observation	Anne
	Survey	Mervyn
2-3pm	Survey	Mervyn
	Survey	Anne
	Observation	Claire
3-4pm	Survey	Anne
	Survey	Claire
	Observation	Mervyn
4.00-4.45pm	Evaluate/Findings/Recommendations	

# Tell us about your Surgery!

Monday 14<sup>th</sup> May 2018

1pm-4pm

## Tow Law Surgery (Charlton House)

Healthwatch County Durham is your local, independent health and social care champion. We are visiting your Surgery to find out what you think about the services it offers and would like to hear from residents, visitors and staff about your experiences.

**Come and tell us what you think is so  
good about**

## Tow Law Surgery (Charlton House)

[www.healthwatchcountydurham.co.uk](http://www.healthwatchcountydurham.co.uk)



## Appendix E

### **Enter and View Notes (Charlton House-Tow Law Surgery) 14.5.18**

#### **Preparation/before the day**

- Survey used was carefully put together beforehand to reflect the 'positive approach' to be taken. This was circulated to staff, volunteer reps and lead receptionist for comment.
- Surveys were left one week before the visit in the waiting area, on HWCD display table/stand, with a box for completed surveys to be deposited in. We realised that there might be people who would like to make a comment about the services who were not going to be around on the day of the visit.
- Posters were displayed in the doctors surgery two weeks before the visit
- The Lead Receptionist (Fiona Soulsby) briefed the staff before the day
- Volunteer Support Lead (Claire Cowell) visited the centre one week before, to consider areas such as layout, Introductions, venue space and safety procedures (CC carried out Risk Assessment), procedures for taking photographs and agreed use of a private space.

#### **Information Gathering**

- How we collected information, comments and observed!
- 2 Surveying/1 Observing/offering general info about HW and recording via photographs

#### **Numbers/Data**

- 20 written Surveys were completed on the day
- 0 written surveys were completed prior to us arriving
- Observation notes were taken by all 3 reps.
- Photographs were taken (where photographic consent was given)

#### **On the day**

Volunteers were briefed on:-

1. The physical/available space
2. How to introduce what we were doing
3. How the rota would work
4. The programme for the day
5. Refreshments and toilets
6. The use of Photographs
7. Introduced to staff
8. Sensitivity on when and when not to approach a person/user

Results/what people said/what we saw (where there is a / next to a comment, this indicates how many people said this)

## Survey

### Good Experience:-

- “Excellent Service” //
- “Generally good to get an appropriate appointment” ///
- “Life time’s good experience”
- “Reception staff are excellent-you are treated with dignity”
- “The notices and information are good here”
- “Great staff here”
- “I had a baby 10 weeks ago-get an appointment very quickly” //
- “The doctor listens to what you have to say and asks my own opinion about how best to help-this makes me feel like I count” //
- “Good patient-Doctor relationship”
- “Efficient and friendly staff when I need them but I don’t come in very often, I keep myself fit by walking 30/35 miles per week” //
- “The staff went out of their way in helping me change information that I had downloaded from online which makes my life much easier”
- “No problems” ///
- “Prescription is always ready at the surgery”
- “Good Time keeping”
- “Straight forward referral for cataract”
- “Appointments explanation leaflet available is good”
- “Easy system for getting prescriptions”
- “Good experience where my son (who has type 1 diabetes) got the wrong piece of equipment for his illness-the doctor over ruled the order and sorted this out very quickly, rather than going back through waiting for a new appointment again with diabetic nurse etc., long wait to get sorted-I have 6 children to manage so this was a life saver”

### Best thing about the practice:-

- “You are treated with dignity, listened to and things are clearly explained” //
- “Surgery is kept clean and tidy” //
- “Phoned today-got an appointment on same day”
- “Reception staff very good” //
- “Background music used to be a bit depressing, better now after users gave their feedback on this”
- “I am seen by the practice nurse very quickly”
- “It’s on my doorstep-have used the surgery all my life” ///
- “Nothing-I don’t know the staff”
- “All G.P.’s have been here for many years-locum not good”
- “The practice nurse Kathryn is the best thing about the surgery”

- “Always available”
- “After Crook surgery-this practice is brilliant” //
- “Chose to stay registered with Tow Law although Crook is just across the road to my house”
- “Friendly staff”
- “Able to see the one GP I want to”
- “Link with other surgeries is good”
- ”Can get an appointment ok”
- “Using online appointments for me is useful”

If you could make sure your GP practice kept one thing, what would it be?

- “To keep services available, in line with bus timetable”
- “Keep the same staff”
- “No changes please” //
- “Appointment system” //
- “Same doctors please-creates a trust-important as familiar faces not strange makes more comfortable”
- “Same doctors and nurses to me gives a confidence that staff already know you as a person”
- “When you get to a certain age you just go along with it-don’t care too much”
- ”Same reception staff”
- “Nothing” //
- “Appointment for particular injection”
- “Keep the diabetic clinic”
- “Maintain any in-house services wherever possible”
- “The approachable staff-with children’s Mental Health issues, they are understanding and don’t belittle issues”
- “Even though I live nearer to Crook surgery, I will stay at Tow Law” //
- “Handy for me here”
- “Social bit of service is nice”

One thing to make it better

- “I like the posters but to rotate ideas/themes as too much!”
- “Reduce posters-target topics as too much information”
- “Better opening hours-weekends” ///
- “Appointments could be better” ///
- “No-happy enough” /////
- Receptionists share-prefer same people”
- “Keep better records of referrals”
- “Improve confidentiality at reception when talking to staff”
- “Water fountain to drink when waiting”
- “Nice to have some friendly people around to chat to, today!” //

## Observations

- We were not asked to sign in and no health and safety brief.
- There was a television (turned off) but nice to have the radio playing low in background.
- There were limited magazines for patients and very little for children to play with to use and enjoy whilst waiting.
- CQC report was on display
- There was a box installed for patient feedback/surveys
- There were lots of information leaflets on display in the surgery
- List of common prescribed medicines and prices were displayed
- Public toilets
- Some peaceful pictures displayed that created a nice feeling
- The lighting was good.
- GP's called patients rather than using a digital display, this was more personal
- Reception staff –difficult to observe the patient-staff interaction, because of Perspex screen/talk panel installed.
- Patients in the main, didn't wait long to be seen.
- Patients were happy to talk to us
- No water or coffee machine
- Patients seemed happy with the layout of the surgery
- From a 'Dementia Friendly' point of view door did not say entrance or exit (we witnessed one elderly lady not be able to understand secondary door access). Carpets looked adequate but tiles, because of pattern, might be confusing. Information overload on display
- There was a lack of privacy at reception, even when not busy, people can hear what is being said.
- Hand sanitising gel at reception

## Photographs

- We took 9 photos (and have photo consent for these)

## After the event

- We spoke to the reception staff and gave an informal de-brief around what we'd generally heard and seen.
- Staff were happy to hear that patients had generally said nice things about the staff and were not surprised to hear that some patients chose Tow Law surgery as their practice, although they may have had an alternative surgery, nearer to their residence