



Enter and View Report
Ushaw Moor Surgery, Millyard House,
Cochrane Terrace, Durham DH7 7QH
Monday 2nd July 2018



Authorised Representative: Paul Stokes

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.

Ushaw Moor Surgery (one of five practices that are part of 'The Medical Group') requested a visit as they were keen to listen to their patients and learn from their feedback.

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 Joanna Simpson (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

As this surgery is small we used one authorised representative and carried out 19 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.

Two 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:

Professionalism and Empathy of staff

“Dr. Whally, Dr Gandhi and Dr. Muse are excellent, they listen”

“When I was pregnant-always a lovely experience seeing Allison the midwife. Regular nurse who administers baby vaccinations is brilliant”

“Staff can’t do enough for you”

“Staff very approachable-feel listened to and taken care of”

“Staff explain everything”

“Friendly podiatrist and good service”

“Great system/communication between doctors and chemist”

“Pleasant and friendly reception staff”

“My good relationship with the doctor, he knows me very well, 34 years my GP”

“Receptionists and doctors-No bad attitude ever, really lovely people”

“Sometimes doctors don’t give eye contact-reading computer screen when I’m talking to them, doesn’t instil confidence that I’m being listened to”

Appointment availability/system

“Even when my appointment runs over 12 noon (when surgery closes) they never rush me out”

“Get seen to with right prescription”

“Great system/communication between doctors and chemist”

“I physically walk down to the surgery before 8am to get an appointment, can book online but easier to come here”

“If you want to see the same doctor have to wait but I understand and am happy with that”

“Can make an appointment when needed”

“Can get seen quickly-see a variety of nurses”

“Have to ring 111 then they get me an appointment, very difficult-I have long term conditions so need to be seen”

“Only bug bear is that the phone is always engaged-if poorly I have to walk over at 7.45am”

“Care navigation-Don’t want receptionists knowing my business, this is a small village”

“Can’t we have a numbered queuing system for phone calls?”

Services and the Environment

“Spacious waiting room”

“Home visits good”

“Chance to see same doctor is important”

“All of my experiences are good here-whatever had, sorted it for me, if not helped sent to hospital for follow up. Taken good care of here”

“Good with Children”

“They keep on top of disabled daughters conditions”

“Good Location”

“Better car parking since extended”

“Prescription system very efficient”

What we observed

The patients we observed in Ushaw Moor Surgery appeared to be happy with the services overall

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

We observed a clean and friendly surgery with good access and parking. There was soft background music playing as well as a TV monitor screen running, giving health related information. The reception area had a glass screen but it opened allowing staff to fully interact with patients. The surgery was considered generally 'Dementia Friendly' in terms of colour and use of texture. Layout of the seating allowed for private waiting but made it difficult to see digital notification screen. All seating was of a similar height.

We observed lots of posters and notices-which did not seem to be in any type of order, on the walls

We observed that although there was no water machine available, it was provided when patients asked.

We observed that there was a private space available that could be used.

Service and Positive social interaction

We observed that whilst there was a notified policy on lateness to appointments, it was clear that staff tried not turn anyone away, in this case and patients did not wait long to be seen

It was clear that patients knew some of the staff by their first name and there was some social interaction.

We were asked to sign in and complete patient confidentiality form as well as given a visitor badge to wear

Patients were very happy to talk to us and seemed content with the service overall.

Recommendations for Ushaw Moor Surgery

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

1. One of the most conveyed messages from the patients on the day, was how happy they were with the staff. The patients very much valued and appreciated the good relationships and service they receive at the surgery. Doctors, Nurses, receptionists, Midwife, Podiatry all were mentioned as offering a very good service to users. Staff behaviours and culture is clearly to be celebrated and retained
2. Being able to make an appropriate appointment was a priority for patients and although some indicated that this part of the system was useable, quite a lot of patients indicated that it can be difficult to get an appointment and this should be made easier. Suggestions from patients included an improved telephone system, such as 'number in the queue'. Perhaps this could be looked at as this happens successfully elsewhere
3. Patients told us that they were happy with the physical space and especially how important the location of the surgery was. They were satisfied that parking was good and that the service was easy to physically access. We noted that the surgery came across as Dementia Friendly but users would benefit from having the emergency pull in the toilet changed from white to red, so it could be easily seen against the light paintwork. Also the addition of maybe two higher level seats would make access easier for some patients. We were told that in terms of improvement, users were generally happy.
4. There were lots of positive aspects observed with regard to the layout of the surgery such as the good access, airiness and friendly atmosphere. There was a good amount of information and publicity displayed although this did not seem to have any order. More clearly defined themed areas of information may make it easier for users to access information on particular areas of health and support.
5. As part of the de-brief we were told that, on occasion, the private space at the surgery is made available to services that look to support patients in particular need (Mental Health issues/Drug and alcohol support, for example) and this had proven beneficial since the parent room in the local school had been closed, where parents had the chance to informally meet and chat about other issues. Really positive example of being pro-active in assisting local users with other types of support. Perhaps this could be used as apposite example throughout the group

Service provider response

Thank you Healthwatch for visiting our practice at Ushaw Moor, 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 is testament to our dedicated staff members, where patients identified that they were happy with staff, at this practice. We do try our best in making sure that staff have the relevant training and support so that their individual developmental needs are met. This, we feel, results in staff being valued.

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 will alleviate some of the pressure, in this area. The telephone system has been raised at the local 'Patient Group'-who have agreed to use a new system in line with the 'Care Navigation' procedure.

We were glad that people noted that car parking is now improved due to the car parking site being extended and this is working well.

We understand that users are happy with the surgery layout but we are looking at whether this meets all user's needs.

Although users indicated generally that they were happy with the layout we understand that notice boards were not being maintained effectively, so we have considered this as part of the Patient reference group, who have looked at colour, Dementia friendly and other themes in order to make better use of information at the surgery.

Where possible we are happy to support local community projects, where we have space available and this has a proven benefit for the local neighbourhood.

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)

Joanna Simpson (Lead Receptionist)

Appendices

Appendix A



Healthwatch County Durham
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Meadowfield Industrial Estate
Durham DH7 8XL
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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 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 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-2.7.18

Ushaw Moor Surgery

Programme

8.55am-9am	Brief/Programme	
9.00-10.0am	Observation	Claire
	Survey	Paul
10-11.00am	Survey	Claire
	Observation	Paul
11-12noon	Survey/Observe	Claire
	Survey/Observe	Paul
12 noon-12.30pm	Evaluate/Findings/Recommendations	

Tell us about your Surgery!

Monday 2nd July 2018

9am-12noon

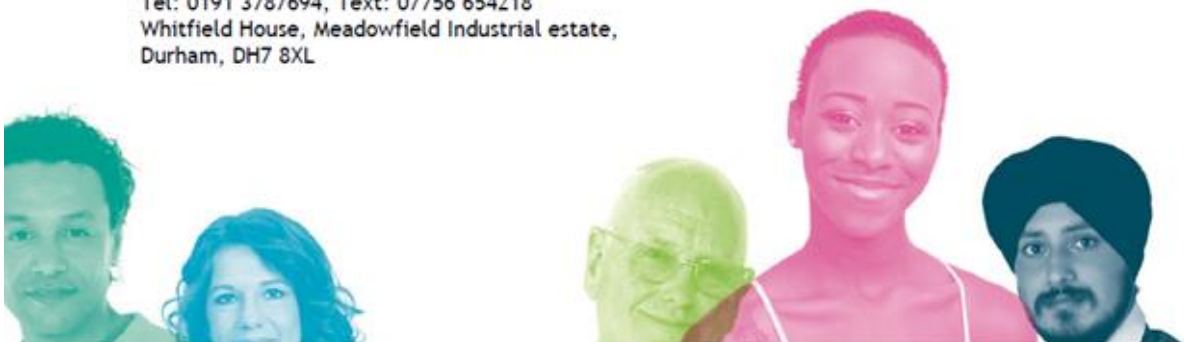
Ushaw Moor Surgery

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
Ushaw Moor Surgery**

www.healthwatchcountydurham.co.uk

Tel: 0191 3787694, Text: 07756 654218
Whitfield House, Meadowfield Industrial estate,
Durham, DH7 8XL



Appendix E

Enter and View Notes (Ushaw Moor Surgery) 2.7.18

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 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 (Joanne Simpson) 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!
- 1 Surveying/1 Observing/offering general info about HW

Numbers/Data

- 19 written Surveys were completed on the day
- 2 written surveys were completed prior to us arriving
- Observation notes were taken by both reps.
- Photographs were not taken

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:-

- “Dr Whally, Dr Gandhi and Dr. Muse are excellent”/////
- “When I was pregnant-always a lovely experience seeing Allison the midwife. Regular nurse who administers baby vaccinations is brilliant” /
- “No problem with staff-very friendly especially Dr Gandhi”//
- “Even when my appointment runs over 12 noon (when surgery closes) they never rush me out” /
- “Good Parking”/
- “get seen to with right prescription”/
- “Staff can’t do enough for you” ///
- “great system/communication between doctors and chemist” /
- “Staff very approachable-feel listened to and taken care of”///
- “Staff explain everything” /
- “Friendly podiatrist and good service”/
- “Pleasant and friendly reception staff”//
- “I physically walk down to the surgery before 8am to get an appointment, can book online but easier to come here”/
- “All of my experiences are good here-whatever had, sorted it for me, if not helped sent to hospital for follow up. Taken good care of here”//
- “Good with Children”//
- “They keep on top of disabled daughters conditions”/
- “Good experience with being brought in and sent to hospital”/
- “Nurse good-I got diagnosed quickly”/

Best thing about the practice:-

- “Good Doctors” ///
- “Its local to me” ////
- “staff are brilliant-they listen to me”/
- “Location” /////
- “Better car parking since extended”//
- “Prescription system very efficient”/
- “The people” /
- “If you want to see the same doctor have to wait but I understand and am happy with that”/
- “My good relationship with the doctor, he knows me very well, 34 years my GP”/
- “Can make an appointment when needed”/
- “Booking an appointment is easy-if you don’t want to see the same doctor”/
- “Can get seen quickly-see a variety of nurses”/

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

- “Midwifery service”/
- “Don’t want to be segregated-so all one level seats”/
- “Location” ///
- “Other services-Diabetic clinic for example” /
- “Spacious waiting room”/
- “Nurses”///
- “Doctors-Dr Gandhi really good, he listens”//
- “All staff-easy to get on with”/
- “Home visits good”/
- “Nurses put you at ease-tend to see same one”/
- “On the day appointments”/
- “Receptionists and doctors-No bad attitude ever, really lovely people”/
- “Flexibility-one time came late by mistake but still got in to see a doctor”/

One thing to make it better

- “Appointment system is poor!”//////////
- “Receptionists often rude and think they are trained GP’s. Was once even challenged on why I took my 5 month old daughter to A&E when passing blood-I did this on the ‘111’s advice”/
- “Getting an appointment-one month wait” /
- “Sometimes doctors don’t give eye contact-reading computer screen when I’m talking to them, doesn’t instil confidence that I’m being listened to ” /
- “Podiatry only is once a week on a Monday-more regularly would be good. Came one Monday (ingrown toe nail)-went home but stubbed my toe-had to wait a full week again to see her in bad pain” /
- “Have to ring 111 then they get me an appointment, very difficult-I have COPD and Crohn’s disease so need to be seen”/
- “chance to see same doctor”////
- “Difficult to get appointments on the same day”/
- “Happy with the service”/
- Only bug bear is that he phone is always engaged-if poorly I have to walk over at 7.45am”//
- “Continuity of care between doctors-difficulty about postcode, this wasn’t possible”/
- “Care navigation-Don’t want receptionists knowing my business, this is a small village. People will not ring in or they will fill up A&E dept.’s, some people may even die”//
- “No complaints with doctors-worried about hospitals”/
- “No appointments left by 8am”/
- “Can’t we have a numbered queuing system for phone calls?”//

Observations

- We observed that although there was no water machine available, water was provided when patients asked for it
- There was background music playing at an appropriate level.
- Private seating was laid out well but all were low level seats. Seating was far enough away from reception to respect individual privacy when talking to the receptionist but this might be compromised if there was a queue
- Reception had a glass screen but it was able to be opened through a sliding runner
- There were lots of posters/publicity shown around the walls but did not seem to have obvious order
- There was a monitor screen on the wall giving information about ailments and changes to look out for
- We were asked to sign in and complete patient confidentiality form as well as given a visitor badge to wear
- Patients did not wait long to be seen
- Some patients sat with their backs to the electronic sign which showed the name of the person to go to their appointment, so could not see it, however it did beep when notifying next person.
- Patients knew some of the staff by their first name and there was some social interaction-the layout of the seating did not enhance this
- We observed that there was a private space available that was used-we were informed that other support services are allowed to use the space to support patients (for example mental health/Drugs/Alcohol support) this had proved valuable when Local school had closed its family room where parents used to go to meet.
- Whilst there was a clear policy on lateness to appointments, it was clear that staff tried to not turn anyone away, in this case
- We observed that the surgery was clean and spacious. The toilet has appropriately coloured support bars but white emergency pull

Photographs

- We took no photographs

After the event

- We spoke to the lead receptionist (Joanna Simpson) and gave an informal debrief around what we'd generally heard and seen.
- Staff were happy to hear that patients had said nice things about the staff and the services.
- We talked a little about 'Care Navigation'-Many Patients praised the staff and spoke very highly of them during the visit- so although not started yet, it may be interesting to see what the impact will have on the service when this new procedure is implemented.