



Enter and View Report

**Clevedon Medical Centre
10th January 2018**



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Details of the Visit

Location

Clevedon Medical Centre, Old Street, Clevedon BS21 6DG

Date and Time of Visit

10th January 2018; 8.30am to 10.30am

Enter and View Representative

Karen MacVean

Registered Provider

Clevedon Medical Centre

Type of Service

GP Surgery

Specialisms

Clinics for the management of chronic diseases such as asthma and diabetes and a wide variety of other medical services including ante and postnatal care, minor surgery, childhood vaccinations and well-person check-ups.

Surgery Manager

Julie Davidson, Business Manager

Acknowledgements

Healthwatch North Somerset Authorised Enter and View Representatives wish to thank the staff and patients at Clevedon Medical Centre Practice.

Purpose of the Visit

Healthwatch North Somerset is carrying out a series of visits to GP Practices in North Somerset to ascertain the experience and opinions of local patients. Clevedon medical Centre was selected as part of our series of North Somerset GP Enter and Views of GP Practices in North Somerset.

Healthwatch North Somerset made the decision to visit GP Practices in North Somerset to observe the patient experience of using the services. Feedback gathered from local people provides a lot of positive feedback and there are numerous examples of good practice. Access to primary care is a theme frequently identified in the intelligence gathered by Healthwatch North Somerset and Enter and View visits allow observation of the patient environment.

The purpose of this enter and view visit was aimed at outlining what was observed and recognising, highlighting and sharing of good practice and making any suitable suggestions for improvement to the service concerned.

The report may also make recommendations for commissioners, regulators or for Healthwatch North Somerset to explore particular issues in more detail. Unless stated otherwise, Enter and View visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch Enter and View visit are referred to the service provider and appropriate regulatory agencies for their rectification.

This report relates only to this specific visit and feedback received directly by Healthwatch North Somerset during the two hours of the Enter and View visit. It is not representative of all service users, only those who contributed within the restricted time available, through interviews or other feedback.

Description of the Service

Clevedon Medical Centre is located in Clevedon which is a coastal town situated 12 miles from Bristol and 8 miles from Weston Super Mare.

Clevedon Medical Centre offers a full range of primary health facilities to the 16,000 patients that are registered with the Medical Centre.

There are health visitors, district nurses, midwives, psychology and counselling services on-site and there are fully equipped treatment rooms. All the GP Principals and the Registrars have their own consulting rooms.

The Medical Centre is open 8.30am to 6.30pm Monday to Friday. The Centre offers out of hours appointments delivered through pre-booked appointments on some Saturdays, normally between 8.30am to 12.30pm (occasionally these hours are extended). Extended out of hour surgeries on Monday from 7.30am to 8.30 am; Tuesday 7.00am to 8.30am and 6.30pm to 8.30pm. Patients booking an extended hours appointment may be seen at another surgery, but all GP's will have access to the patients' medical records electronically.

Planning for the visit

The visit was an announced visit, with the Clevedon Medical Centre Business Manager been given two weeks' notice. We sent a confirmation of visit letter, posters and leaflets to the medical centre to inform patients, relatives, carers and staff about the Enter and View visit and about the role of Healthwatch North Somerset. The timings of the visit were at the request of the Business Manager. As part of the planning the Enter and View Representative did some background research - online and out of hours.

How was the Enter and View Conducted?

One Enter and View Representative carried out the visit. The Enter and View Representative met with Clevedon Medical Centre Business Manager at the start and at the end of the visit.

The Enter and View Representative observed the condition of the premises and the interaction between the staff and patients.

The Enter and View Representative was not approached by any members of the public or staff members. The information and evidence detailed in this report is collated from speaking to Clevedon Medical Centre Business Manager and the Enter and View Representative's own observations.

The Enter and View Representative sought background information and reviewed the website to note the information available to patients and made a call out of hours to note the recorded information given to patients.

How were the findings recorded?

Comments and quotes were recorded by the Enter and View Representative whilst observing the Practice and engaging with the Business Manager. Observation and prompt record templates were used to make notes, these were typed up after the visit by the Enter and View Representative. The report was compiled and written based on the notes and records of the visit.

Communication with the Manager

The Enter and View Representative met with the Practice Business Manager immediately before the Enter and View visit. Three prompt questions were used to establish instances of good practice, evidence change occurring because of patient feedback and identify potential improvements. The three prompt questions and responses are recorded below.

Q1. Are there any examples of good practice that you would wish to share with the rest of the primary care community?

- We have developed a new dementia clinic for our patients. We provide a dementia review service for the patients and carers' reviews at the same time, with support from charitable organisations to signpost patients and their carers to relevant support services.
- We developed a new chronic disease education service for all relevant patients in 2017 and feedback is excellent from patients.

- We are developing a new clinic for patients with IBS (Irritable Bowel Syndrome) and will be delivering this new service in February 2018. Service includes medical review, medications review, education in IBS and signposting to support services.
- Later in 2018 we will be delivering a new service for stroke patients, modelled on the IBS service.
- We intend to provide a new service for patients with Coeliac Disease and Diverticulitis, modelled on the IBS service.
- The Practice has its own Pharmacist, Paramedic and Physician Associate alongside a team of Advanced Nurse Practitioners. The Physician Associate is a medically trained professional who sees patients with minor illness in the Surgery. Whilst the Paramedic visits patients in their own homes and can assess the urgent medical care needed and if this can be delivered by the practice team or if the patient needs to go to hospital or be referred for community nursing.

Q2. Do you have any examples of how the Practice made changes following feedback from patients?

- We employ a specialist elderly care nurse who manages up to 400 patients in Clevedon's residential/nursing care homes to ensure sufficient support for all patients. Our Doctors conduct regular 'ward rounds' of all care homes on a monthly basis to support care home staff and help avoid unplanned admissions.
- Patients have requested IT support to help them with online access and we will be providing IT support and facilities in the coming months.
- Patient feedback from our weekly Saturday morning 'Improved Access' clinics has been so positive, we have been able to extend the range of services available. Patients specifically wanted to be advised of their position in the telephone queue, so when we switched our telephone service contract, we made sure this functionality was maintained.
- Patient feedback for Clevedon Leg Club patients has been very positive and so the Practice continues to support the weekly clinic with staff.
- We have produced many patient leaflets which inform patients about specific services and help them to access healthcare. We also produce regular Patient Newsletters which are available in the waiting rooms and on our website. Leaflets and newsletters were produced as a result of patient feedback.
- Our patient population is approximately 16,000 patients and in North Somerset, we have the highest percentage (23%) of patients in the age range 65+. Many of our patients have complex needs and multi-morbidities. It is therefore important that they have continuity of care and sufficient time in appointments. We support these patients by providing sufficient acute care 'on the day capacity' to ensure enough routine appointments are available to pre-book, and in December 2017, we moved all our GP appointments over to 12 minutes from 10 minutes.
- We also identify 'palliative care' and patients in crisis as 'gold standard' so that when they contact the medical centre to access services we ensure their needs are accommodated on the day. This helps to ensure patients do not need to go to A&E or have an unexpected, unplanned admission to hospital.
- Finally. Our acute care 'on the day' service enables the vast majority of patients to access care, and not be worried that they will not be seen or helped on the same day. We have an extensive minor illness clinic to support the GP's in this service.

Q3. From the surgery's perspective, are there any changes or recommendations you would make to improve access to services at the practice for patients?

- We are trying to encourage more patients to have online access to book appointments and order repeat prescriptions. Supported by our Patients Participation Group members, we will deliver IT support for patients shortly.
- In 2018 we are developing a new 'Results by Text' service for the 70% of all test results which are positive for our patients. We hope this service (which is going to be offered to patients for them to opt into) will reduce the need for them to phone the surgery to discuss 'normal results'. The text message results service will be sent to a patient by the clinician (GP or Nurse).
- We would like to encourage more patients who are at work Monday-Friday to access their healthcare on Saturday mornings when it may be more convenient for them. We offer routine GP appointments, chronic disease, sexual health and baby checks

Observations and Findings

The Enter and View Representative observed the following:

External Building Condition

- Clevedon Medical Centre is a large, two storey modern and purpose-built brick building that looks in good order and stands in its own flat grounds accessed off a main road
- The Medical Centre has a clearly visible sign
- There is a clear sign marking the entrance to the Medical Centre and the Pharmacy
- There is an atrium entrance which has an intercom for patients to access pre-booked appointments out of hours
- In the atrium there is clear information about who to ring if the Medical Centre is closed and how to use the intercom to gain access to the building for pre-booked out of hour appointments
- There is a Pharmacy within the Medical Centre's grounds

Internal Decoration, Cleanliness and Furnishings

- Internally the building was observed to be clean, spacious and in good decorative order
- The public areas were light and airy
- The treatment rooms observed looked very clean and well organised
- All the internal walls were painted in neutral light shades with some art work on the walls
- There were numerous information boards on the walls in different areas of the centre, including corridors
- There were good clear signs for all the designated areas including reception, consultation and treatment rooms
- There are stairs and a lift to the upper floors where the offices were situated. This area was accessible only by staff electronically
- The toilet facilities were observed as clean and well stocked with toilet paper and soap

Outside Clevedon Medical Centre

- The level grounds around the Medical Centre include a well-maintained footpath leading from the road to the pharmacy and the Medical Centre
- The Medical Centre has its own car park that wraps around on two sides.
- There are clearly marked and visible disabled parking spaces.
- There are neat well-maintained shrubbery beds around the front and side of the building
- There is a separate purposely-built Pharmacy on site that is run by a private company
- The Medical Centre and its grounds are accessed from a busy main road
- There are clear visible signs directing the public to the Medical Centre, the entrance of the building and the onsite Pharmacy
- There are bus stops opposite and on the same side of the Medical Centre

Access to Clevedon Medical Centre

- Access to the Medical Centre is through two sets of automated doors into a glass atrium, the doors are wide and would easily accommodate wheelchairs and buggies
- Out of hours access is obtained through using the intercom in the atrium to get through the second set of doors. There were clear instructions on who to contact out of hours and how to use the intercom

Reception Area

- The reception desks are visible and clearly marked
- The reception desks are large and in an L shape.
- There was a combination of high and low levels of desks for ease of accessibility to the receptionist
- There was no glass between the receptionist and the patients
- There were two receptionists on duty side by side on the main part of the receptionist desk. An occasional short queue formed at the reception desks
- The receptionists all wore Identity badges
- There was little privacy at the main reception desk and often the patients would be side by side talking to the receptionists. There was however more privacy to the side of the main receptionist desk at a smaller more enclosed reception area
- The staff were approachable and friendly
- There was a sign up to advise patients that due to staff shortage that day, there may be some delays in being seen

Waiting Room

- There were plenty of fabric covered seats set out around the side and in the middle of the main waiting area
- There were three waiting areas observed: one just off the main waiting room, one for the treatment room and one which was being used for the post-natal clinic on the day of the Enter and View visit. Though the latter two waiting rooms were much smaller there still appeared to be enough seating available
- In all the waiting rooms there were chairs that had arms to give extra leverage for less mobile patients
- The flooring in the waiting areas was a mixture of carpet tiles in the main area and lino in the treatment room waiting areas. All flooring was observed to be clean and in good order

- The waiting area and the corridors to the waiting area were very spacious with lots of room for wheelchairs or buggies to manoeuvre around
- There were visible signs for reception, toilets, including disabled toilets and baby changing facilities; all were open and accessible
- There was clear guidance on what patients needed to do when they arrived for an appointment or needed to speak to a receptionist in all the reception areas
- There were two electronic sign-in boards in the main and treatment waiting rooms with hand sanitiser gel close by
- There was a secluded area designated for mothers to breastfeed in the main waiting room; there was a notice to advise mothers to ask at reception if they wanted to use the space
- There was a room off the main waiting room providing health promotion activities including blood pressure
- Water was provided in the main waiting room
- Very muted background music was playing in the main waiting area
- There were sick bags available
- There was an area screened off for patients who were taken ill
- Hearing loop signs were visible in main waiting room
- Repeat prescription boxes were available in main and treatment waiting rooms
- Patients were called in for their consultation or treatment in various ways, this included nurses collecting patients in the main and the treatment room waiting areas and an electronic announcement system used by the GP's to call their patients from the main waiting room.
- Most of the admin and nursing staff were observed wearing identification badges, no GPs were observed

Information Boards/Leaflets

- The Mission Statement was displayed in the atrium
- There was a list of Practice staff but no photos
- There was a TV screen in the waiting room with a rolling programme of information which included the Medical Centre on-line services, opening hours, extended out of hours arrangements, results by text service to remind patients of appointments, stop smoking clinic details, Family and Friend test, repeat prescriptions, CQC inspection and medical advice for a range of conditions
- There were a number of information boards observed in the waiting rooms, reception area, atrium and corridors.
- Boards included information about regulatory responsibilities (which included the complaints process), research projects, the Patient Participation Group, dementia research, Healthwatch North Somerset (including a poster advertising the Enter and View visit), health and social care and mental health.
- Family and Friends test was available but not easy to locate as it was at the side of the reception desk
- No Carers Board was observed
- Apart from the availability of information in large print on request, no notice was observed about information being available in other formats
- There was relevant health information in the toilets
- There was a Medical Centre monthly newsletter available in the waiting areas

- Leaflets and information cards were available for a range of health and treatment options
- All the information provided including the Health and Safety appeared up to date

Patient Contact

- No Patient contact was made

Communication with Business Manager at End of Visit

At the end of the Enter and View visit the representative met with the Business Manager to clarify some issues that were unclear. Responses to the queries are below:

- Family and Friends test is advertised on the TV screen in the waiting room, it is placed in a more private area for patient's confidentiality
- The results of the Family Friend test are published monthly on the website
- We are going to be putting up a 'You Said We Did' board in the near future, but we do provide a Practice monthly newsletter
- Language line would be available for patients on request, we respond to need for example, currently the Practice had two patients who are profoundly deaf, and we always support them with signers

Good Practice

- Monthly Practice newsletter
- Private areas provided for people who are taken ill and for breastfeeding mothers
- Practice has own practising Pharmacist, Paramedic and Physician Associate and Advanced Nurse practitioners
- Specialist clinics for people with particular conditions
- Practice has a specialist elderly care nurse
- Doctors conduct regular 'ward rounds' of care homes on a monthly basis to support care home staff and help avoid unplanned admissions
- Gold Standard service for palliative and end of life care patients to ensure they get the care they need on the same day
- Acute care 'on the day' patient service which provides reassurance to most patients that they will be seen on that day and which is supported by a minor illness clinic
- Extension of GP appointments from 10 minutes to 12 minutes.
- Results-by-text service

Out of Hours

As part of the background research the Enter and View Representative noted the following details when they phoned the Medical Centre out of hours: -

- The Medical Centre name and opening hours were given
- Callers were advised to either call to NHS 111 (informed it this is a free call) or 999 if urgent
- The call ended abruptly, the caller not informed that they could not leave a voicemail

Review of the Practice Website

As part of the background research the Enter and View Representative noted the following details when researching the website:

- Viewed truncated view of website on mobile phone
- Had to click link to go on full website to find the out of hours phone number
- Was able to view the full website after clicking on the link
- On the full website the opening hours were easy to find and were consistent with the Medical Centre out of hours phone message
- The website advises that 111 is free to call
- It was easy to find the NHS 111 logo and when clicked on took the user to NHS Choices
- The information about making complaints was found quite easily under Suggestions
- There was no information sheets or leaflets on making a complaint available to print out
- The website advised users that they could contact the Health Service Ombudsman about their complaint
- There was information about the catchment area served by the Medical Centre
- There was information for the user on how to register as a new patient
- Overall it was easy to navigate the Medical Centre website but there was no information given on how to directly contact the Practice Manager

Recommendations

Healthwatch regulations stipulate that service providers and commissioners have a duty to respond to local Healthwatch reports and recommendations within 20 working days, in writing, to acknowledge receipt and to explain what action they intend to take; or if they do not intend to take action they must explain why. (Health and Social Care Act 2012: Addendum to summary report: issues relating to local Healthwatch regulations).

Healthwatch North Somerset recommends the following based on the Enter and View Representative's observations and feedback received by the public in North Somerset.

We believe the following recommendations to be achievable, affordable and evidence based:

- Practice opening hours displayed in the Atrium
- Carers information board made available
- Staff board include photos with names

Provider Response

The Business Manager of Clevedon Medical Centre provided corrections for factual accuracy, all have been included in this report.

About Healthwatch North Somerset

Healthwatch North Somerset is the local independent voice for health and social care services. We work with local people to improve services for people who live, or access services in North Somerset, gathering local views and experiences and acting on them to make local services better, now and in the future.

Healthwatch North Somerset's statutory function and remit, which is laid out in The Health and Social Care Act 2012, is to provide a voice for people who use health and adult social care services, by:

Influencing

- Giving people an opportunity to have a say about their local health and social care services, including those whose voice isn't usually heard
- Taking public views to the people who make decisions - including having a representative on the Health and Wellbeing Board (People and Communities Board in North Somerset)
- Feeding issues back to government via Healthwatch England and the Care Quality Commission (CQC)

Signposting

- Providing information about health and social care services in the local area
- Advising people on where to go for specialist help or information (signposting)
- Helping people make choices and decisions about their care
- Working closely with other groups and organisations in the local area.

Enter and View

To enable Healthwatch North Somerset to gather the information it needs about services, there are times when it is appropriate for Healthwatch North Somerset staff and volunteers to see and hear for themselves how those services are provided. That is why the government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch North Somerset representatives to enter premises that service providers own or control to observe the nature and quality of those services.

Healthwatch North Somerset Enter and Views are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch North Somerset to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch North Somerset Enter and View Authorised Representatives are not

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required to have any prior in-depth knowledge about a service before they visit. Their role is to observe the service, talk to service users and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report.

Legislation allows ‘Enter and View’ activity to be undertaken with regard to the following organisations or persons:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities
- a person providing primary medical services (e.g. GPs)
- a person providing primary dental services (i.e. dentists)
- a person providing primary ophthalmic services (i.e. opticians)
- a person providing pharmaceutical services (e.g. community pharmacists)
- a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or care services (e.g. adult social care homes and day-care centres).

Key Benefits of Enter and View

- To encourage, support, recommend and influence service improvement by:
- Capturing and reflecting the views of service users who often go unheard, e.g. care home residents
- Offering service users an independent, trusted party (lay person) with whom they feel comfortable sharing experiences
- Engaging carers and relatives
- Identifying and sharing ‘best practice’, e.g. activities that work well
- Keeping ‘quality of life’ matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a ‘critical friend’, outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and carers play an integral part in local commissioning.

Relevant Legislation

- The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).
- The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013.” (28 March 2013).
- The Local Authorities (Public Health Functions and entry to Premises by Local Healthwatch Representatives) Regulations 2013. (18 February 2013).
- The arrangements to be made by Relevant Bodies in Respect of Local Healthwatch Regulations 2013.” (28 March 2013).



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