



Enter & View

Mawney Medical Centre

7 St Edwards Way, Romford RM1 3DQ

11 December 2017

*Healthwatch Havering is the operating name of
Havering Healthwatch Limited
A company limited by guarantee
Registered in England and Wales
No. 08416383*



What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care in the London Borough of Havering. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff, and by volunteers, both from professional health and social care backgrounds and lay people who have an interest in health or social care issues.

Why is this important to you and your family and friends?

Following the public inquiry into the failings at Mid-Staffordshire Hospital, the Francis report reinforced the importance of the voices of patients and their relatives within the health and social care system.

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is your local organisation, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

Your contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups, NHS Services and contractors, and the Local Authority to make sure their services really are designed to meet citizens' needs.

***'You make a living by what you get,
but you make a life by what you give.'***
Winston Churchill

What is Enter and View?

Under Section 221 of the Local Government and Public Involvement in Health Act 2007, Healthwatch Havering has statutory powers to carry out Enter and View visits to publicly funded health and social care services in the borough, such as hospitals, GP practices, care homes and dental surgeries, to observe how a service is being run and make any necessary recommendations for improvement.

These visits can be prompted not only by Healthwatch Havering becoming aware of specific issues about the service or after investigation, but also because a service has a good reputation and we would like to know what it is that makes it special.

Enter & View visits are undertaken by representatives of Healthwatch Havering who have been duly authorised by the Board to carry out visits. Prior to authorisation, representatives receive training in Enter and View, Safeguarding Adults, the Mental Capacity Act and Deprivation of Liberties. They also undergo Disclosure Barring Service checks.

Occasionally, we also visit services by invitation rather than by exercising our statutory powers. Where that is the case, we indicate accordingly but our report will be presented in the same style as for statutory visits.

Once we have carried out a visit (statutory or otherwise), we publish a report of our findings (but please note that some time may elapse between the visit and publication of the report). Our reports are written by our representatives who carried out the visit and thus truly represent the voice of local people.

We also usually carry out an informal, follow-up visit a few months later, to monitor progress since the principal visit.

Background and purpose of the visit:

Healthwatch Havering is aiming to visit all health and social care facilities in the borough. This is a way of ensuring that all services delivered are acceptable and the welfare of the resident, patient or other service-user is not compromised in any way.

The Premises

Mawney Medical Centre is located in part of the Romford Shopping Hall complex on the edge of Romford Town Centre. Although not associated with the Medical Centre, there is a Boots pharmacy nearby. The Medical Centre is accessible both from within the Shopping Hall and through its main entrance, opening onto the Romford Ring Road. Ample car parking is available nearby and the main entrance is located next to bus stops served by a number of routes.

On entering the premises, the team felt that there was a good atmosphere. The Medical Centre was well sign-posted and the reception area was open. Staff were all approachable and friendly. It was also noted that, because of the size of the seating area and rooms placed around this, it would be difficult to hear what was being said at the reception desk, thus preserving privacy. The practice used electronic booking-in and announcements, and on-line booking of appointments. All furniture appeared to be of good quality, except for one sofa, which was badly split and might have presented an infection risk.

Full toilet facilities included one for the use of patients with a disability, and baby changing facilities. Hand gel was appropriately placed on the reception desk. There were very clear notice boards displaying a wide range of leaflets etc, including the Healthwatch poster advertising the visit. An explanation of how to get an appointment was also clearly displayed.

The practice uses Big Word (funded by the CCG) for translations when needed but no hearing loop was available for patients who have a hearing impairment.

The team was told that the number of patients listed at the practice had significantly increased following the building of new residential properties nearby. The growth in patient numbers had meant that considerable effort was required to ensure that the Medical Centre continued to function effectively. The number of patients on the list at the time of the visit was 11,157, but was increasing all the time.

The practice tries to encourage patients to be flexible about appointment times. While the aim is to offer appointments within 24 hours, if a specific doctor is requested then the waiting time is inevitably longer; staff told the team that some patients are not happy at having to wait.

A new phone system was being installed at the time of the visit.

Care and services

The surgery's core opening times are 8am-6.30pm every weekday, with an early start on three days from 7am.

Children and the elderly are prioritised for appointments.

Patients who have a Learning Disability are offered a health check annually, and those who do not take up the offer are contacted by staff to encourage them to attend for a check.

Prescriptions are issued electronically on the EPS system, and patients may choose to request repeats on-line or by calling at the practice. Test results are reviewed as they come in on a daily basis and passed to the GP's for follow up. Referrals to hospital or other areas of the NHS are also dealt with the same day to ensure continuity.

The Dementia Alliance Team is very active and the Patient Participation Group (PPG) hold monthly meetings with patients. The

practice has experienced few problems with obtaining new patients' notes from their previous practices.

The practice does not charge for immunisations and other services, but does so for insurance letters etc. Clear information is available as to the locations of blood test centres.

The practice offers minor surgical operations, for which referrals of patients from other surgeries are accepted.

As with most surgeries, patients failing to attend for appointments (DNAs) are a problem: the practice at this surgery is for patients to be given three chances to attend with chasing by text, phone call and letter.

The website is constantly being updated.

Identifying carers in the community can be difficult but, where possible, the practice is pro-active in identifying them.

Staff

Five doctors work at the practice, and six management staff are employed. There are two healthcare professionals and twenty-four reception/admin/support staff, most of whom are employed part-time and who have specific tasks within the practice.

Support for long terms conditions is available and one of the GPs specialises in diabetes, as well as the advanced nurse practitioner. Patients in the right age bracket are offered annual healthchecks which are seen by any of the GPs in the practice. At the time of the visit, there were 44 patients who had Learning Disabilities; they are offered annual healthchecks.

All training is completed regularly by staff, CPR being the most recent. Training is done at the surgery and staff can then print off their certificate, once completed, online. Meetings with all staff are held

monthly and the Patient Participation Group (PPG) reports in a monthly newsletter.

The Practice Manager has been employed at the Medical Centre since 2008. There are regular staff meetings; staff feel supported, and any changes to their way of working is ongoing daily.

The patient surveys latest figures show that around 55% of patients are happy with the service they receive.

On the day of the visit, two partner GPs, one salaried GP, one locum and one registrar were on duty in the morning; GPs attend to home visits after morning surgery. Managing a Medical Centre of this size is always going to be a challenge, but the PM felt that with the constant updating of systems and good practice daily targets were being met and that, overall, outcomes were good.

Patients' views

The team spoke to patients waiting in reception but were able to elicit only limited views about the practice as one patient was new to the practice, and another was attending for an appointment for the first time, so neither had much experience of the practice. A third patient explained that they had been waiting 25 minutes to see the GP while a fourth patient said that they had always had a good experience at the practice and felt treatment and understanding were very good.

Patients commented that booking an appointment by telephone could take up to 20 minutes as it was always busy (but if held in a queue, the patient would have a choice to wait or try again later) but when an urgent appointment was needed, the response was good, and it was accepted that any available doctor would be seen on these occasions.

Patients also commented that, although it is possible that elderly patients not used to using computers would find it difficult to use the "choose and book" system for referrals, the assumption was that they

would get a relative or friend, or Medical Centre staff to help them. No negative comments were made to the team about patients' experiences, although several did say that the standard ten-minute consultation time with a GP was not sufficient (which is a common complaint, not least by GPs themselves).

A patient (who had a learning disability) at this practice had told the team, prior to this visit, about difficulty they had experienced in arranging a health check. The team discussed the point with the Practice Manager, who was aware of the individual and explained that, as all doctors at the surgery cover such checks, the only problem that could arise would be the probably inevitable delay in getting an appointment with a specific doctor when asked for; if a patient could be a little more flexible about the doctor to be seen, making an appointment could be easier. If this were not acceptable then changing the GP practice is a possibility. Given the size of the existing list at the practice and its rate of increase, it seems likely that the difficulty of getting appointments with specific GPs will only get worse.

The practice is very sensitive to all patients needs and every request is adhered to where ever possible.

Conclusions

The immediate impression gained by the team was that this surgery was very busy but nevertheless sought to maintain a good level of service. Few complaints were received, and those that were, were dealt with immediately and followed up promptly.

The CQC report has a good all round understanding here, and the PPG are very active although getting people to attend the two monthly meetings is difficult as most of them are at work. I spoke to the chairman and his wife on this, who were very positive about how the practice is run. There are between 12 - 14 people on the PPG at the moment.

Recommendation

That consideration be given to installing a hearing loop for the benefit of patients who have a hearing impairment and use hearing aids.

Healthwatch Havering thanks all service users, staff and other contributors who were seen during the visit for their help and co-operation, which is much appreciated.

Disclaimer

This report relates to the visit on 11 December 2017 and is representative only of those service users, staff and other contributors who participated. It does not seek to be representative of all service users and/or staff.

Participation in Healthwatch Havering

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

We are looking for:

Members

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

Some Members may wish to become **Specialists**, developing and using expertise in a particular area of social care or health services.

Supporters

Participation as a Supporter is open to every citizen and organisation that lives or operates within the London Borough of Havering. Supporters ensure that Healthwatch is rooted in the community and acts with a view to ensure that Healthwatch Havering represents and promotes community involvement in the commissioning, provision and scrutiny of health and social services.

Interested? Want to know more?



Call us on **01708 303 300**

email enquiries@healthwatchhavering.co.uk

Find us on Twitter at [@HWHavering](https://twitter.com/HWHavering)



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