

**Enter & View**

# **Eastbrook Surgery**

261 Dagenham Road, Romford, RM7 0XR

8 December 2025



## 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 Community Interest 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?

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 voice, 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*

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## 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.

## Introduction

This was our first visit to this Medical Centre, and the team found it pleasing to see a traditional, but progressive, GP-run service, seeking to make continuous improvement.

Although the practice is actually located in Barking & Dagenham, the boundary between the boroughs is nearby and the majority of patients reside in Havering; the practice is a member of the Havering Crest Primary Care Network.

## The premises

The practice is accommodated in a building that is clearly in need of renovation, which the team were told is leased from a private company. The practice shares the building with another GP practice (the College Surgery, so called as the Barking &

Dagenham College is nearby), with which they enjoy a cordial relationship, and share some facilities.

The building is large, with wooden framed windows, and a good size lobby containing wheelchairs and walking aids to help patients (a welcome provision, not often seen). The hall where patients sit is divided into right-hand and left-hand sides, depending on which practice they attend. The team were pleased to observe that patients would be seen in face-to-face appointments. The team were told that the ratio for patients to be seen 10% by phone calls and 90% face to face, which is remarkable in current circumstances. The practice has about 4,500 patients on its list, so possibly being a smaller practice assists their approach.

A hearing loop is shared by both receptions. There are plenty of signage and notices displayed around, although there did not appear to be information available about addiction services. The team were told that a mental health practitioner comes once every two weeks to assist patients with mental health needs.

Appointments can be booked on line, although some patients prefer to make appointments by telephone. Although the building itself is in need of renovation, the furniture and accessories are in very good condition. A defibrillator is available, if needed.

## Staffing

The team were met by the Practice Manager supported by the Business Manager: the Practice Manager had been employed at the practice for 33 years, and the Business Manager for 20 years. Staff meetings are held at least once a month, and all staff are supported and work very well to keep the practice on track.

There is a Patient Participation Group that has been running for 34 years and which meets every three months, although getting wide patient participation is proving difficult (which is not unusual).

There are three doctors who are the partners in the practice (of whom two were on duty on the day of the visit), who are supported by one permanent locum and two sessional locums.

Other staff comprise a practice nurse, a business manager, a practice manager, a care coordinator, three receptionists, a contracted IT professional and other healthcare professionals employed under the government's Additional Roles

Reimbursement Scheme (ARR): a Physician Associate, a Mental Health Practitioner, a Clinical Pharmacist, a Podiatrist, an Occupational Therapist, a first contact physiotherapist and a Social prescriber. The ARR scheme staff are employed by the Havering Crest PCN and work across its six member Practices.

## Services

The surgery is open from 8am to 6.30pm and there is no set time for patients to ring up. Patients can usually get an appointment within a week, and of course emergencies are seen on the day, especially children. Patients requiring an urgent appointment may be referred to a doctor for triaging. Patients will also be referred to the out of hours service for evening and weekend appointments.

They have worked out that for every 1000 patients they need to make available a minimum of 75 appointments per week to meet the demand. There are 18 GP clinical sessions and 4 nurses' sessions each week. There are 18 appointments slots in each session. This gives a total of 396 appointments each week. This is in addition to ARR staff appointments. This ensures even patients requiring non-urgent appointments get one within a week. Urgent appointments are given the same day and when demand for same day appointments exceed what the surgery already provides, patients are sign posted to the Same day Access Hub or Walk in centre or NHS III. "Did not attends" average 10 to 12 a month.

The practice has not experienced difficulty in complying with recent government guidelines on appointments as they have worked that way for some time. The telephone system has been updated and includes a call back facility. The website was

recently updated, following the change of the name of the practice.

Patients can be called in to their appointment electronically.

Test results are looked at every day and patients whose results indicate the need for further consultation are invited to make an appointment with a doctor - These results are never discussed over the telephone call by non clinicians.

The Practice used to provide minor surgery services to patients registered with other practices but no longer do so, but continues to provide this service, including suture removals, to its own registered patients.

Digital records are received regularly now, and queries with consultants are dealt with promptly.

Complaints are dealt with promptly, with the aim of resolving them within 30 days.

The team were told that there are about 150 mental health patients on their list, 40 of whom are very vulnerable individuals. All the yearly checks for these patients are carried out during normal surgery hours, by the Doctors or Mental Health Practitioner, particularly for the vulnerable patients. Patients living with learning disabilities have their annual health checks done by Doctors.

Patients with anxiety, depression and other mental health problems are referred to "Talking therapy" when deemed appropriate.

Regular training is carried out via e-learning on topics such as Infection control, safeguarding, GDPR and Information governance. The staff training is monitored through a Dashboard on the computer-based e-training platform.

Long-term conditions such as Asthma and Diabetes are routinely checked during the course of the year, with blood tests done annually or when necessary. The Asthma patients have a rescue pack at home (not many doctors agree to this) for exacerbations.

All over 75 patients have a care plan and are offered an annual health check. For nearly a decade they have been assigned a named GP who is responsible for their care. Nomination of a named GP as a responsible clinician, is now extended to all the registered patients in the surgery.

If a patient passes away this has to be referred to the Medical Examiner now. This scheme was introduced in September last year.

## **Non-NHS Services**

The Practice receives requests for medical reports on patients (with their written consent) from insurance companies and DVLA, as well as private letters for employment etc. There is a charge for this Non-NHS service which is paid for by the organisation requesting the report or by patients.

### **Proposed developments**

The team were told that there are plans for the Practice to convert two rooms used by administrative staff, into consultation rooms, offering placements to two new GP registrars to join the practice team.

They also want to replace two entrance doors to the Practice with automatic doors; and, with consent from Barking and Dagenham Council to expand the car park to provide another nine spaces, for which there is sufficient room.

### **Patients' views**

The team were able to speak to three families in the waiting area, individually; all said they were very pleased with the practice and how things had improved over the last eighteen months.



## Conclusions

The team felt the visit, and the discussions with staff and patients, had been very positive. . It is clear that the building requires updating but there are plans to renovate two new clinical rooms, automatic entrance doors, a new reception desk, more parking spaces, new fire alarm system and repair & repainting of external fascia boards.

The team do not wish to make any recommendations but commend the practice for the strides it is taking to secure improvement.

## Acknowledgments

Healthwatch Havering would like to thank the managers, staff and patients at the practice for their assistance and co-operation during the visit and subsequently.

## 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.

### 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.

### Healthwatch Havering Friends' Network

Join our Friends' Network for regular updates and other information about health and social care in Havering and North East London. It cost nothing to join and there is no ongoing commitment.

To find out more, visit our website at

<https://www.healthwatchhavering.co.uk/advice-and-information/2022-06-06/our-friends-network-archive>



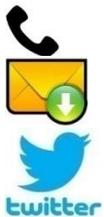
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