

Enter & View

Berwick Surgery

17 Berwick Road, Rainham, RM13 9QU

18 November 2016





What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care. 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 are able to 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 a number of volunteers, both from professional health and social care backgrounds and 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 <u>your</u> 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 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 an 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.

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 safety of the resident, patient or other service-user is not compromised in any way.

The Surgery

The surgery is located in a converted chalet bungalow, with the patient areas on the ground floor and a store room upstairs. The building is clean and tidy but appears to require refurbishment throughout.

The patients' areas comprise a waiting room (which on the day of the visit appeared adequate for the number of patients there), two consulting rooms



(one without natural light) that appeared somewhat cramped, toilets and the reception, which was is bright and had an entrance to the garden.

There are no parking facilities on site and restricted parking in the street.

The building appeared poorly accessible for disabled patients, especially wheelchair users; there was a short ramp and a narrow door that was just about accessible. Only one of the consulting rooms is wheelchair accessible.

The Practice Manager's office was very narrow and has inadequate lighting.

A pram store was provided.

A large blood pressure monitor was located in the waiting area but seemed out of place there, with no privacy, although the team was advised that a screen was on order.

No hand sanitiser gel appeared to be available for patients' use.

The Staff

There were three GPs (Doctors Adur, Kakati and Banarjee), the Practice Manager, a Practice Nurse, a Healthcare Assistant and six staff in the Reception/Admin/Secretarial team.

Mandatory training, including health and safety, fire and infection control had been completed by all staff and all were due to take on-line safeguarding training in the near future.

All staff interviewed were positive about working at the surgery, and they seemed happy working together. The main consensus was that the increase in the number of patients over the years had left the surgery building too small to provide the service now expected.

The patient experience

Two GPs were available for each session, with three emergency appointments in each session but otherwise by appointment. The



surgery was open 8am-12noon and 1pm- 6.30pm, Monday to Friday. There were no weekend sessions but telephone consultations were available. The waiting time for appointments was 4-5 days but if a specific doctor was requested, the wait could be for up to 10 days. A television in the waiting area advertised the GP hubs and walk in centres, and reception staff also advised patients of these facilities. A hearing loop was available in the reception and consulting rooms.

Reception was fairly large, with a small area for patients wanting to speak in confidence. No notice boards were visible, as they had been removed to enable the installation of the TV, but assurance was given that the notice boards would be put back. All reception staff were friendly, and knew a lot of patients by name.

The waiting room was clean and tidy, and patients were called to see the GP by use of an electronic screen.

Repeat prescriptions were arranged using an electronic system, that the team was told works well. Test results were received daily and forwarded to the GP who marks up what Is to be done; those considered urgent were acted upon immediately.

The Practice Manager and the GPs speak a number of languages between them, which reduced the need for interpreters. This has resulted in language line being used once.

The surgery has received very few complaints, all of which were dealt with in house.

Views of patients and the Patient Participation Group (PPG)

There was a very active PPG, three members of which met the team. All three were very positive about the surgery, were aware of no complaints about appointments, felt listened to, and told the team that treatments were explained. They also expressed the view, however, that the building was inadequate.



One patient spoken to in the waiting room told the team that waiting times to see a doctor were often lengthy; she had waited for 50 minutes. When asked if she felt involved in discussions on her care, happy with treatment she received or listened to, she replied that that depended on which doctor was seen.

Conclusions

There appears to be no question that the surgery building is inadequate for its use as a surgery, and may have been for some years. That said, the GPs and staff appear to be making every effort to make it work, but there appears to be no capacity to take on further patients.

The staff are all doing well in difficult circumstances, and are friendly and helpful to all the patients. The patients from the Patient Participation Group expressed frustration that they have been trying to get improved premises for a long time.

Recommendation

It is unusual for Healthwatch to comment on the adequacy of premises used for a surgery; but in this case, it is clear that staff and patients, though happy with the service provided, consider the premises to be inadequate and that they have been so for some time.

Healthwatch's concern is for the patients. It is wrong that patients should be treated in inadequate premises, whatever the reason and regardless of the cost of putting those premises right.

Accordingly, it is recommended that the practice work with the Havering Clinical Commissioning Group to explore what options may be available either to fund improvements to the premises or perhaps to locate and acquire more suitable premises in the vicinity as a replacement.

Healthwatch stands ready to support this process if need be.



The team would like to thank all staff and patients who were seen during the visit for their help and co-operation, which is much appreciated.

Disclaimer

This report relates to the visit on 18 November 2016 and is representative only of those patients, carers and staff 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**; or email **enquiries@healthwatchhavering.co.uk**



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