



GP Access Report

London Borough of Harrow

June 2017





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1. Acknowledgements

On behalf of the Enterprise Wellness Board, the accountable body for the Healthwatch Harrow (HWH) service and the HWH Advisory Group, I am grateful to Mina Kakaiya, our HWH Manager, Jenny Boxall and Antonetta Fernandes, our Information and Communications Officers, for undertaking this very important piece of work, with passion, commitment and professionalism.

We are also grateful to our dedicated group of volunteers for carrying out the mystery shopping, website and GP texting service research.

Healthwatch Harrow would like to thank our volunteers; all the organisations - Harrow Mencap, Mind in Harrow, HADs, Carramea, Age UK Harrow, DAWN Project and their service users/carers who kindly gave up their time to participate in the focus groups and the CQC for providing us with the Harrow CQC GP inspection summary data.

And *finally*, we are most grateful to the people of Harrow who participated in completing our online survey, without whom this report would have not been possible.

This report will be shared with Harrow Council Commissioners, Harrow Health and Wellbeing Board, Health and Social Care Scrutiny Sub-Committee, all General Practices, the Voluntary and Community Sector, the Harrow Clinical Commissioning Group (CCG), the Care Quality Commission (CQC), Healthwatch England, local people and businesses through our various social media channels and the local media.

We believe that the team's research, analysis, findings and recommendations in the report will provide the basis of a roundtable discussion with relevant parties and development of an action plan for bringing greater coherence, consistency and performance in GP accessibility in the Borough in the future. We look forward to facilitating this over the coming weeks.

Ash Verma Chair, Enterprise Wellness 21 June 2017



2. Executive Summary

The Healthwatch Harrow service, manged by Enterprise Wellness Ltd, plays a key role in ensuring the voice, opinions and views of the local community on health and social care matters are listened to and factored in by those responsible for commissioning services, as an integral part of their performance and quality assurance arrangements.

Rationale

The rationale for this piece of research emanates from our response to intelligence gathered from our CRISPI database (Concerns, Request for Information, Signposting and Intelligence) over the past year or so pertaining to concerns local people have expressed about GP accessibility.

Aim

For most people, visiting their doctor is the most frequently used element of the health care system, and acts as a gateway to other health and social care services. It is essential, therefore that all local practices offer an efficient and accessible service, hence the aim of this research, i.e.

"To gain an understanding of patients and service users experience of GP services within the borough".

Methodology

We conducted desk research of the findings from other stakeholders' reports (listed below).

In addition, we used a standardised online questionnaire with intelligence from our CRISPI database, conducted a mystery shopping exercise and facilitated 9 community base focus groups from seldom heard groups between November 2016 to March 2017:

- Mind in Harrow GP Accessibility Report (2013-14);
- Harrow Mencap GP Rep pilot project Interim Report April 2017;
- Harrow STP, GP Five Year Forward View;
- Health and Social Care Scrutiny Sub-Committee Access to Primary Care in Harrow Report;
- Review of CQC inspections for the GP Practices in Harrow from January 2016 to January 2017);

A total of 236 residents participated in the research, of which: 143 completed the Survey Questionnaire from November 2016 to March 2017, and 93 people participated in 9 Community Focus Groups.

General findings

The following are our general findings.

 For GP surgeries to offer high quality services which meet users' demands, manage expectations and provide pathways into treatment and support, the needs and views of patients need to be heard and understood.



 Having a holistic understanding and appreciation of the people of Harrow would add value to a more efficient and seamless system of pathways into care and alleviate strains on other front-line health services, such as Accident and Emergency.

Specific findings

The following is a summary of some of the specific findings for future reference.

- 50% of the survey respondents were from over the age of 65 years;
- Most respondents rated customer care by GPs and reception staff as Excellent/Good;
- 60% reported that they could see the male or female doctor of their choice with ease;
- Around 50% of the respondents lacked awareness of how to make a compliant about their GP and 44% knew when and how to access A&E, Walk in Centre, Urgent Care Centre and Pharmacies appropriately;
- There were significant variations across the Harrow GP surgeries websites with no one consistent NHS standard website model approach;
- Most of the GP websites also did not provide information on how to access the other triage services such as the Urgent Care, Walk in Centres and 999 information;
- Whilst the majority of GP's out of hours messages gave information on their opening and closing times and NHS 111 service, most of the GP websites did not provide information on how to access the other triage services such as the Urgent Care, Walk in Centres and 999 information;
- There was widespread variation regarding on-line complaints procedures;
- Translation service information was not visible on any of the GP websites and some gave the option to google translator on their websites, although 68% of GP Practices offered either direct or telephone translation with varied lead times ranging from 1 day to 2 weeks;
- Translation services were not available in an emergency unless staff were able to speak the language required. Due the GP phones lines being continuous busy we were not able to fully complete the Mystery Shopping audit;
- 74% of the GP practices offered a texting appointment reminder service to its patients and only one Practice offered telephone reminder service.

Next steps

We recommend a roundtable discussion of key partners, in the first instance, to agree an action plan that will form the basis of achieving consistency across all GP practices, as well as establishing a forum for sharing best practice.

3. Strategic Drivers

This section provides the national policy and strategic context for our GP Access research, as well as the basis on which our rationale and methodology are based.

NHS England published the Five Year Forward View (FYFV), setting out a new vision for the future of the NHS services which focuses on building health and social care around the needs of local populations. To achieve this vision, local areas have had to develop a Sustainability and Transformation Plan (STP) to help local organisations plan how to deliver a better health service that will address the FYFV 'Triple Aims' of improving people's



health and wellbeing, improving the quality of care that people receive and addressing the financial gap over the next five years. This also includes transformation of the care patients receive through GP practices.

One of the key priorities within the STP is to "ensure people access the right care in the right place at the right time" and it is recognised that GP's are the gatekeepers to ensure patients receive the appropriate pathways of treatment, care and support.

The STP key deliverables for 2016/17 include:

- Increased accessibility to primary care through enhanced hours and via a variety of channels (e.g. digital, phone, face to face).
- Enhanced primary care with focus on more proactive and co-ordinated care to patients.
- Centralised booking appointment system and pre-bookable appointments through Walk in Centres identified within the New Primary Care Model of Care Harrow commissioning intentions 2017/19.

The STP also aims to integrate the visions of General Practice Five Year Forward View (GPFV) to delivering more services through local services hubs by 2020/21 which will enable more services to be delivered in community settings.

The GPFV recognises:

- The historic underfunding in general practice, alongside a steady rise in patient expectations, practices struggling to balance rising workload matched by growing patient concerns about convenient access within tighter financial constraints;
- The additional strain GP practices face around recruitment issues and reliance on locums impacting staff morale and service continuity;

GPFV outlines new ways of working to shape the future work of primary care by shifting towards groups of practices working together and recognising one size will not fit all. The ambitions of this strategy are being addressed by the level of changes on investment, workforce, workload, infrastructure and care redesign, primary care and the alignment to the Care Quality Commission inspection framework over the next 5 years.

The new Multispeciality Community Provider (MCP) model focuses on population health, prevention, and supporting and mobilising patients and communities by adopting person centred, social prescribing models of care, to tackle these challenges and improve overall patient care.

Additionally, the Better Care Fund (BCF) promotes wider integration of health and social care which in turn enables CCGs and local authorities to pool budgets and jointly commission expanded services. Such services include:

- Additional nurses in GP settings to provide a coordination role for patients with long term conditions;
- GPs providing services in care and nursing home settings;
- Providing a mental health professional in a GP setting;



Hosting a social worker in a GP surgery.

At a local level, CCGs have agreed to support primary care providers in delivering a clear set of standards over the next five years around proactive care, accessible care and coordinated care. Within this, are standards:

- On routine opening hours (the provision of pre-bookable appointments at all practices, 8am-6.30pm Monday to Friday, 8am-12pm on Saturdays in a network);
- Extended opening hours so that patients can access a primary care professional 7 day a week, 12 hours per day for unscheduled or pre-bookable appointments;

It is envisaged that North-West London level accessible care will be 100% complete by Quarter 1 of 2018.

4. Demographics

The Harrow socio-economic scene is as diverse and varied as any other London Borough, with similar and different health and social care needs. Key features of our Borough for this research are:

- Population of 239,100
- Over 50% of Harrow's population is from black and minority ethnic (BAME) groups
- Harrow has one of the highest proportion of those aged 65 and over compared to the other boroughs in NW London
- Cardiovascular disease is the highest cause of death in Harrow, followed by cancer and respiratory disease
- Harrow has 34 GP practices in the borough (Appendix 4)
- At the time of our research, (November 2016) Harness Harrow's contract with Mollison Way Surgery had come to an end and NHSE put in place new procurement process which Mollison Way Surgery successfully secured to deliver primary care service at Harness Harrow site
- 1 Urgent Care Centre (Appendix 5)
- 4 Walk in Centres (Appendix 5)
- Total of 236 residents participated in the research of which:
- 143 Number of Surveys completed (November 2016 to March 2017 (Appendix 1 survey questionnaire)
- 93 people participated in 9 Community Focus Groups

5. Aims and Objectives

The aim of the research was:

"To gain an understanding of patients and service users experience of GP services within the borough".

The basis of the research aim is closely allied to the several signposting comments from local people and recorded on our CRISPI database regarding GP practices in the borough.



The objectives of the research project from November 2016 to March 2017, and initiated by Healthwatch Harrow were to:

- Focus on patients experience in accessing their local GP practice;
- Identify key themes and trends of the research;
- Report findings and make recommendations;

This report details information regarding:

- Booking systems in local GP practices;
- General experiences and concerns;
- Access:
- Satisfaction rates in making appointments;
- Opening hours;
- Out of hour's information;
- Provision on how to register;
- Access to interpreters/translation services;
- Availability of the texting reminder service;
- How to make a complaint;
- Quality of GP websites:
- Review of Harrow GP practices;
- CQC inspections over the last year;

The following are specific research objectives that we sought to address.

GP access: what does this mean?

- Knowing how to register with a GP.
- Finding a GP to register with.
- Being able to **book an appointment** to see a GP (telephone, online, at the surgery)
- Being able to see a GP when you need to, without long waiting times.
- Being able to see a GP at a convenient time for you.
- Being able to physically access a GP surgery.
- Being able to communicate with and be understood by GP staff.
- Knowing how and where to access out-of-hours GP services.
- Knowing how to make a complaint about your GP surgery
- Having enough time during your appointment to discuss your needs properly and feel listened to.

6. Methodology

We recognised at the outset, that we would need to use various research methods and tools (on-line, survey, focus groups, telephone and mystery shopper) in order to obtain quantitative and qualitative information and data as part of analysis and subsequent report. These are detailed below.

• A standardised online questionnaire with intelligence from our CRISPI



- carried out desk based research;
- conducted a mystery shopping exercise
 Facilitated 9 community based focus groups from seldom heard groups.

Methodology	Resources / tools	Process/activity
1.Questionnaire/Surveys (Online and written)	Questionnaire (see Appendix 1), HPPN, GP Practice Managers, Newsletters, Healthy Harrow Event (World Aids Day) and online platforms.	Respondents were either asked to tick relevant box or to evaluate their experience on a rating scale. The general factors being researched were general satisfaction, making appointments, opening hours, out of hour's information, how to register/complain and provision of interpreters/translation services. These questionnaires were widely circulated on online platforms (website, social media), our newsletters and at all
		networking/engagement events we or our partners attended.
2. GP Website Audit (Desk based research- and telephone)	GPs' website - Intelligence (CRISPI), (Appendix 2 GP Surgeries Mystery Shopping Form.	capturing the following research:GP Website Audit.Carried by Staff Member and 1 Volunteer.Collated Data information captured on spreadsheet.
3.Mystery shopping exercise - Telephone	GPs' website - Intelligence (CRISPI) Appendix 2 GP Surgeries Mystery Shopping form - Telephone.	 Translation services offered Interpreters - lead time Out of Hours Message (Lunch time and Evening) Listen to these messages with the following criteria: The message says that the surgery is closed The message states the surgery opening and closing hours Information on NHS 111 is provided - for medical advice



4. 9 x Community Focus Groups: (with seldom heard communities)	2 x Harrow Mencap (Carers and Service User Group) 1 x HADs 3 x CARRMEA 1 x Age UK Harrow 1 x Dawn Project 1 x Mind in Harrow User	 Information is provided - for urgent medical care when GP surgery are closed Information on 999 is provided - for medical emergencies and potentially life threatening Review of GP Texting Appointment service Topics covered: GP Services Environment Patient Experience Total of 7 focus groups engaged
5. Review: GP Texting appointment/ reminder	Group (HUG) Mystery Shopping form - Telephone.	- Contact all 34 GP practices to confirm if they offered a texting appointment and reminder
service	Tomi - retephone.	service
6.Review: Care Quality Commission (CQC) Harrow GP inspection reports	CQC provided summary of reports	Review of 15 GP CQC inspection reports from Jan 2016 to Jan 2017



7. Key Findings: Summary

In this section, we present a summary of the key findings.

Survey (online and written)

Most of the people surveyed rated the customer care provided by reception staff, GP registration as Excellent/Good and generally satisfied with the practices opening times. 60% also reported that they could see the male or female doctor of their choice with ease.

It is important to note that over 50% of the survey respondents were from over the age of 65 years. And this high satisfactory rating for the practice opening times may be due to not a fully representation sample group, particularly those from of working age.

Over half of the respondents preferred to book their appointment by phone and those respondents wishing to see their named GP on a preferred chosen day experiencing long waiting times (often over a week) or not able to see their GP due to lack of available appointments.

Under 50% of the respondents lacked awareness of how to make a compliant about their GP and 44% knew when and how to access A&E, Walk in Centre, Urgent Care Centre and Pharmacies appropriately.

A small number of the respondents (10%) felt they required additional support with their BSL (British Sign Language and a need to have improve access for wheelchairs users in some practices surgery/treatment rooms and the need for easier access for people who drive. (refer to Table 6).

GP surgery website overview

Although most of the GP surgeries websites were easy to navigate, (71%), with clear visible information on registration processes and opening and closing times, there were significant variations across the Harrow GP surgeries websites with no one consistent NHS standard website model approach.

A small number of the GP surgeries websites did not have clear visible direct links to their complaints procedures. Furthermore, at the time of the GP website audit was conducted (Dec 2016) the Harrow CCG online GP list information was found to be out of date with inaccurate information with no direct web links to the local GP websites, with a small number of GP practices directed to NHS Choices website.

Most of the GP websites also did not provide information on how to access the other triage services such as the Urgent Care, Walk in Centres and 999 information.

Mystery Shopping - Telephone Research

The majority of GP's out of hours messages gave information on their opening and closing times and NHS 111 service. However, most of the GP websites also did not provide information on how to access the other triage services such as the Urgent Care, Walk in Centres and 999 information.



Complaints Procedure: Online Audit

Wide variation on online complaints procedure-Just over half of the Harrow GP practices (68%) had their complaints procedure on their website, but with wide variation with no one standard complaints procedure approach adopted by all the GP practices. This ranged from very good model of complaints procedures, for example Mollison Way Surgery to a minority of GP practices having poor complaints information with inaccurate or out of date information on complaints pathway or GP complaints information only made accessible by direct request from GP practice staff.

Lack of or inaccurate information on local provision of advocacy service- Some of GP practices websites also did not provide or give accurate information on the local advocacy service provision, referencing a non-Harrow base advocacy provider Voiceability rather than the local provider Harrow Health Complaints Advocacy Services (HADs). Voiceability provides only the Mental Health advocacy services for Harrow residents.

Inaccurate and or out of date information on out of hours information -Such as the NHS Helpline number, Walk-in centre information and online links to NHS England and NHS Complaints Advocacy that some GP websites are not able to access. e.g. "The partners of the Circle Practice have joined a co-operative of Harrow doctors called HARMONI. This service is based at Northwick Park Hospital where you may be asked to take yourself/your family to see a local general practitioner. For those patients who are housebound or too ill to attend Northwick Park Surgery a visit will be arranged at the discretion of the HARMONI doctor. Full and clear instructions for the above service can be found on the message service when you telephone 020 8427 1213".

Easily visible information on how to register as a new patient was on most of the GP websites, however, one GP website had incorrect information on registration procedures e.g. with following statement "During registration the practice staff will ask you for certain documentation to prove that you are eligible for NHS treatment. These documents must be originals. If the practice is not sure or unhappy about the documentation provided the patient will be referred to Mr Navin Morjaria, Counter Fraud Specialist at the Harrow PCT."

Translation service information was not visible on any of the GP websites and some giving the option to google translator on their websites. 68% of GP Practices offered either direct or telephone translation with varied lead times ranging from 1 day to 2 weeks.

Translation services were not available in an emergency unless staff were able to speak the language required.

Focus Groups

Over half of the participants from the focus groups experienced difficulties getting an appointment with their GP practice, waiting up to on average 10-15 minutes by phone to get through the GP Practice. Many of the participants on average had to wait on average up to 3 to 4 weeks to see their preferred GP. Furthermore, those with varying levels of disability and language issues felt they experienced greater difficulties in accessing and making an appointment with their GP surgeries linked to poor communication and attitude of surgery staff. However, some found booking GP appointments online in advance much



easier and although over half of the participants could get a male or female doctor, 28% were not able to and a further 18% were not aware on the availability of this option.

Nearly half of the participants were unware if their GP surgeries offered translation services or translation support to those with hearing impairment and in a minority of surgeries (9%) translation was either encouraged from family and children or offered by a staff member who could speak the language.

Although 65% the participants had some awareness of accessing NHS 111, UCC, Walk-in and Pharmacies if they could not get an appointment with their GP, a third of participants were not aware of these services. However, over half of the participants were aware of the other services offered by their GP surgeries and accessed these inhouse services, such as for blood testing and vaccinations.

Just over half were able to cancel their GP appointment, whilst some experienced difficulties cancelling their appointment via telephone as it was continuously engaged.

An initial welcoming and friendly environment is vital in ensuring patients have a pleasant and comfortable experience. With regards to this, most of the respondents felt the GP surgeries had good access to prams and wheelchairs, the washroom areas such as disabled toilets and baby changing area. However, the majority felt the waiting room areas need to be more child friendly and the reception area compromised patient privacy.

It was found that most of the participants were unware of how to make a complaint about their GP practice and felt the information board in some GP surgeries were placed in inappropriate areas with information that was often out of date or difficult to read and most patients were not aware of GP newsletters or PPGs (Patient Participation Groups).

Review of GP Texting Appointment service

All 34 GP surgeries in Harrow were contacted directly by telephone to identify if they had a GP texting appointment service available to patients. 74% of the GP practices offered a texting appointment reminder service to its patients and only one Practice offered telephone reminder service.

Further research is needed to capture how many patients Did Not Attend (DNA) appointments per practice per year and examine if there is a direct correlation between text reminder and reduction in missed appointments. To also identify the barriers and challenges to the implementation and use of GP texting service.

CQC GP inspection reports summary

The CQC GP inspection reports audit found that out of the 15 GP Surgeries, 1 was rated overall outstanding, 10 were rated overall good, 2 were rated overall inadequate and 2 were rated overall requires improvements.

The CQC audit also highlighted the need for some GP practices to have more robust internal governance structures in place to improve patient care and safety. Some of the key areas in need for improvement were on HR functions, clinical audits to improve patient outcomes



and administrative and reporting processes. Furthermore, to have more robust and effective Health and Safety, complaints procedures, risk assessments policies and procedures in place. In the table, we have sited one example per GP Surgery. To get a full picture of all the recommendations please visit the link for each surgery displayed in the table.

8. Conclusions

The primarily findings indicate that not all GP Practices are in adherence to the Harrow's CCG Accessible Information standard protocol and the use of locum doctors by some GP practices could potentially affect continuity and quality of patient care. A recent report from the British Medical Journal (3rd February 2017) found that seeing the same GP each time reduced avoidable hospital admissions amongst older patients. However, the Government's focus on increasing access to GPs, such as through longer surgery opening hours, could unintentionally be affecting the continuity of patients care experience, the study suggests. The researchers found that older patients who saw the same GP most of the time were admitted to hospital 12% less for conditions that could be treated in GP surgeries.

We also reviewed three local GP reports complied by Harrow Mencap, Mind in Harrow and the Health and Social Care Scrutiny Sub Committee. These reports highlighted the need for GP's surgeries to deliver a more holistic, social prescriptive model of care to those with learning disabilities and mental health issues. Moreover, to improve quality and equality of access of primary care service provision by capacity building GP practices to promote more choice and control through education and training of all Primary staff on Mental Health and Learning disabilities to improve knowledge, understanding and reduce stigma. These reports also recommend the need for CCG and GP practices to recognise "not one size fits all". To develop continuity and clear leadership to harness better integrated primary care community base services coproduced with third sector providers which are responsive to the needs of Harrow's diverse population.

Health and Social Care Scrutiny Sub-Committee Access to Primary Care in Harrow Report further emphasised that GPs and CCG should not assume that residents will have an awareness of the 'health system' and what local triage services provide and offer such as the walk-in centres, urgent care centres, community pharmacists, 111, Harrow Health Help Now app. The report recommends developing effective public education strategy on awareness of triage services to promote appropriate access to healthcare and change community habits around accessing primary care services.



9. Recommendations

The information presented in this report highlights the variations in accessibility between Harrow's GP Practices. The key questions to ask and further explore are what are some GPs doing that others are not in promoting easier access to its patients? What might be are some of the barriers GP's are experiencing to improving access and what can be done to reduce the disparities and raise consistency in accessibility across all GP practices in Harrow for its local residents.

As our health and social care services face massive challenges and shift towards more personalised community base care, primary care is expected to play a central role in meeting this challenge.

Healthwatch Harrow would like to see all those individuals and different organisations that have an interest in commissioning and providing primary care services in Harrow working towards addressing these variations in accessibility so that every patient, whatever their demographic profile and wherever they live in the borough, can have an easier access into the primary care service provision.

It is hoped the recommendations from this report will inform and influence the local STP and Harrow Primary transformational plans and meet the wider ambitious of the GPFV and MCP strategic frameworks.

Healthwatch Harrow makes the following recommendations for Harrow CCG commissioners and GP practices:

- 1. Ensure Harrow GP surgeries are able to put in place more improved, quicker and easier accessible phone and online appointment booking systems to reduce patient waiting times and cancelling appointments, and to review the effectiveness of their GP texting service in reducing missed appointments.
- 2. Improve GP accessibility particularly for those patients with language, mental health and learning disabilities.
- 3. Provide clearly displayed and easy to understand updated information in their surgeries and websites information on translation services, local advocacy services, booking an online appointment, registration and how patients can make a complaint and Healthwatch Harrow information to explain how people can share confidential feedback on their experience, whether good or bad.
- 4. Create and provide increase public awareness of how to appropriately access and use A&E, Urgent Care, Walk in Centres, NHS 111, 999 information, pharmacy and Harrow Health Help App Now by advertising and providing clear and consistent signposting updated information to patients on GP websites, their out of hours telephone messaging, developing public awareness leaflets and through community outreach awareness workshops to reach all sectors of the Harrow community.
- 5. Develop and adopt better sharing of good internal standard models of practice and policies at both governance, operational and online levels working practices to ensure consistent and good standard of practice around accessibility and recognising that one size does not fit all, and ensure the services are responsive to meet the needs of its different communities of Harrow.

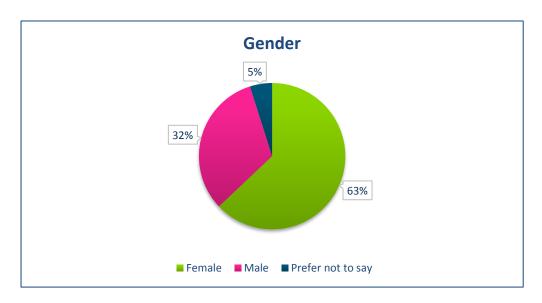


10. Findings: Analysis Tables

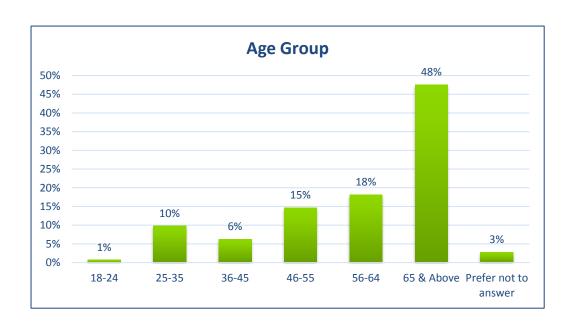
a) Questionnaire & Surveys

The following is a summary of the findings taken from 143 responses received from the online GP Accessibility Survey that we conducted from November 2016 to March 2017.

Survey Demographics



Ethnic breakdown was self-defined and the majority preferred not to disclose this information (please refer to Appendix 6)



48% of survey respondents were from over the age of 65 years.



The table below indicates list of the 31 GP practices stated in the survey.

	GP Practices stated in responses from the surveys	Percentage
1	Aspri Medical Centre	1%
2	Bacon Lane Surgery	6%
3	Belmont Health Centre	8%
4	Circle Practice	1%
5	Civic Medical Centre	1%
6	Elliot Hall Medical Centre	6%
7	Enderley Road Medical Centre	6%
8	Enterprise Practice	2%
9	GP Direct	5%
10	Hatch End Medical Centre	1%
11	Headstone Lane Medical Centre	1%
12	Headstone Road Surgery	3%
13	Honeypot Medical Centre	3%
14	Kenton Bridge Medical Centre	2%
15	Kings Road Medical Centre	1%
16	Long Elmes Surgery	1%
	Mollison Way Surgery (took over Harness Harrow Practice after	
	expiry of APMS and successful in bidding for the new	
17	procurement process put in by NHSE)	2%
18	Northwick Surgery	4%
19	Pinn Medical Centre	6%
20	Pinner Road Surgery	1%
21	Pinner View Medical Centre	2%
22	Prefer not to indicate GP Practice	7%
23	Ridgeway Surgery	5%
24	Roxbourne Medical Centre	4%
25	Simpson House Medical Centre	5%
	St. Peter's Medical Centre	6%
27	Stanmore Medical Centre	5%
28	Stanmore Surgery	1%
29	Streatfield Health Centre	1%
30	Streatfield Medical Centre	3%
	Total	100%





Table 2 How do you rate the customer care provided by reception staff at your GP Surgery? 45% 40% 40% 35% 35% 30% 25% 20% 15% 15% 6% 10% 4% 5% 0% Excellent Good Fair Poor Prefer not to answer

Table 1: 81% rated their GP registration as Excellent/Good.

Table 2: 75% found the customer care provided by reception staff as Excellent/Good

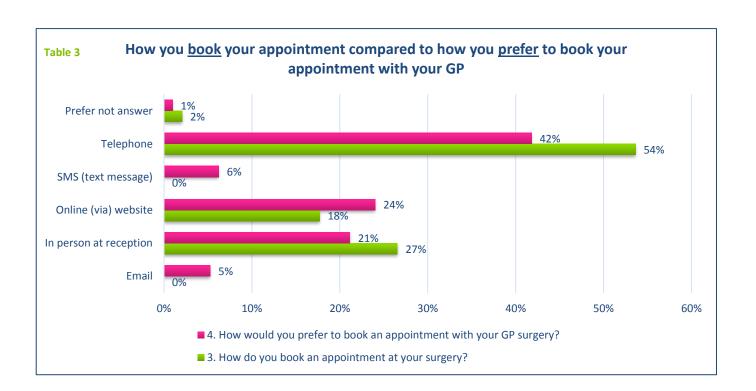


Table 3: 54% booked their appointment by telephone, 42% would prefer to book their appointment by telephone, people chose multiple answers for this question.



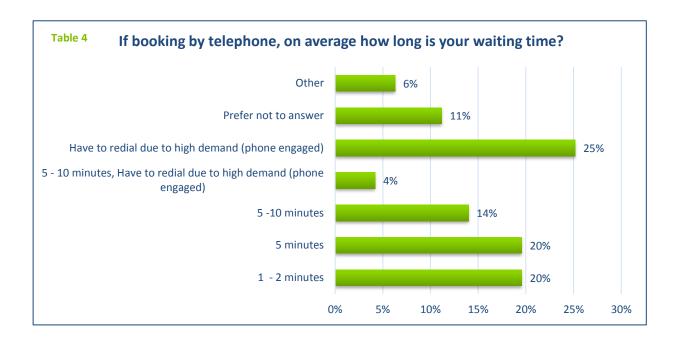


Table 4: 20% found that when telephoning for an appointment their call was answered between 1-2 minutes and 25% had to redial due to high demand (surgery phone engaged).



Table 5: 75% were Very satisfied/Satisfied with their surgery's opening hours with 8% indicating that they were either dissatisfied/very dissatisfied with their surgery's opening hours.



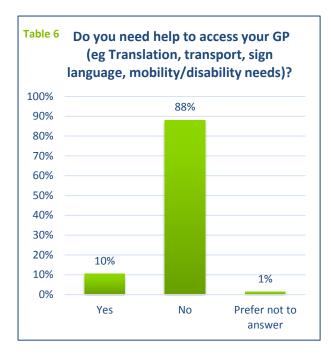


Table 7 Do you need to take an interpreter with you when you go to see your GP? 80% 70% 73% 60% 50% 40% 30% 20% 20% 10% 2% 0% Yes No Not Prefer not **Applicable** to answer

Table 6: 10% felt that they needed help accessing their GP - this included BSL (British Sign Language, easy access for wheelchairs in to surgery/treatment rooms, easy access for people who drive.

Table 7: The majority of those surveyed did not require an interpreter at the surgery - however Healthwatch Harrow recognises that the surveyed sample group does not fully represent all the diversity population of Harrow, and therefore to capture a more represented view of the local population the views of seldom heard groups would be reached via focus groups.



Table 9 Are you able to book an appointment with your named GP? Prefer not to answer Not Tried Never Rarely Sometimes 29% Often 22% Always 18% 0% 10% 20% 30% 40%

Table 8: 37% indicated they were either always or often able to have an appointment on their chosen day. 31% indicated that they rarely or never able to have an appointment on their chosen day.

Table 9: 40% indicated that they were able to either always or often able to see their named GP. 26% people rarely or never saw their named GP.



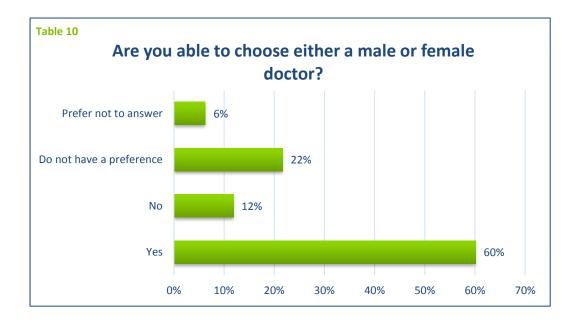


Table 10: 60% confirmed they were able to choose between a male/female GP whereas 12% were not able to choose.

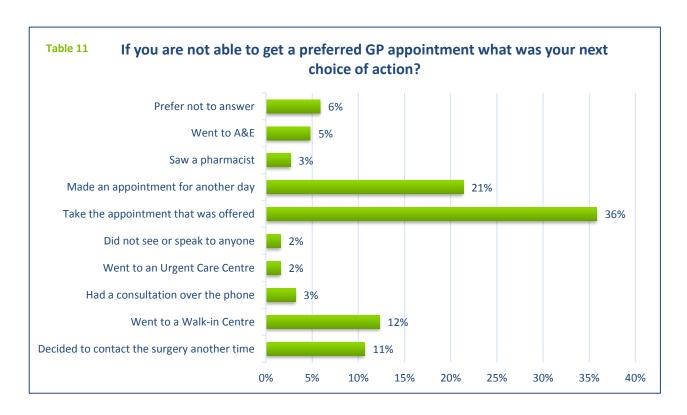


Table 11: 36% indicated that if they were not able to get a preferred GP appointment they would take the appointment that was offered however it was observed that responders to this question opted for more than one action - 12% indicated that they would use a walk-in centre.



Table 12	
Are you aware of the following places to access health care?	Percentage
Option 1	
A&E	6%
Pharmacy	1%
Walk-in Centre	10%
Option 2	
A&E, Pharmacy	3%
A&E, Urgent Care Centre	1%
A&E, Walk-in Centre	10%
Walk-in Centre, Pharmacy	2%
Walk-in Centre, Urgent Care Centre	1%
Option 3	
A&E, Urgent Care Centre, Pharmacy	1%
A&E, Walk-in Centre, Pharmacy	13%
A&E, Walk-in Centre, Urgent Care Centre	6%
Option 4	
A&E, Walk-in Centre, Urgent Care Centre, Pharmacy	44%
Prefer not to answer	2%
	100%

Table 12: 44% had an awareness of all four places to access health care support (A&E, Walkin Centre, Urgent Care Centre, Pharmacy) of which 20% aware of the three of these places, 17% of these two places and 17% of one of these places.

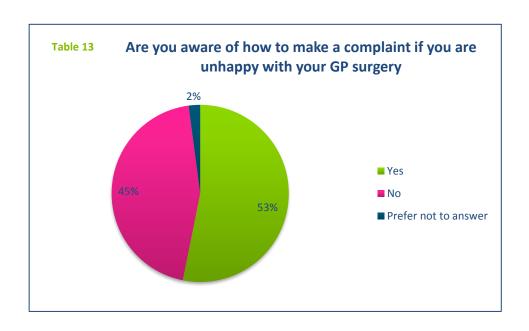


Table 13: 45% of those surveyed stated that were not aware of how to make a complaint if they were unhappy with their GP service.



Key issues 'General Comments' from the survey about GP Surgeries recorded:

- Difficulty in making an appointment
- Phone booking system not many available appointments
- Appointment with chosen doctor, can offered in a weeks' time
- Not many appointments outside of normal hours
- Surgery always very busy
- Unable to get an appointment with dermatologist
- Problems with accessing online appointments
- Long waiting times for appointments and when attending the appointment
- A good service is provided
- Accessibility for wheelchairs needs to be improved

The GP's are pressurized to see a patient within a 10-minute window. There is no time for you to explain how you really feel. The doctor will only attend to one physical condition. You have to make another appointment for another condition. Apart from one or two doctors the doctors don't show compassion. I don't blame them either if the GP surgeries are turning into factories. Sometimes you have to wait for more than a week to get an appointment.

My GP surgery offers me a 'take it or leave it' service. I can never see the GP of my choice at a time/date convenient to me. The reception staff are limited in their customer service and seem like they couldn't care less whether they have served me well or not. The surgery's' telephone system is diabolical. I never get through first time, only when I've recalled several times after very long waits on hold will I eventually be able to speak to a receptionist.

My Surgery is very good - but there are too many patients so not always easy to make appointments. Always very busy.

Difficult to make appointment for daughter with sever LD (Learning Difficulties)

I can't actually access the whole surgery, I am a wheelchair user so can only access 2 rooms which means if I have a blood test the phlebotomist has to come to me downstairs. Also, there is nowhere for me to sit in the wheelchair - I often have to sit in the corridor and keep moving out of people's way.



b) GP Website Review

All 34 GP practices websites were reviewed.

Website criteria reviewed	Number of GP's	Percentage
	meeting criteria	
GP with Website	32	94%
GPs with NHS Choice website	2	6%
Good Visibility of basic information and	24	71%
easy to navigate website.		
Poor Visibility of basic information and	10	29%
difficulty to navigate website		
Registration info available	32	94%
Registration info not available	2	6%
Out of date registration information	1	3%
GPs with online registration	5	15%
GPs with Complaint procedure online	23	68%
Option to make online complaints	1	3%
Out of Hours- visibility on Website		
Opening hours	34	100%
Closing Hours	34	100%
NHS 111 info	26	76%
Urgent Care	12	35%
Walk-in centres	1	3%
999 information	17	50%
Out of Hours not visible on Website		
Opening hours	0	0%
Closing Hours	0	0%
NHS 111 info	8	24%
Urgent Care	22	65%
Walk-in centres	26	35%
999 information	17	50%

c) Mystery Shopping - Telephone Research - Completed 34 out of 34 calls

Out of hours messages covering the following	Percentage of GP's Meeting the criteria	Number of GP's meeting the criteria
Opening Hours	85%	29
Closing Hours	74%	25
NHS 111	88%	30
Urgent Care	15%	5
Walk-in centre	18%	6
999 information	41%	14



Out of hours messages not covering the following	Percentage of GP's not meeting the criteria	Number of GP's not meeting the criteria
Opening Hours	3%	1
Closing Hours	15%	5
NHS 111	0%	0
Urgent Care	74%	25
Walk-in centres	71%	24
999 information	47%	16

d) Review of GP Texting Appointment Service

Number of GP Practices	Text Service	Texting Service
Contacted	Offered	Not Offered
34	25 (74%)	9 (26%)

e) Community Focus Groups - Key Summary Findings

Healthwatch Harrow identified potential communities in Harrow whose needs are perhaps not always represented by those responsible for local health and social care services.

During these sessions, we ensured that groups attendees' language or access requirements were met so that they can express their views with ease (interpreters/translators/mentors and groups leaders).

Who we spoken with....

We spoke to 93 people from varying community groups across Harrow in our focus group sessions.

Group	Total Attended	Male	Female	About the groups
MIND Harrow User Group (HUG)	11			This group assesses how good or bad services are and decides on how to make improvements
HAD Learning Disabilities User Group	9	6	3	This was a group that were Trainees for Catering Services
Harrow Mencap Elevate Carers Group (Female diverse ethnic group)	11			The group provides an opportunity for carers to learn to speak out and be heard, break the isolation, have fun, learn who they are outside of the caring role, gain skills and feel empowered
CARRAMEA	13	1	12	English, Employment (job seekers) and language students



CARRAMEA	4	2	2	English, Employment (job seekers) and language students
CARRAMEA	16	2	14	Tamil/English (job seekers) and language students
Harrow Mencap	6	0	6	Learning Disability Speak Up Service User Group
DAWN (Diwa Asian Women's Networks)	7	0	7	Over 50's group - DAWN is a charitable organisation that works for the emotional and social support for communities around Harrow
AGE UK Harrow	18		18	Over 50's activities group

What people told us... GP SERVICES

F C	V. E. P	<u> </u>
Focus Group	Key Findings	Comments
Questions		
Appointments: How easy is to get an appointment	Getting appointments at local GP practices was general very difficult in Harrow. It is even harder for vulnerable adults particularly with a disability or a language barrier. In the 9 workshops, we engaged with varying levels of disability and language barriers, we found different sets of issues that are listed below: • The difficulties of getting through to the surgery • Not understanding the options/Press the wrong Option • Poor communication from the staff • Calls cutting off • Cannot remember date of birth	
Booking appointment by telephone	 68% found it difficult to book an appointment 32% found it easy or quite easy Waiting times for advanced appointments varied between 3 weeks to 4 weeks. Waiting time hanging on the phone to get an appointment ranged from 10 to 15 mins It was easier to get a GP appointment in advance through the online booking online option. To get urgent appointments - must ring at 8.30am on the day. 	"It was difficult to get appointments on the day when they are ill. By the time the get to see the GP they are feeling better - so the advance appointment does not make sense. How do you know if you are going to be sick 3 weeks ahead? This also causes DNA when people don't get text messages to cancel their appointments."



Focus Group	Key Findings	Comments
Questions		"Receptionist - can't get past them, rude receptionist"
Getting an appointment with preferred GP	Most of the participants found it difficult to see their preferred GP, with an average waiting time of 3 to 4 weeks. • 68% found it difficult to book an appointment • 32% found it easy or quite easy	"I had to wait between 3- 10 days to see their preferred Doctor, were able to get appointment with preferred GP in the beginning but now that the surgery has grown not so easy."
Getting an appointment with Male or Female GP	Although the majority of the participants found it easy some were not concerned or not sure if they could ask for this option. • 52% found it easy to get male or female GP appointment • 28% difficult to get a male or female GP appointment • 20% were not concerned or weren't aware of this option	
Translation services	Most of the participants found it difficult to get a translator and many were not aware if these services were available especially as it was not advertised or promoted at the surgery. • 46% Not aware these services were provided • 43% of GP do not provide translation service • 6% Children or partner provide the service • 2% Not applicable • 3% GP staff provide service if they can speak the language	"Some patient use relatives and one lady takes her 7-year-old daughter"
Do you know where else to get help if you cannot get an appointment with GP?	Most of the participants had some awareness of NHS 111, UCC, Walk-in and Pharmacy. However, there was still a significant number that used A&E services. • 65% Aware and use NHS111 and 35% not aware or do not use NHS111	



Focus Group Questions	Key Findings	Comments
Questions	 69% Aware of UCC and accessed the service. 31% not aware or do not use UCC 76% and use Walk-in and 24% not aware or do no use walk-in 61% are aware and use Pharmacy and 39% not aware of this service 27% use A&E services where as 73% use the other services 	
Missed appointment	Most of the participants could cancel their appointment if they remembered and some found it difficult to cancel the appointment as they could not get through by telephone to cancel. • 53% could cancel the appointment • 35% missed and did not cancel, forget or could not cancel • 12% never missed an appointment	"Such a long wait (results of blood test) that I forgot about. Could not make the appointment and called to cancel they appointment, was not given the option to re- book. Had to call again to make another appointment".
Text Service Reminder	Most of the participants were not aware if their GP surgery offered a text service and most did not answer the question on repeat prescriptions • 52% not aware of text service reminders • 48% aware of text services • 66% not aware of repeat prescription services and 44% were aware	
Other services offered by GP services	Over half of the participants were aware of other services. • 55% were aware • 43% not aware • 2%% no comment	
Number of patients who have used or not used these GP services. And which services are used?	Almost a third of the participants did not take part or did not make any comments. • 57% Used these services • 6% did not use any services • 36% did not comment 57% used the followings services: • Blood Test/Blood pressure • Clinic • Nurse	
	 Dietician Flu and other vaccinations	



		Hallow
Focus Group	Key Findings	Comments
Questions		
Carers making	Only 5 carers took part in this question	"Not easy - very difficult,
appointments for	2 carers were able to make	have to ring several
their clients		times. Also as a carer who
their chemis	appointments	works has to take the
	3 said it was not relevant	appointment I am given,
		luckily, I have an
		understanding employer"
		(Carer)
		(3237)
Environment	Wheelchair access/pram access at GP	"Yes but should have step
Does your GP	Surgery	access excluding
surgery have the	Majority of the GP Surgeries have access	wheelchair users"
following services?	to the above	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Tottowing services.	91% have access	"No driveway - all
	• 7% do not have access	blocked".
	• 3% not applicable	"Not good"
		5
	Hearing Induction Loop	
	Majority patients are not aware of the	
	above	
	• 59% not aware	
	33% have access	
	• 7% do not access	
	• 1.% not applicable	
	Access to Washroom (Disabled Toilets,	"Often dirty"
	Baby changing area)	-
	Majority of the GP Surgery have access to	"No toilet roll, have to
	the above	ask for and bad smell."
	• 92% have access	-
	• 7% do not have access	
	• 1% not applicable	
	Information Board	"The font size should be
	Majority of the patients felt that the	bigger so you can see
	information board had information out of	from a distance, old
		information should be
	date or too small to read and in an	removed"
	inappropriate area.	70,110,100
	400/ 1	"TV Screen - do not like
	60% not easy to read	the name of patient"
	40% easy to read	appearing on the
		screen".
		"The information board is
		just at the entrance, very
		busy, sometimes I cannot
		read because it is not
		redu Decudse It is HUL



Focus Group Questions	Key Findings	Comments
Q. 33.1.3113		easy to read, no pictures".
	Complaint Procedure and it is visible at reception or notice board. Majority of the patients said they were not aware. • 70% Not aware/not visible • 9% No • 21% Yes	
	Waiting room Majority of the GP Surgery have access to the above • 100% have access	"Nowhere for wheelchair users" "Need more room" "Never open the windows"
	Water machine Majority of the GP Surgery had a water machine • 75% have access • 23 % do not have access • 2% don't know	"Water machine out of date drinks needs GP daily to look at"
	Child friendly area Less than half of the GP Surgeries did not have access to child friendly area • 44.% do not have access • 29% do have access • 27% not aware	
	Are you able to speak to reception without everyone hearing your conversation? Majority of patients felt they do not have privacy in reception area • 78% do not have privacy. • 13% do have privacy • 9% are not aware	"No and mostly they cannot even see me in the queue because I am short". "Everybody listening."
Patient Experience Do you know if your GP surgery has the following?	Newsletter Majority of patients are not aware of GP newsletters • 43% not aware • 25% do not have a newsletter • 32% are aware of a newsletter	
	Have you ever taken part in a GP survey? Majority of patients had never taken part in a GP survey	



Focus Group	Key Findings	Comments
Focus Group Questions	key Filiuliigs	Comments
Questions	 82% never took part in a survey 18% have taken part in survey 	
	Overall patient experience Over half the of patients were general happy and had a good experience with their GP • 54% good or very good • 10% adequate • 27% not good • 8% bad or very bad • 1% no comment	"Overall I am not happy with the fact that it is really difficult to get appointments on the same day as you call." "Yes very happy" "Good - No complaints" "Waiting times 20 to 30 minutes" "Never get an appointment with GP also locum" "Not very organised" "Daughter with LD - went for smear test and damaged her during procedure received a tear. GP agreed this. Young vulnerable adults need safeguarding process - appropriate adult" "Improve the appointment system" "Training -rude receptionist" "Disabled people should be first to be seen before others. Waiting times to be shorter" "The doctors talk too fast and I cannot understand."
Areas for improvement	 Wheel Chair Access - appointments for sick people Somewhere for wheelchairs users to sit, someway of being noticed. A way to reach my chosen GP - i.e ramp, and also treatment room. 	



	TIGITOW		
Focus Group	Key Findings	Comments	
Questions			
	Difficult for sick people to make		
	appointments when the wake up in		
	time (all appts gone by 08.05)		
	Appointment		
	Making it easier to make		
	appointment on the day you call and		
	being able to get an appointment		
	would be good.		
	The staff are not as polite as they		
	should be		
	More appointment slots		
	More doctors, easy to get		
	appointments. More nurses less		
	waiting for blood test results		
	Emergency appointment are difficult to get		
	to get		
	Privacy		
	Private area in reception to talk		
	about matters that require		
	confidentiality or are personal		
	gommanns, or are personal		
	Child friendly		
	 Accessible children's area that is 		
	bigger		
	Facilities and environment		
	 Improve washroom facilities, always 		
	dirty, wet floor		
	Waiting times		
	Shorter waiting times		
	Directives		
	Clear directives around circumcision -		
	GP refused due to non-medical		
	reasons, HWH to follow up to advise		
	carer around local good practice and		
	provision.		
	Training		
	Receptionists are rude and have no		
	empathy - they need to be trained.		
	To have a kind, friendly		
	compassionate receptionists		
	Patient customer services		
	Have a photo and Name of the Doctor		
	or Nurse on the Surgery Information		
	Board and on the website so you know		
	who you are seeing.		



Focus Group Questions	Key Findings	Comments
	 Use guidelines for accessible writing for people with learning difficulties - see Mencap's guidelines for accessible writing here Giving disabled people more time to speak to the GP at the end of the appointment if they have any problems. Low lighting within waiting room for people with learning disabilities Welcome pack to newly registered patients Repeat prescription collection at chemists not surgery Fast tracking in relation to shorter waiting times to see GP for carers with patients who are learning Disabilities and or mental Health 	
	 On the recent appointment that I was waiting for 3 weeks for the new doctor to see me, showed me to two seats by the wall rather than the seat next to his desk. When he said - he seemed "OK" but I thought being talked to from across the room "Weird" I was given no explanation as to why the distance!!! 	

f) CQC Reports: January 2016 - January 2017

The CQC (Care Quality Commission), provided Healthwatch Harrow with a snapshot of GP practices that were visited during January 2016 to January 2017.

Rating criteria for CQC Inspection:

- 1. Are services safe?
- 2. Are services effective?
- 3. Are services caring?
- 4. Are services responsive to people's needs?
- 5. Are services well-led?

The CQC inspect the quality of care for these six population groups:

- Older people
- People with long term conditions



- Families, children and young people
- Working age people (including those recently retired and students)
- People whose circumstances may make them vulnerable
- People experiencing poor mental health (including people with dementia)

Surgery	Rating criteria 1 to 5	CQC recommendations on key themes & issues
Headstone Road Surgery 107 Headstone Rd HA1 1PG	Overall Good 1- 5	Must Improve only 1 stipulated: • To have robust risk assessment when person who becomes seriously ill on the premises, without access to a defibrillator. • For full report click here
St. Peter's Medical Centre, Colbeck Road, HA1 4BS	Overall Good 1 Requires improvement 2 to 5 Good	 Must Improve 6 stipulated here is an example Be compliant with national guidance, and risk assessment for Control of Substances Hazardous to Health for storage of liquid nitrogen For full report click here
The Pinner Road Surgery 196 Pinner Road HA1 4JS	Overall Inadequate 1 and 5 Inadequate 2 and 4 Requires Improvement 3 Good. Service has been placed under special measures and will be inspected within 6 months.	Must Improve 4 stipulated here is an example • Ensure that there is a formal system in place for recording and complaints. For full report click here
Dr Anjum Zaidi & Partners The Northwick Surgery 36 Northwick Park Rd HA1 2NU	Overall Good 1- 5	Nothing stipulated For full report click here
Dr Paramjit Wasu First Choice Medical Centre 275a Kings Road HA2 9LG	Overall Requires improvement 1,2 and 5 Requires improvement 3 and 4 Good	 Must Improve only 1 stipulated Undertaken clinical audit/re-audits to improve patient outcomes For full report click here



Surgery	Rating criteria	CQC recommendations on key themes &
Dr Kaushikkumar	1 to 5 Overall Good 1 to 5	issues Abust improve Nothing stimulated
Karia	Overall Good 1 to 5	Must improve - Nothing stipulated
Aspri Medical		For full report click here
Centre 1-3 Long Elmes		
HA3 5LE		
Dalmant Haalth	Overall Good 1- 5	Atuat Improve 4 stimulated
Belmont Health Centre	Overall Good 1- 5	Must Improve 1 stipulated • Ensure that annual fire drills are recorded
516 Kenton Lane		and documented.
HA3 5LE		For full report click here
Kings Road Medical Centre	Overall Requires Improvement	Must improve 7 stipulated for example • Improve child immunisation uptake in line
204 Kings Road	1-2 Requires	with national averages
HA2 9JJ	Improvement	
	3-5 Good	For full report click here
Streatfield	Overall Good 1 - 5	Must improve 3 stipulated for example
Surgery 1 Streatfield Road		 the proper and safe management of refrigerated medicines, and have an audit
HA3 9BP		trail.
		For full report click have
		For full report click here
The Pinn Medical	Overall Outstanding	There were several areas of outstanding practice
Centre 37 Love Lane	1-3 Good 4 & 5 Outstanding	for example • The practice had the capacity to deliver
HA5 3EE	Jan 1 a a a a a a a a a a	unlimited telephone consultations to
		support patients with minor ailments.
		For full report click here
The Streatfield	Overall Good 1-5	None must improve stipulated
Medical Centre,	Overall Good 1 3	None mase improve scipatacea
177 Streatfield Rd HA3 9BL		For full report click here
HA3 9DL		
Hatch End Medical	Overall Good 1-5	None must improve stipulated
Centre 577 Uxbridge Rd		For full report click here
HA5 4RD		
Honeypot Medical Centre	Overall Good 1-5	There was 1 area of outstanding practice: • The practice offered No-One Left Alone
404 Honeypot		(NOLA) appointments. Double
Lane		appointments at the end of a surgery.
HA7 1JP		For full report click here



Cummanu	Dating gritaria	COC recommendations on less themes G
Surgery	Rating criteria 1 to 5	CQC recommendations on key themes &
	1 (0 5	issues
The Stanmore	Overall Inadequate	Must improve 8 stipulated for example
Surgery, 71 Elm Park HA7 4AU	1,2 & 5 Inadequate 3 & 4 Requires Improvement	 Ensure recruitment arrangements include all necessary employment checks for all staff, for example, Disclosure and Barring Service (DBS) checks or risk assessments for all staff providing a chaperone service for patients.
		For full report click here
The Bacon Lane	Overall Good	Must improve 1 stipulated:
Surgery	1 Requires	Implement recommendations on fire risk
11 Bacon Lane	Improvement	assessment, health and safety audit, legionella
	•	, , , , ,
HA8 5AT	2-5 Good	risk assessment and the boiler inspection.
		For full report click here



11.Glossary

A&E - Accident & Emergency

BCF - Better Care Fund

BSL British Sign Language

CCG - Clinical Commissioning Group

CQC - Care Quality Commission

DAWN - Diwa Asian Women's Networks

CRISPI - Concerns, Request for Information, Signposting and Intelligence

GP - General Practitioner

GPFV - ~General Practice Five Year Forward View

HAD - Harrow Association of Disabled People

HPPN - Harrow Patient Participation Network

MCP - Multispeciality Community Provider

NWL - North West London

STP- Sustainability and Transformation Plan



Appendix 1: Online questionnaire

Your Voice Counts - GP Accessibility Survey November 2016 to March 2017

-		-		the health serv assured we wil			
Age grou	p: 18-24□	25-35	36-45	46-55□	56-64	65 & Abo	ove
Gender:	□Male □I	Female	(please t	cick)			
Ethnic O	rigin:	•••••					
GP Surge	ry Name:	•••••	•••••		•••••	•••••	•••••
Q1. H	ow easy did yo	ou find it	to register v	with your GP -	please ra	te below.	
	□Excellent		□Good	□Fair]Poor	
Q2. H	ow do you rate	e the cus	tomer care p	provided by re	eception st	taff at your C	GP Surgery?
	□Excellent below)		□Good	□Fair		1Poor - (pleas	se comment
		•••••	•••••		•••••		
	☐ Telephone ☐ SMS (text r ☐ Online (via ☐ In person a ☐ Email	message) a) website at recept prefer t message) a) website	e ion o book an ap	your surgery?		surgery?	
Q5. If	☐ 1 - 2 minutes ☐ 5 - 10 minutes	tes utes dial due	to high dema	how long is you		g time?	



Q6. How satisfied are you with the opening hours at your surgery?
☐ Very satisfied ☐ Satisfied
☐ Neither satisfied or dissatisfied ☐ Dissatisfied
☐ Very dissatisfied
Q7. Do you need help to access your GP? (eg translation, transport, sign language, mobility/disability needs) ☐ Yes ☐ No
If yes please indicate the help you needed <u>and</u> if the Surgery offered it:
Q8. Do you need to take an interpreter with you when you go to see your GP? Yes
□ No □ N/A
Q9. Are you able to book an appointment on your preferred day and time?
☐ Always
☐ Often ☐ Sometimes
□ Rarely
☐ Never ☐ Not tried
Q10. Are you able to book an appointment with your named GP?
☐ Always
☐ Often ☐ Sometimes
□ Rarely
☐ Never ☐ Not tried
Q11. Are you able to choose either a male or female doctor? ☐ Yes ☐ No
Q12. If you are not able to get a preferred GP appointment what was your next choice of action?
☐ Did not see or speak to anyone
☐ Take the appointment that was offered☐ Made an appointment for another day
☐ Decided to contact the surgery another time
☐ Saw a pharmacist
☐ Went to A&E ☐ Went to a Walk-in centres
☐ Went to a Walk in centre
☐ Had a consultation over the phone



Q13. Are yo	u aware of the following p	laces to access health care	?
□ A&	E □ Walk-in Centre	☐ Urgent care centre	□ Pharmacy
Q14. Are you	aware of how to make a	complaint if you are unhapp	oy with your GP service?
☐ Yes	□ No		
Q15. Any otl	ner comments regarding yo	our GP Surgery:	
		Thank you	

Healthwatch Harrow, 3 Jardine House, Harrovian Business Village, Bessborough Road Harrow, HA1 3EX



Appendix 2: GP Surgeries Mystery Shopping Form

GP Surgery	Comments
1. Is there a website?	☐ Yes ☐ No
1. 13 there a website:	1C3 1NO
Online Research	
2. Complaints policy – is there a	Yes No
complaints	
policy/procedure available online?	
Is it easy to find?	
	☐ Yes ☐ No
Online Research	
3. Registration policy – is there a	☐ Yes ☐ No
Registration	
policy/procedure available online?	
le it conv to find?	
Is it easy to find?	☐ Yes ☐ No
Telephone Research	
4. Translation Services – Do you	Yes No
offer translation services at the	
practice	
Telephone Research	



5. Does the out of surgery hours	
message cover the following:	
a) The Surgery is closed	Yes No
b) The Surgery's opening hours	☐ Yes ☐ No
c) Information on NHS 111 for medical advice	☐ Yes ☐ No
d) Information provided on Urgent Medical Care Centre Walk-in Centres	☐ Yes ☐ No
e) Information on 999	Yes No



Appendix 3: Focus Group

Focus Group GP Accessibility

Hos	st organisation
Clie	ent group Date
	Confidential and Drivery
	Confidential and Privacy All information, comments and experiences will be anonymous Any information will not be used to identify you or anybody else
TO	OPIC 1: GP Services
Аp	ppointment
1.	How easy has it been for you to book an appointment with your GP/Nurse?
2.	Have you been able to get an appointment when you want it with your preferred GP?
3.	Have you asked for a male or female GP, and got it?
4.	Have you asked for translation services at your GP surgery?
5.	Do you know where else to get help if you cannot get an appointment with your GP?
6.	If you missed an appointment with your GP? Did you tell? And if why not?
7.	Does your GP surgery have a reminder service for appointment made and repeat prescription?
8.	Do you know what other services your GP practice has to offers?
	8.1 □Yes □No □Not Aware
	8.2 □If so have you ever used any of these services? And which ones are they?

For Carers making appointments for your clients only

9. Are you able to make appointments on behalf of the person you are caring for? □Yes or □No



Please share you experience below
TOPIC 2: Environment
10. Does your GP surgery have the following (please tick as many as possible)
□Wheelchair access/pram access
☐Hearing Induction Loop
☐Access to Washroom (Disable Toilets, Baby changing area)
□Information Board – Is it easy to read □Yes □No
□Complaint Procedure and is it visible at reception or notice board □Yes □No □Not Aware
☐Waiting room
□Water machine
□Child friendly area
☐ Are you able to speak to reception without everyone hearing your conversation? ☐ Yes ☐ No
TOPIC 3: Patient Experience
11. Do you know if your GP surgery has the following?
□Patient Participation Group
□Newsletter
□Have you ever taken part in a survey? □Yes□ NO
What is your overall patient experience of your GP surgery?
Are there any areas of improvements that the surgery could make?



Appendix 4: GP Surgeries

	GP Practice	
1	Aspri Medical Centre	
2	Bacon Lane Surgery	
3	Belmont Health Centre	
	Long Elmes Surgery	
4	Circle Practice	
5	Civic Medical Centre	
6	Elliot Hall Medical Centre	
7	Enderley Medical Centre	
8	Enterprise Practice	
9	First Choice Medical Centre	
10	GP Direct - Welbeck Road	
	Eastcote Lane	
	Butler Avenue	
11	Hatch End Medical Centre	
12	Headstone Lane Medical Centre	
13	Headstone Road Surgery	
14	Honeypot Medical Centre (Charlton Medical Centre merged with	
	Honeypot)	
15	Kenton Bridge Medical Centre (Dr Golden)	
16	Kenton Bridge Medical Centre (Dr Raja)	
17	Kenton Clinic	
18	Kings Road Surgery & Eastcote Surgery	
19	Mollinson Way Surgery (formerly Harness Harrow)	
20	Northwick Surgery	
21	Pinn Medical Centre	
22	Pinner Road Surgery	
23	Pinner View Medical Centre	
24	Ridgeway Surgery	
25	Roxbourne Medical Centre	
26	Savita Medical Centre - Dr M Pandya Harrow View	
	Savita Medical Centre - Spencer Road	
27	Shaftesbury Medical Centre	
28	Simpson House	
29	St. Peters Medical Centre	
30	Stanmore Medical Centre - Crowshott Avenue	
	Stanmore Medical Centre - William Drive	
31	Stanmore Surgery	
32	Streatfield Health Centre	
33	Streatfield Medical Centre	
34	Zain Medical Centre	



Appendix 5: Walk in Centre & Urgent Care Centre

Walk in Centres		
Alexander Avenue		
HHCIC East Walk-in Centre - Belmont Health Centre		
Pinn Medical Centre		

	Urgent Care Centre
Northwick Park	



Appendix 6: Ethnic Background

Ethnic Background - Self-defined	Percentage
African	2%
Asian	5%
Asian - Other	2%
Black	1%
Black British	1%
Black Caribbean	1%
British	19%
British - other	1%
British Asian	2%
British Indian	3%
European	1%
French Mauritian	1%
Indian	14%
Indian - Other	1%
Irish	2%
Mixed Asian/Malay	1%
Other	1%
Sri Lankan	2%
White British	18%
Prefer not to answer	20%
White	3%
Total	100%



Contact us

Improving and shaping local health and social care



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