

# Poplar House Surgery

Date: 21<sup>st</sup> June 2024

Time: 10.00-12:30



**Disclaimer:** This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and patients who met members of the Enter and View team on that date.

# Contact Details

## Address

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## Registered Manager:

Michelle Melanie (Practice Manager)

## Date and Time of our Visit:

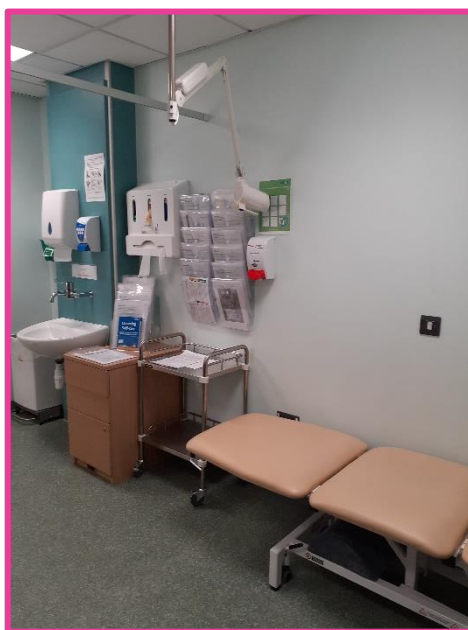
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## Healthwatch Lancashire Authorised Representatives:

Sue Edwards (Senior Engagement Officer)

John Moore (Healthwatch Lancashire Volunteer)



# Introduction

Healthwatch Lancashire is the independent public voice for health and social care in Lancashire and exists to make services work for the people who use them. We believe that the best way to do this is by providing the people of Lancashire with opportunities to share their views and experiences.

Healthwatch Lancashire has statutory powers to listen, act, challenge and gather feedback to improve Local Services and promote excellence throughout the NHS and social care services.

To help achieve this Healthwatch has a statutory power to 'Enter and View' health and social care services that are publicly funded. The purpose of an Enter and View is to listen to people who access those services and observe service delivery.

Following the Enter and View visit a report is compiled identifying aspects of good practice within the service visited, along with any recommendations for possible areas of improvement.

As we are an independent organisation we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the service provider providing an opportunity to respond to any recommendations and comments before being published on the Healthwatch Lancashire website at:

[www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk)

The report is available to members of the public along with the Care Quality Commission, Healthwatch England and any other relevant organisations. Where appropriate Healthwatch Lancashire may arrange a revisit to monitor the progress of improvements and celebrate any further successes.

## General Information

Poplar House Surgery has approximately 6,900 registered patients including patients in local nursing/care homes and those who may be housebound.

Services include GPs, a physician associate, practice nurses, a pharmacy technician, community nurses, health visitors, a care plan co-ordinator and care at home team, social prescribers and administrative staff.

## Acknowledgements

Healthwatch Lancashire would like to thank patients, staff and management for making us feel welcome and for taking the time to speak to us during the visit.

# What did we do?

Healthwatch Lancashire Enter and View Representatives made an announced visit to Poplar House Surgery on 21<sup>st</sup> June 2024 and received feedback from:



## Pre-visit practice survey

Healthwatch Lancashire emailed a pre-visit questionnaire to the practice manager to learn about the patient population, services offered and how the surgery manages appointments for patients. Information from this questionnaire is included in the summary below.

## Introductory meeting with Practice manager

At the beginning of the enter and view visit Healthwatch Lancashire met with the practice manager to discuss the surgery and to view the facilities. The manager explained that appointments can be booked via the phone or in person at the surgery, with an online booking system to be available soon.

## One to one discussions with patients and their relatives

Healthwatch Lancashire spoke with patients about their experiences including appointment booking, how they felt about the service and the care and treatment delivered by the staff at the surgery.

## Discussions with members of staff

Healthwatch Lancashire Representatives spoke with members of staff about their experiences of delivering services to patients. Questions centred around support for patients and any improvements staff felt could be made at the surgery.

## Observations

Observations were made throughout the visit. This included patient and staff interactions, accessibility measures in place throughout the surgery and the condition and cleanliness of the facilities.

# Summary



When initially contacting the surgery staff responded quickly and were found to be welcoming to a proposed visit by Healthwatch Lancashire. Prior to the visit a pre-visit questionnaire was completed by the practice manager which provided information around the day-to-day running of the practice; this allowed for the Healthwatch Lancashire team to be fully prepared for the visit.

On arrival the surgery team were welcoming to the Healthwatch Lancashire representatives and gave in-depth information about their services.

Services provided at Poplar House Surgery included GPs, advanced clinical practitioners, a physician associate, practice nurses, a pharmacy technician, community nurses, health visitors, a care plan co-ordinator, a care at home team, social prescribers and administrative staff.

Issues around making appointments by telephone was raised as the area requiring the most improvement by patients, along with waiting room times and length of appointments. Positive comments were received around the quality of care as well as the environment.

More access to online booking was highlighted as a patient need, with several patients stating that they would use this if it was available. The surgery had already identified this previous to the visit and were in the process of setting up an online booking service along with a new website.

Staff felt that demands on their time could be challenging but that they were sufficiently staffed and able to provide person-centred care. All staff felt well supported and that current training was good. All staff spoken with were praising of the staff team and stated that they are happy working at the surgery.

Accessibility at Poplar House Surgery was good, with clear signage, plenty of space for those with mobility aids, and was dementia friendly.

The practice has a Patient Participation Group (PPG) which they are struggling to recruit for but are actively working to increase numbers and diversify the group in order to ensure that the local community is fully represented.

# Practice Overview



Poplar House Surgery is located within St Annes Medical Centre. The centre is based on Durham Road close to Lytham St Annes town Centre.

St Annes Medical Centre is situated in a modern purpose built two-storey building which incorporates Poplar House Surgery, Parcliffe Surgery, a pharmacy and community health services.

Poplar House Surgery is part of the Lytham St Annes and Ansdell Primary Care Network which includes five practices in the Lytham St Annes and Freckleton areas. Out of hours appointments are available through the Primary Care Network dependant on which practice is open at the given time. Patients can also access out-of-hours appointments through the Fylde Coast Integrated Urgent Care Service which covers practices across the Fylde region when practices in the Lytham St Annes and Ansdell Primary Care Network are closed.

There is good road access with on-site parking including disabled parking spaces, and some street parking is also available. There is good public transport to the area with regular buses and there are bus stops located a five minute walk from the health centre.

## Surgery Population



Patient demographics are mainly white British with a low number of other ethnicities. There is a high number of older retired patients registered at the surgery, although there is currently a rise in younger low income families registering as patients. There is also a high number of residential care and nursing homes in the area meaning that there is a higher need for Care at Home services.

## Appointment Management



Appointments can be made in person at reception or by telephone; the practice is currently developing an online booking system to allow for patients who prefer to book online if they prefer.

When phoning to make an appointment there is a call-back option which allows for patients to end the call and for the surgery to return their call rather than being on hold for a length of time; this call back service is automatic and acts as a 'hold' for the patient in the queue system.



When initially phoning the surgery to arrange the visit a voice message was listened to which provided four options for the caller dependent on the reason for their call; although it was stated that calls cannot be transferred between teams so the caller would need to hang up and redial if they don't choose the correct option. The message also stated that repeat prescription can't be ordered via the telephone and need to be ordered through the apps or in person which could present a barrier for those who are housebound and not digitally competent. However, when phoning to arrange the visit it was answered quickly and the call handler was friendly and helpful.

When making an appointment the patient is triaged and care-navigated to the most appropriate clinician. Aside from the call handlers a designated GP carries out clinical triaging on a daily basis which ensures that where necessary the patient can be telephoned for a quick chat and/or further information gathered, appointments booked and referrals made.

The practice has a minimum of three call handlers available to take telephone calls dependant on demand of time and day; other staff are trained in the telephone system and can support as and when necessary. The surgery offers all patients face-to-face appointments unless a there is a specific request for a telephone/video appointment.

For those needing interpretation services these can be provided via the Prestige Language Line, and this includes British Sign Language (BSL).

On arrival patients can check-in themselves using an electronic system located within the main waiting room, and patients were also observed checking-in with reception staff.

Healthwatch Lancashire representatives were asked to sign in/out as visitors and were provided with a visitors badge in order for good security and safeguarding.

# Enter and View observations

## External Environment

On arrival the external layout was a little unclear with several car parks around the centre, however, this is out of the control of the surgery and there were ample parking spaces which included disabled car spaces.

The main entrance into the health centre was easily identifiable, and clear information about services was on display externally at the main entrance.

Access into the building was level with the footpath providing good accessibility for wheelchair users and those with poor mobility. Entrance doors were automatic and sufficiently wide enough to allow for easy access. A designated ambulance pick up/drop off area was located directly outside the entrance.

The building appeared in good repair, and established planting was seen throughout the outdoor space giving a pleasant green feel to the site.

## Internal Environment and Waiting Areas

On entering the health centre several reception desks were located around the ground floor for different practices and services, and these were clear and easily identifiable as to which practice/service they represented.

There was one central waiting area for all services which was located on the ground floor, with smaller waiting areas located in strategic locations throughout the building for individual community services.

Poplar House Surgery was located in a clearly defined space, and the practise manager explained that all the Poplar House Surgery signs were in blue to differentiate from other practices located within the health centre.

The reception desk was easily identified and was observed being busy but reception staff were seen to be dealing with patients efficiently and professionally.

Patients were able to check-in themselves using an electronic check-in system located close to the reception desk and patients were observed using this throughout the visit.

The main waiting area was spacious, well maintained and clean; with seating suitable for individual needs and requirements. There was sufficient room for those in wheelchairs, using mobility aids etcetera to move around freely.

Staff offices were located on the first floor and lifts were available, although all Poplar House Surgery patient services were located on the ground floor. Stairs were also available; and a fire evacuation chair was located in the stairwell for in the event of an emergency.





Both the surgery and health centre was well-lit with lots of natural light from large windows, and with an open style central atrium with skylights.

One central corridor led from the reception and main waiting areas to the Poplar House consultation rooms; and these had clear signage along with staff information on display so that patients were able to identify with who they would be seeing.

Along the Poplar House Surgery central corridor there was an electronic machine which allowed for patients to take their own blood pressure, weight etc.

Quiet rooms were available for anyone requiring space for confidential, sensitive conversations, and for those who may have dementia/Alzheimer's, autism or long-term conditions and who may benefit from a less stimulating environment whilst waiting for their appointment.

There was a large screen monitor in the main waiting area specific to Poplar House Surgery showing health advice and information as well as calling patients into their appointments. Patients were called into their appointment by both a visual and audio notification, and these were clear and easy to see/hear.

Surgery and health information was displayed throughout the communal spaces including information about the Patient Participation Group (PPG) although this was sparse, and the practice manager explained that they had limited ability to display information due to their lease agreement; it was therefore deemed acceptable as the information seen to be displayed was relevant. Advice and information leaflets were also seen to be available in the treatment rooms which were seen allowing for easy reference to by clinicians during appointments.

The Healthwatch Lancashire poster announcing the visit was clearly displayed within the main reception area close to the electronic check-in device.

Accessibility was observed to have been considered throughout the surgery, including handrails which were located along the corridors to support mobility for those who may be unsteady on their feet.

Overall the surgery was seen to be dementia friendly with contrasting colours, plain flooring and good lighting, and the practice manager informed the Healthwatch Lancashire representatives that all staff were dementia trained.

Discussion with surgery staff identified that there is a British Sign Language (BSL) interpretation service available provided by Prestige Language Line, and that this also includes interpretation services for patients for whom English is not their first language.



## Patient Interactions



On arrival Healthwatch Lancashire representatives observed a busy reception desk; reception staff were observed to be knowledgeable and helpful and had an approachable manner.

There was a steady flow of people coming in and out but there was a calm atmosphere; and staff demonstrated good understanding of individual needs and requirements. All staff observed were professional, friendly and efficient.

The surgery has a team of staff answering phones to make appointments and deal with enquiries, and it was explained to Healthwatch Lancashire representatives that there is usually a minimum of three members of staff available for this dependant on time of day and demand.

Staff were observed knowing their patients well and being welcoming and friendly.

## Patient Involvement



The website for Poplar House Surgery was easy to use with information around services, the practice team and the such, however it was explained to Healthwatch Lancashire representatives that a new website was due to be launched in the upcoming weeks.

Patients had access to the MyGP and the NHS apps, and the surgery had a 'Digital Doctor' who was available to help patients get online, use the apps etcetera.

Friends and Family Test (FFT) forms were available on request from the reception team; although it is recommended to have these more easily available so that those patients who prefer not to ask or are unaware that they are available can provide feedback.

At the time of the visit the practice had a Patient Participation Group (PPG) but it was explained by the practice manager that they were struggling to recruit patients into the group and that they were looking at how to expand and develop the group.

It was explained to Healthwatch Lancashire that the surgery has a high number of patients with learning disabilities and in light of this have previously carried out a learning disability event to allow for patients with further needs to become familiar with the surgery team and environment in order to reduce anxiety when attending an appointment. The surgery team were also actively identifying informal carers and providing extra support wherever possible; in order to achieve this the surgery had linked with N-Compass who provide Lancashire Carers Services.

# Patient feedback

Healthwatch Representatives spoke with eight patients during the visit; one of the patients spoken with listened to the role of Healthwatch and the purpose of the visit but stated that they were too stressed to answer any questions.

## How did you make your appointment today?

Out of the seven patients who answered this question six had made their appointment via telephone, the seventh stated that their spouse had made the appointment so was unsure.

Feedback on patient experience making an appointment by telephone was mixed:

*“It’s normally very good, but today’s booking was absolutely horrendous”*

*“I phoned at 08:00am, I was only in the queue for 5 minutes. That’s fast”*

*“It took twenty minutes to speak to someone. It was worth the wait though I got an appointment that was good for me”*

None of the patients spoken with had used the call back service at the time of the visit, although one had past experience.

*“I didn’t use call back. I knew that it was an option but didn’t trust it enough to use it”*

*“I didn’t bother using call back, I didn’t want to lose my place”*

*“...when I got a call back, the person calling just said “Poplar House”, there was no explanation of why they were calling, no “Hello”. I may not have been the person taking the call”*

Overall satisfaction around making appointments was low and there appeared to be a need for further understanding of the triaging process by some patients.

*“I was only given the option of one appointment, so had to take it even though it was awkward for me to attend. There appeared to be either no flexibility or no remaining appointments to attend”*

*“It would be good if they could provide an effective booking process”*

Two patients stated that they would use an online booking system if it was available

*“I’d be able to make appointments myself online if that was an option”*

*“I would use any other means of booking an appointment if they were available”*

Other comments included:

*“I rang at 08:00am and was seventh in the queue*

*“My hearing means that I can’t use the phone”*

*“I was on wait for 20 minutes”*

## **Do you feel that you receive care and treatment that meets your needs?**

There was a mixed response by the seven patients who answered this question with some feeling that their needs were being met whereas others felt improvements were needed.

*“5 out of 10. Appointments regularly run late, my last was 30 minutes late and this one is running 25 minutes late...”*

*“I originally had two issues to resolve and found that I was forced to prioritise...”*

*“I’m treated good, very good”*

*“They are kind and hospitable”*

*“...as you get older all the issues are inter-related, it’s not possible to talk about just one”*

Five patients talked about the environment with it being found to be suitable and well maintained, with one comment about parking:

*“Absolutely excellent”*

*“They are fine, to be fair. There’s everything that you need... parking can be awkward”*

*“Well maintained”*

## Is there anything that can be changed to meet your needs?

Making appointments was the key issue patients identified as requiring improvement, as well as waiting room times for appointments for one patient.

Two patients discussed digital access and the fact that they were open to using online booking methods.

One patient was unclear about the triage process and had an expectation that they would see a GP as a matter of course when making an appointment; and it's therefore recommended that some work is carried out to raise patient understanding of the triaging process.

One patient suggested that there could be more check-in availability: ***“there could be multiple check in facilities”***

## Do you receive information from the surgery that is easy to understand?

Five patients commented on communication, with one dissatisfied around a call back experience, one dissatisfied with the call handlers manner, and three stating that it was satisfactory.

***“The telephone manner was brusque and unhelpful... the lady on the phone had no manner at all, speaking quite rudely...”***

***“Pretty good”***

***“Not too bad”***

## Do you know how to make a complaint if needed?

Five patients responded to this question with two saying that they wouldn't make a complaint, one of which said that this was because they appreciated that everyone was busy. Two patients stated that they would talk with reception staff and one explained that they knew that they could ask for a feedback form at reception.

***“Yes, I'd go to reception for advice or I'd call”***

***“There are sheets at the desk, or you could just speak to the desk for help”***

***“No. I probably wouldn't bother”***

# Staff feedback

Healthwatch spoke to six members of the staff team during the visit. Staff spoken with were in differing roles including clinical and non-clinical. Staff were observed interacting well with patients and appeared to be confident in their roles.

## Do you have enough staff when on duty?

All six staff who provided feedback felt that the surgery was sufficiently staffed.

*“Yes, everyone is multi-trained so someone else can hop in”*

## Do you feel supported to carry out a person-centred experience?



All staff members spoken with felt that they were able to provide person-centred care, although one commented that demand for services is high which can impact on time.

*“To some extent, demand is high but we try our best”*

*“Everyone goes above and beyond”*

One member of staff felt that the high demand for services could start to impact on the patient experience in the future, although this was around GP services in general rather than specific to the surgery.

## Do you feel you have enough training to carry out your duties well?

All six members of staff stated that they felt sufficiently trained in order to carry out their duties and that staff can request further training if they feel it would be beneficial for their roles.

*“Yes, training is thorough and constantly updated as needed...”*

## What measures are in place for people with additional communication needs?

Surgery staff explained that they use the system Patches which provides access to electronic patient files for Poplar House Surgery ensuring patient information is easily available; this allows for staff to identify where extra support may be required for individual needs such as for those who have visual/hearing





impairments, autism, dementia etcetera. This was also being used to identify informal carers and be able to offer further support.

Discussion with surgery staff determined that there were interpreters available for British Sign Language (BSL) via the Prestige Language Line. Interpreters were also available by telephone for those whom English is a second language.

Quiet rooms were available for those who may find the general waiting areas overwhelming, and consultations were being carried out in the most appropriate space for the individual.

## **What is your experience of working here?**

All six members of staff who provided feedback were positive about their experience of working at the surgery.

*“It is positive with a good environment and friendly people”*

*“I love my patients and want to keep this relationship”*

*“It’s like a family...”*

*“I love it”*

## **Are there any changes that can be made to improve the patient experience?**

Two of the staff spoken with felt that more clinicians would help reduce waiting times for appointments and improve patient experience.

*“More clinical staff...”*

*“Like everywhere more doctors and staff...”*

One staff member felt that the appointment booking system could be improved with more online options, and that this would help alleviate the pressures of the call handling and reception teams when patients are frustrated and/or lack understanding of the triage process.

# Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from patients and staff.

1. Investigate patients understanding of the call back system and look at how this can be promoted more in order to improve patient experience when making telephone appointments
2. Investigate patients understanding of the triaging process and look at how this can be communicated in order for patients to have a clearer understanding as to why they may not see the clinician that they were expecting
3. Carry out work to raise patient awareness of the availability of double appointments, and therefore enable those who feel they need a longer time with a clinician the opportunity to have more person-centred care and reduce the need for multiple appointments
4. Promote the new online booking system when it becomes live and support patients to utilise the digital platforms
5. Continue to promote and recruit for the Patient Participation Group (PPG) and strive to have a diverse group of patients with lived experience who can represent their local community
6. Have Friends and Family Test (FFT) forms available for patients within the reception or waiting area in order to gather further feedback from those patients who may not be aware of the opportunity to provide feedback or prefer not to/are unable to ask
7. Share this report with patients via digital platforms and/or other methods in order highlight current good practice and allow for patients to be fully informed of where actions will be carried out

# Provider response

Recommendation	Action from provider	Timeframe	Comments
<p><b>Appointment booking:</b> Investigate patients understanding of the call back system and look at how this can be promoted.</p> <p>Carry out work to raise patient awareness of the availability of double appointments.</p> <p>Promote the new online booking system when it becomes live and support patients to utilise the digital platforms</p>	<p>We are constantly reviewing and looking at ways to continuously promote our call back services and the ability to book double appointments.</p>	<p>Ongoing</p>	<p>We have a variety of posters promoting double appointments and the call back system which we rotate due to the limited space we have. We utilise social media and now we have our new website we will be utilising this to promote as well. Once the new online system goes live, we will continue to promote this as well.</p>
<p><b>Triaging:</b> Investigate patients understanding of the triaging process and look at how this can be communicated in order for patients to have a clearer understanding of the process</p>	<p>We will be doing a large piece of promotion around triaging to help patients understand it better</p>	<p>in the next 4 weeks</p>	<p>As well as adding it to our new website, we will put some fliers in reception and continuously promote it on social media.</p>
<p><b>Patient Participation Group (PPG):</b> Continue to promote and recruit for the Patient Participation Group (PPG) and strive to have a diverse group of patients with lived experience</p>	<p>We are constantly promoting our PPG</p>	<p>Ongoing</p>	<p>We had a further two new members join us for our last meeting, and we continue to use social media to promote it as well as promoting it in the reception.</p>
<p><b>Friends and Family Test (FFT):</b> Have Friends and Family Test (FFT) forms available for patients within the reception or waiting area in order to gather further feedback from those patients</p>	<p>Difficult due to limited space within the building</p>	<p>Ongoing</p>	<p>Upon discussion and with the limited space we have we will rotate it with other promotional documentation so there is a regular slot for it to be available</p>
<p><b>Patient information:</b> Share this report with patients via digital platforms and/or other methods in order highlight current good practice and allow for patients to be fully informed of where actions will be carried out</p>	<p>Agreed</p>	<p>When it is finalised</p>	<p>Happy to share it via a digital platform when the final report is available</p>



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