



Enter and View Report

The Sheepmarket Surgery, Stamford
General Practice Visits
August 2015

Summary

The following report into localised General Practice services was carried out following an enter and view visit to the Provider.

The work was carried out in direct response to the scheduled enter and view programme of work for Healthwatch Lincolnshire and also in response to the December 2014 report for 'GP missed appointments' and also patient feedback directly into Healthwatch.

The report as appropriate identifies areas where Healthwatch believes that a particular challenge to that service is presented, either to the provider or the patient.

Healthwatch is mindful that factors outside the control of the GP Practice can have a significant impact on the perceptions of the people using those services and this is acknowledged where it arises.

Key Themes:

The report looked at 3 core areas - patient experience, the environment and feedback from staff. As part of this process themes and trends often occur and for The Sheepmarket Surgery the key themes that we identified were:

- Patient experience and feedback from the visit to The Sheepmarket Surgery was overwhelming positives and patient views appeared to echo the views of the Practice Manager in terms of providing a safe, caring and effective service.
- In terms of facilities and the environment it was seen to be a clean and well maintained. However, observations and patient feedback led us to identify challenges for patients in relation to car parking and also some recommendations to patient queuing in the reception area which may enhance patient confidentiality.
- It was noted that the Practice whilst working well with community and voluntary sector organisations, did see a shortage in community care professionals which in turn impacted on the pressure for the Practice.
- It was noted that The Friends of Sheepmarket Patient Group in its current form did not meet the tasks and functions specified by the Practice or met the expected remit of a formal PPG and here again the group seemed open to the future possibility of change. Extending the remit of the group to liaise between doctors, staff, patients and other health related organisations and to encourage self-help and promote patient's needs and interests will all increase the visibility of the group.

Contents

1. Background.
2. Methodology.
3. Respondents.
4. Findings from Respondent Experience Survey.
5. Final Recommendations.

Appendix:

- A. Other Key Roles within General Practice.

Place of Visit: The Sheepmarket Surgery
Address of Visit: Ryhall Road, Stamford PE9 1YA
Service Provided: General Practice
Date: August 2015

1. Background

This piece of work has been carried out by Healthwatch Lincolnshire who has a statutory function to enter and view any publically-funded premises providing health and care services. These visits are carried out with the sole intention of collecting information relating to the quality of services provided and gathering the views of patients, relatives and carers of those people accessing and receiving the services.

Healthwatch carried out this work as part of its Operational Plan but also as a direct response to countywide patient feedback and national coverage of the strain and impact being seen across our health and care services.

In addition to carrying out this work, we have a duty to ensure any information gathered is disseminated to the relevant organisations which have a monitoring and commissioning responsibility. We also have a duty to report to the relevant bodies any cause for concern relating to the safety and care of those in receipt of those services.

2. Methodology

Healthwatch-authorized representatives were appointed to undertake this piece of work and a questioning framework was produced to enable the representatives to effectively talk with patients, relatives, carers and care-providing staff and to make observations during the visits. The framework is not exhaustive, but does provide a background for establishing patient experience of their local Practice.

The focus of this work was to specifically look at what experiences people had of using their local services, to identify what patients thought was good about the service and what they thought could be improved. We also listened to the views and experiences of the professionals working within those environments to gain a better understanding of some of the challenges they face in providing care to their patient population.

In the interest of confidentiality we do remove the names of those making specific comments although generic comments themselves maybe included within the report feedback.

The Provider

The Sheepmarket Surgery is a town-based Dispensing GP Practice located in Stamford. The Practice at the time of the visit served around 14000 patients. The Practice has a large team of staff comprising of GPs, nurses, healthcare assistants, reception and an administration staff, it has in addition, community midwives and district nurses also based at the Practice.

The Practice runs a number of clinics such as asthma and diabetes but in addition also offers other services such as antenatal and postnatal care, minor surgery, childhood vaccinations and well-person check-ups.

The Practice has a Patient Group (Friends of Sheepmarket) which is active and is looking to expand further.

Within the Practice, morning surgery appointments are available as well as bookable appointments in the afternoon.

Acknowledgement

Many thanks to the teams who took time out of their schedule to facilitate the visits but also to listen and contribute to the conversations around the findings and a special thanks to Emma Downs, Practice Manager who helped ensure the visit ran smoothly. In addition, we would like to thank all the patients who provided us with a real life understanding of general Practice from a patient perspective.

3. Respondents.

Prior to any conversation being held with a service user, we introduce ourselves and ask permission for any dialogue to continue as we respect that not all service users will want to engage in this way.

During the visit we spoke to as many patients who wished to and had capacity to talk with us. In addition and where appropriate, we spoke with staff to provide a more holistic view.

A total of 40 patients spoken to during the visit, it is their views and experiences that have contributed to this report.

4. Findings from Respondent Experience Survey.

The following provides an overview of the service from a lay-person's perspective. However initially it is useful to understand the role of general Practice and what it should mean for a patient, the following outlines national guidance and expectations of service provision.

The Role of a GP

A General Practitioner (GP) is your family doctor and is the main point of contact for general healthcare for NHS patients. All UK residents are entitled to the services of an NHS GP.

What the Care Quality Commission says you should expect when a GP Practice is meeting national standards of quality and safety.

1. You can expect to be respected, involved and told what's happening at every stage.

- You, or someone acting on your behalf, will be involved in discussions about your care and treatment.
- You will get support if you need it to help you make decisions and staff will respect your privacy and dignity.
- Before you receive any treatment you will be asked whether or not you agree to it.

2. You can expect care, treatment and support that meets your needs.

- Your personal needs will be assessed to make sure you get safe and appropriate care that supports your rights.
- You will get the care that you and your GP agree will make a difference to your general health and wellbeing.
- Your healthcare needs are co-ordinated if you move between care services.
- Staff respect your cultural background, sex (gender), age, sexuality (whether you are a lesbian, gay, bisexual or heterosexual person), religion or belief, and your disability, if you have one.

3. You can expect to be safe.

- You will be cared for in a clean environment where you are protected from infection.
- Where appropriate, you will get the medicines you need, when you need them, and in a safe way.
- You will be treated in a safe and accessible place.
- You will not be harmed by unsafe or unsuitable equipment.
- Your GP Practice will take appropriate action if they suspect that a patient is at risk of harm.

4. You can expect to be cared for by staff with the right skills to do their jobs properly.

- Your general health and welfare needs will be met by staff who are properly qualified.

- There will always be enough members of staff available to keep you safe and meet your needs.
- You will be looked after by staff who are well managed and have the chance to develop and improve their skills.

5. You can expect your GP Practice to routinely check the quality of its services.

- The GP Practice regularly monitor the quality of its services to make sure you receive the care you need.
- Your personal records will be accurate and kept safe and confidential.
- You, or someone acting on your behalf, can complain and will be listened to. Your complaint will be dealt with properly.

For information relating to specific services that can be accessed at a local general Practice please refer to the provider’s website and for further information on additional roles that can be found within a Health Centre please refer to Appendix A.

The same questions were asked of all the patients we spoke to. We understand that patients do not always understand the challenges a Practice faces and as such, we hope that this piece of work will highlight areas where patients and Practice could share specific information to support patient awareness. Likewise, it is accepted that General Practice is also not aware of the challenges patients face and therefore, where there was opportunity, we highlighted to patients the process of engaging with the Practice PPG where it existed and the Practice Manager.

All patient data collected is confidential and whilst we have only produced this report on the findings received on the day, we have also considered any additional feedback that Healthwatch may have received.

If at any point a patient wishes to feed back to Healthwatch on any part of the Practice they are welcome to do so by the contact methods given on the last page of this report.

A Patient Perspective

The NHS asks patients to consider a number of issues when looking to register with a GP Practice, however in some areas the availability of GP Practices may be quite restricted, this may be true of country Practices as opposed to city Practices where there is a greater concentration and greater choice.

Some of these areas for patient consideration include:

Location

Is it accessible for you?

Parking

How easy is it to park and does it provide additional support via disabled spaces?

Atmosphere

What does it feel like when you walk in the Practice?

Front Desk Staff

What is your impression of staff? Are they welcoming and friendly?

Opening Times

Are the Practice opening hours or alternative arrangements appropriate for your needs?

Appointment Systems

How does the Practice operate its appointment bookings? Is it clear and easy for you to understand, can you book in advance, can you see someone on the day, can you book online?

Information

Does the Practice appear to offer a range of information about local services that can support?

Carers' Support

Does the Practice have a clear policy on how they can support carers?

Long-term Conditions

If you or a member of your family has a long-term condition, is there additional support such as clinics and GP with special interests?

Patient Involvement

Practices from 1st April 2015 are contracted to have Patient Participation Groups. Has the Practice got a mechanism for getting patients engaged and involved in the Practice?

We explored some of these areas with patients and the results of the findings are below.

Accessibility of Service

Out of the 40 people spoken to, only one felt that the opening times were not helpful to the patients. Others said they felt the surgery consulting times worked well for them although there were a number of patients who thought Saturday and longer hours (early morning or evening) might be helpful, particularly for those in work not requiring an emergency appointment but still needing to see a GP or nurse. Patients also told us that it would be useful if there were more online appointments available to book.

Patients told us and were generally accepting of the fact that they might have to wait a few days to see the doctor of their choice, however, a couple of patients said that trying to book an appointment ahead was a real problem and they had to rely on the 'on-the-day booking' system to see a GP.

The Practice told us that Tuesday and Thursday evening appointments and Saturday morning appointments are pre-booked appointments only and aimed to cater for those patients who are unable to attend during normal surgery hours. We did not ascertain

how many of those extended hours appointments had been utilised or whether they were indeed being utilised by those that can't normally attend the 9 - 5 surgeries.

The Practice told us that patients were able to make appointments for the same day and appointments for the nurses can be booked 4 weeks in advance. In addition, there are reserved GP and nurse urgent appointments which form the "On Call" team, the surgery is open 2 late nights and has an Out of Hours Team.

Practice Opening Hours

Monday	8.30 am - 6.30 pm
Tuesday	8.30 am - 7.30 pm
Wednesday	8.30 am - 6.30 pm
Thursday	8.30 am - 7.30 pm
Friday	8.30 am - 6.30 pm
Saturday	8.00 am - 11.15 am

Consultation Times

- Routine Appointments available between 08.30 and 11.00 am.
- Pre-bookable appointments available between 3 and 6 pm.

Appointments with the nursing team are available during weekdays from 08.30 am until 12.00 noon and 2.00 until 6.00 pm.

When asked about the rate at which patients did not attend appointments the Practice said they did not see this as an issue at the current time.

How long are the waiting times in the Practice before being seen?

36 of the 40 patients told us that waiting times to see a clinician was in the region of 10 - 20 minutes which they said was more likely to happen during morning surgery than with the afternoon appointments, however, the vast majority felt that this was a reasonable wait and were understanding of any time delays. The other 4 patients said that waiting times could be up to 50 minutes on occasion and when patients are unwell, are carers or have other commitments, this can be a real problem.

There were a significant number of patients which felt that delays could be interpreted as increased patient care and there appeared to be a general awareness and appreciation for the needs of others as well as their own.

Contacting the Practice

Most patients said the same when it came to contacting the Practice, particularly by phone. They told us that between 08.30 and 09.30 am the phone lines were very busy and there was often a wait to get through to the Practice to make an appointment, however, calls to the Practice later in the day were not problematic at all. One patient said that using the online services meant that booking appointments was much more convenient.

The Practice Contacting the Patient

Patients who had required or requested a call back from the Practice said generally that the call back received was given in good time and provided the support they needed, but the response times for patient experience varied from a 10 - 30 minutes wait to a few hours for a call back. Patients who waited over an hour for a call back generally felt that was too long and one patient felt that the call back was rushed and didn't give sufficient opportunity for proper discussion.

The website contains clear advice on 'call back' and provides the following guidance to patients but although it refers to patient priorities it does not give guidance on anticipated timescales:

Patients with urgent problems will be seen the same day but they may not be able to see their usual doctor or the doctor of their choice at that time.

Where patients feel a problem is urgent, reception staff will take information regarding the issue and book a telephone call back from a member of the on call team.

Call backs are prioritised by clinical need by the on-call team. Patients may be asked to attend the Practice to see a member of the on-call team (GPs and Senior Nurses trained in minor illness care).

Online Services

The Practice provides online services which allow patients to book appointments, order repeat prescriptions and view patient medical records. 50% of patients we spoke to had or were using the online services and felt they worked well; the remainder were split between those that were interested in using the online systems but didn't know how to and those that preferred face-to-face or to speak to someone directly.

All patients wanting to use online services must first register this with the Practice reception. One patient said that it was inconvenient to have separate passwords for everyone in the family and it would be easier just to have one password the whole household could access. Whilst it is appreciated that might work for that particular household and in the interest of patient confidentiality, this would not be practical.

Quality of Care

The following questions have been consolidated - where patients were happy they were generally happy across all 4 question areas; where patients were not 100% happy we have given some of the reasons provided.

- *Do you feel the doctor listens to you regarding your symptoms?*
- *How much does the doctor involve you in decisions about your care? Do they explain the options and choices available to you (as appropriate)?*
- *Do you feel able to ask questions?*
- *Do you think there is enough time with your GP when you go to see them?*

36 out of the 40 patients spoken to said they felt that the doctor/nurse was understanding, caring and gave enough time and attention to what the patient had to tell them related to symptoms etc. Patients told us that where patient choice was appropriate, they were given sufficient information and guidance about the choices available. Patients felt that they were able to ask questions and that patients generally felt there was enough consultation time. Conversely, 4 of the patients spoken to said it was easier to talk to some doctors than others and this altered the patient experiences. They also felt that some of the doctors did not always listen effectively and on occasion patients felt rushed, particularly if surgery was running late.

Patient Experiences of Services other than the GP

The Practice provides a range of specific services and clinics to support patients such as coronary heart disease, diabetes and hypertension. Vaccinations and minor surgery is also available at the Practice to name only some.

Only 50% of the patients spoken to used one or more of the clinics, however of those spoken to, 100% felt they were of a good standard and their patient experience was good.

Patient Satisfaction

Do you feel that the Practice offers the services you need in terms of cleanliness, parking, and accessibility?

Overwhelmingly here patients made reference to the challenges they experienced when they needed to use a car to attend an appointment saying parking was difficult at most times of the day but particularly during the GP consulting hours and on Saturdays. One reference was made to the background music in the Practice and whether it was required, but other than the core theme related to the transport, patients were very happy with the environment of the Practice.

Complaints

Have you ever had a concern about your GP Health Centre and made a complaint? If so, were you happy with the way your GP Health Centre dealt with your complaint?

Have you ever wanted to make a complaint about your GP Health Centre but haven't?

Only 2 of the patients spoken to had complained or felt the need to complain to the Practice. Both complainants said that they felt they had been communicated with and their complaint dealt with effectively.

Complaints processes and procedures are available from reception, but patients are encouraged to raise issues directly with the staff.

Does your Practice have a patient participation group or are you aware of one?

The Practice has an active patient group (Friends of Sheepmarket) set up in 1989. The organisation does not carry out all the functions of a PPG, however, due to the contractual requirements and the suggestion from the members spoken to, this may change in the near future.

The group aims to act as a liaison between doctors, staff, patients and other health related organisations, to encourage self-help, to promote patient's needs and interests and to support the Practice.

The group has 15 members currently with the intention of recruiting further. Following discussion with the Chair we learnt that Committee members were encouraged to suggest relevant 'speakers' and the meetings have had many interesting presentations. This has broadened the knowledge of the Committee and has at times lead to the Surgery staff also gaining some knowledge.

Meetings are quarterly and has a fundraising role which this year will be conducted during the Saturday Flu Clinic Sessions (October 3rd, 10th and 17th).

At The Friends of Sheepmarket meetings there is always the Practice Manager (or Deputy) and usually a Partner present. The Practice provide and update on Practice issues for members and opportunity is given for open dialogue.

The Chair said the committee felt supported by the Practice and felt that both parties were open to discussing and developing new ideas.

However, of the 40 patients spoken to only 6 were aware of a patient group within the Practice. This is not uncommon amongst Practices but it does provide an opportunity for the group to look at how future recruitment can be extended to the wider patient population. In addition it was noted that the group in its current form did not meet the tasks and functions specified by the Practice or the expected remit of a PPG and here again, the group seemed open to the future possibility of change. Extending the remit of the group to liaise between doctors, staff, patients and other health related organisations and to encourage self-help and promote patient's needs and interests will all increase the visibility of the group.

General Comments made by Patients

Comments made by patients were varied but included a few issues that appeared a number of times, these include:

- Patients felt staff were caring and welcoming.
- Many patients felt they were lucky to have such a good Practice.
- Some patients commented that recently reception had been asking for details about the patients' ailments before a call back is made, patients didn't understand or like this change of Practice.
- No major themes or trends were highlighted other than:
 - Problematic car parking.
 - Difficulty phoning into the Practice first thing in the morning.

- Lack of awareness or understanding of the 'Friends of Sheepmarket' Group.

Patients Recommending the Practice

All of the patients responding said they would recommend the Practice and that they were happy with the level of care and service. This overwhelming recommendation of the Practice demonstrates a satisfaction between the patients and Practice.

General Overview of Observations and Conclusion Under this Section

Overwhelmingly the patients at the Practice had high levels of praise for the staff and doctors. They felt listened to and involved in their treatment and care and that generally they could get to see a doctor when then needed one.

However, there were areas for Practice development cited by the patients and we would ask the Practice to consider and respond to the following:

- Increased and supported development of the PPG to become better integrated in patient experience and education and to enable it to carry out the full function of a PPG.
- Consider the parking and inform patients that this has been considered and what action, if any, can be taken and if not, why not.
- Patient education is an area which can be develop. Some patients spoken to didn't know they could pre-book Saturday or late night appointments, some patients didn't know why patients were being asked to provide details of their ailments when they phoned the Practice and some patients didn't understand why they had been referred to a nurse or nurse practitioner instead of seeing a doctor. For patients, unless they are frequent users of the service or unless they read the website, may miss the opportunities to understand the reasons how the Practice operates. Increased patient education here would change the patient experience for the better (potentially a role for the Patient Group).

A Discussion with the Practice Staff

As part of this visit we took the opportunity to talk with the Practice Manager of The Sheepmarket Surgery who, at the time of the visit, had been in post for around one year. This was a good opportunity to explore some of the challenges and best Practices specifically relevant to this service provider and it also provides a balanced approach to the piece of work.

The Sheepmarket Practice at the time of visit served around 14000 patients. The Practice currently employs 7 Partners and 2 GPs part-time equal to 9 full-time members of staff.

The Practice told us that recruitment can take a long time as most clinicians have to serve 6 month notice on contracts. The Practice expects to be doubled up on nurses by December 2015 and the Practice will have a full quota of staff. The Practice do not currently have use of locums but have one contact if necessary.

The Practice works routinely with others as multi-disciplinary teams (MDTs) which includes monthly meetings with palliative care and both district nurses and midwives attending the surgery weekly.

One of the main challenges for the Practice is around the shortage of community-based staff, nevertheless, the Practice does have good relationships with the voluntary sector such as Evergreen which support patient care within the community.

Lincolnshire is currently undergoing a review of its health and care delivery and The Sheepmarket Surgery had taken the lead in the early adopter site of Stamford. However, due to a lack of community staff to deliver the care and no administrative coordinator to provide support, they subsequently withdrew from the process as it was felt it didn't provide any benefit to the patient population at this time. More recently (or since this report) a coordinator has been appointed and the team is being rebuilt and The Sheepmarket Surgery will support this new way of working in line with their patient needs

Nominated GPs visit care homes and patient home visits can be arranged when required. In the event of a homeless patient or traveller needing to use the Practice the 'temporary resident registration' would be used to ensure effective care is provided.

The Practice felt the reception team were well trained and capable of dealing with patients complaints, most of which are dealt with there and then. However, if a complaint becomes formal the procedure is put in place and there is a 3 day turn around with a target resolution time of 10 days.

The Practice has a dispensing pharmacy and this is one of the areas most valued by the patients we spoke to. From a Practice point of view they felt it worked well with no issues or problems.

We asked the Practice how they worked with the hospital they most frequently used and we were told that most of the referrals for care are with Peterborough City hospital. We were told that electronic discharge has made great improvements in terms of quality information and communication, however, it was still recognised there are still some significant improvements that can be made.

General Overview of Observations and Conclusion Under this Section

The main overarching theme which emanated from the conversations with staff was one where the Practice team were highly valued and time and commitment in place to support personal development but also to enhance the care and experience of the patients.

We acknowledge and accept that there are areas which are outside the Practice's remit and control and as such the report will be signposted to other organisations to raise the profile of the challenges being faced in general Practice, these areas will specifically cover:

- It is concerning that for this Practice at least, the Neighbourhood Team did not appear to provide a tangible benefit, what impact will that have on patients in the future and how will this impact on the Lincolnshire Health and Care programme?
- Lack of community-based health and care staff appeared to be an issue. The question related to the availability of community staff and whether the

current level of staffing provided meeting the needs of patients. This will be followed up with the wider health and care community as a result of this report.

Premises and Site Observations

This section covers issues such as the internal and external aesthetics of a provider including confidentiality, access, cleanliness and information.

Contrary to what the patients had told us, the visiting team at the time of the visit saw no problems with parking and noted there was good wheelchair access from the main car park to the surgery.

It was highlighted by patients who clearly used Stamford Hospital parking facilities that if the hospital were to start charging this would have a dramatic impact on people's access to parking. It was noted that the car parking provided for 4 disabled spaces, however, no blue badge holders were seen to use the spaces and at one point 3 out of the 4 spaces were occupied by non-blue badge holders.

Receptionists were seen to be friendly and helpful towards their patients.

It was felt patient confidentiality for callers was good as the calls were taken behind desks and out of waiting room ear shot. There is no queuing system in place at the reception desk and as patients began to queue they were being asked by reception staff to move back. Perhaps signage to create a queue system would enhance patient confidentiality.

It was noted that the self-check-in notice said 'Self Service Point'. It was felt that not every patient would understand it was a self-check-in. It was also noted the hand gel was placed on the wall but not near enough to the screen to advise patients to use it.

The surgery has 2 large waiting areas with a separate smaller one for pharmacy users. The chairs in the waiting room appeared comfortable some of which had arms, however, there was only one high level chair and one low level chair noticed. No bariatric chairs were available.

Disabled access and general signage all appeared to have been provided satisfactorily. All facilities appeared working and clean at the time of the visit.

It was particularly noted that the patient information board was an excellent example of communicating this way with clear explanation of staff member roles.

5. Final Recommendations.

In our view the following core observations and recommendations need to be considered by the commissioners and providers of care but we recognise that not all the points raised below are in the gift of the Practice and therefore the report will be shared with others.

In addition to the points below Healthwatch Lincolnshire would like to state that it found that Patient Experience feedback and what was observed during the visit to be consistent and that the Practice should commend itself for level of service provided to its patients.

- Increased and supported development of the PPG to become better integrated in patient experience and education.
- Consider the parking and inform patients that this has been considered and what action, if any, can be taken and if not, why not.
- Patient education is an area which can be developed. Some patients spoken to didn't know they could pre-book Saturday or late night appointments, some patients didn't know why patients were being asked to provide details of their ailments when they phoned the Practice and some patients didn't understand why they had been referred to a nurse or nurse practitioner instead of seeing a doctor. Patients may miss the opportunities to understand the reasons for how the Practice operates and this would change the patient experience for the better.
- It was noted that the self-check-in notice said "Self Service Point" and it was felt that not every patient would understand it was a self-check-in. Perhaps this can be more clearly signed.
- The hand gel was placed on the wall but not near enough to the check in screen and no sign advising patients to use the gel. Could the screen be positioned nearer the gel?

External Points Raised:

- The concerns that the Neighbourhood Team for this Practice, at least, did not appear to provide any tangible benefit. What impact will that have on patients in the future and how will this impact on the Lincolnshire Health and Care programme?
- Lack of community-based health and care staff appeared to be an issue. The question related to the availability of community staff and whether the current level of staffing provided meets the needs of patients and the health and care infrastructure is one which will be followed as a result of this report.

Useful Information: Other Key Roles within General Practice

Apart from the GPs at your Practice there also a number of other key staff roles. The following helps to explain some of them:

Practice Manager

The role and responsibilities of a Practice manager are varied and are different from Practice to Practice. Generally, Practice managers are involved in managing all of the business aspects of the Practice such as making sure that the right systems are in place to provide a high quality of patient care, human resources, finance, patient safety, premises and equipment and information technology. They support GPs and other medical professionals with delivering patient services and also help to develop extended services to enhance patient care. Practice managers also enable the promotion of good Practice across the local health community and some work across a group of Practices. Often receptionists will refer to the Practice manager or other senior administrative staff if they cannot help you with your enquiry or if you are upset about something and want to raise a concern. The Practice manager is usually the first port of call for receiving written complaints.

Practice Nurses and Nurse Practitioner

Practice nurses are qualified and registered nurses. They can help with health issues such as family planning, healthy living advice, blood pressure checks and dressings. Practice nurses usually run clinics for long-term health conditions such as asthma or diabetes. Nurses can have additional skills and train as nurse practitioners. Some nurses can prescribe medication and are called nurse independent or supplementary practitioners. Other nurses may run minor ailment clinics and most Practice nurses carry out cervical smears.

Healthcare Assistants

Healthcare assistants support Practice nurses with their daily work and carry out tasks such as phlebotomy (drawing blood), blood pressure measurement and new patient checks. They may act as a chaperone when a patient or doctor requests one.

Receptionists

Receptionists provide an important link for patients with the Practice and are your initial contact point for general enquiries. They can provide basic information on services and results and direct you to the right person depending on your health issue or query. Receptionists make most of the patient appointments with the GPs and nurses. They also perform other important tasks such as issuing repeat prescriptions and dealing with prescription enquiries, dealing with financial claims, dealing with patient records and carrying out searches and Practice audits.

Health Visitor

A health visitor is a registered nurse who has received training particularly related to babies, children and pregnant women. Their role is to provide families with children under five years old with support and advice around the general aspects of mental, physical and social wellbeing.

Locum or sessional doctors

A locum or sessional doctor is a fully qualified GP who works at the Practice on a temporary basis to cover the regular doctors when they are away from the Practice, for example on holiday or on maternity leave.

GP Registrar or GP trainee

A GP Registrar or GP trainee is a qualified doctor who is training to become a GP through a period of working and training in a Practice. They will usually have spent at least two years working in a hospital before you see them in a Practice and are closely supervised by a senior GP or trainer.

Following the report being finalised:

- Healthwatch will publish the report on its website and submit to Healthwatch England in the public interest.

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