



Minet Green Health Practice

Enter and View Visit

healthwatch
Lambeth

Contents

Visit Information 2

About Healthwatch Lambeth 3

What is Enter and View? 3

Acknowledgements 3

Methodology 4

Findings 9

Conclusion 25

Recommendations 26

Provider Response 28

Visit Information

Location

Minet Green Health Practice
1st Floor, Akerman Health Centre
60 Patmos Rd
London SW9 6AF

Surgery Contact

Joe Qiu, Practice Operations Manager

Date and Time of Visit

10:30am–1:30pm, Wednesday 15th January 2025

Healthwatch Lambeth Authorised Representatives

Vanita Bhavnani, Research and Engagement Manager

Eulalia Gonzalez, Project Coordinator

Anna D'Agostino, Engagement Officer

Caroline O'Neill, Engagement Officer

Ruth Moore, Healthwatch Lambeth Volunteer/NHS Graduate Management Trainee



About Healthwatch Lambeth

We are the independent champion for people who use health and social care in Lambeth. We are here to make sure people running services and those who have the power to change services listen to local feedback, put people at the centre of care, and improve services so that they better meet people's needs, now and into the future.

What is Enter and View?

Our Enter and View programme involves visiting publicly funded health and social care services in Lambeth, such as GP surgeries, hospitals, pharmacies, or care homes, to see what is going on and talk to service users, their relatives, and carers, as well as staff.

Every local Healthwatch has the legal power to carry out Enter and View visits. Enter and View visits are not inspections. We focus on what it is like for people receiving care, what works well and what can be improved to make people's experiences better. We provide extra eyes and ears, especially for the most isolated and vulnerable. We do this by observing the quality of the service and by talking to service users, their relatives, and carers, as well as staff.

These visits provide a snapshot rather than a full assessment of care over time. The visits provide insight and recommendations, from a patient or service user perspective, for improvement, which service providers and commissioners should consider and respond to constructively, as part of their commitment to quality improvement and patient-centred care.

Acknowledgements

Healthwatch Lambeth would like to thank the patients and staff of Minet Green Health Practice for their contribution to the Enter and View visit.

Methodology

Healthwatch Lambeth Enter and View Representatives made an announced visit to Minet Green Health Practice on Wednesday, 15th January 2025. We heard feedback from 9 patients and 6 staff members.

Preparation for the Visit

Ahead of the visit, we met with the Minet Green Practice Operations Manager to obtain background information about the practice. We also reviewed the practice website to understand the hours of operation and services available to patients.

Data Collection

Observation

A portion of the visit on the day was observational, involving the authorised representatives walking around the public/communal areas and observing the surroundings and using their senses. This included a checklist to assess whether the environment was inclusive of and accessible to all residents using guiding principles from the Patient Led Assessment of the Care Environment (PLACE) Assessment.¹

These principles relate to assessing whether the environment was inclusive of and accessible to all residents, including people with learning disabilities, memory loss, as well as varied visual and spatial abilities.

In-person discussions with patients and staff

Feedback from patients and staff was obtained through face-to-face conversations on the day of the visit.

Participation

Informal interviews were conducted in the practice waiting area with patients and in a clinical treatment room with staff. Healthwatch Lambeth representatives spoke with 6 staff members and 9 patients during the Enter & View visit, including 2 patients who are also carers.

Many of the patients interviewed have been registered with the practice for a considerable amount of time, with approximately half registered at the practice for over 10 years. Two others have been with the practice for less than a year, and one for 6-10 years.

English is not a first language for most of the patients we spoke to, as well as half of the staff we spoke to. Patients reported their first languages to be Vietnamese,

¹ <https://digital.nhs.uk/data-and-information/areas-of-interest/estates-and-facilities/patient-led-assessments-of-the-care-environment-place>

Yoruba (Nigeria), Portuguese, Dari, Spanish (x2) and Bangladeshi. Staff reported their first languages as Tamil, Gujarati, and French.

The six staff members interviewed were in both clinical and non-clinical roles, and most had worked in the practice for over 2 years. The longest-standing staff member we spoke with had been working at Minet Green for 8 years, whilst the newest staff member had been in their role for less than a year.

Profile of participants

We collected demographic profile information from all those who provided feedback (see Table 1), summarised below.

- Most participants who provided feedback were women (both patients and staff).
- Most patients indicated that English is not their first language (7).
- There was an almost equal split between male (3) and female (2) staff included in the interviews, and they were predominantly aged within the 30-49 bracket.
- The age range of patients we spoke to was predominantly 25-64.

Strengths and Limitations

The insight discussed in this report was provided by a small portion of patients, and therefore, we cannot assume that the feedback is reflective of all patients registered at Minet Green Health Practice. Rather, it provides a snapshot in time and the lived experience of those patients who did provide comments.

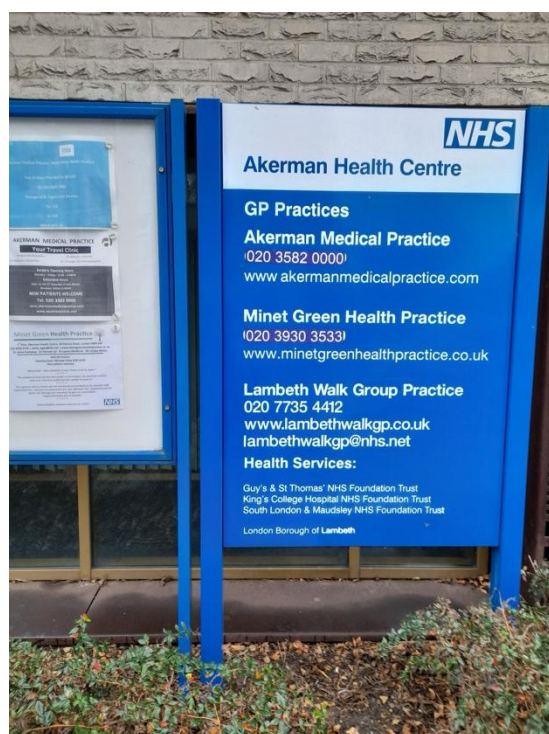


Table 1: Profile of participants

Characteristics	Patients (n=9)	Staff (n=6)
Age		
18-24	-	-
25-49	3	4
50-64	3	1
65-79	1	-
80 +	-	-
Gender		
Man	1	3
Woman	7	3
Ethnic Group		
Asian/Asian British: Bangladeshi	2	
Asian/Asian British: Chinese	-	1
Asian/Asian British: Indian	-	2
Asian/Asian British: Other	1	-
Black/Black British African	1	-
Black/Black British Caribbean	-	2
Latin American	2	-
Sexual orientation		
Gay	-	1
Heterosexual/Straight	5	4
Prefer not to say	-	1
Other characteristics		
English as a first language	2	3
Disability	-	-
Long-term condition	2	3
Carer	-	-

NB: Data presented is based on those who answered profile questions and not the whole sample. Some participants answered all questions, whilst others preferred not to respond to some of the questions.

Practice Overview

The Minet Green staff team were very friendly and welcomed Healthwatch Lambeth Enter and View authorised representatives on the day of the visit.

Location and public access

Minet Green Health Practice is located on the first floor of the purpose-built Akerman Health Centre, located between Camberwell and Brixton. The core practice opening hours are 8.00–18.30 Monday–Friday, and enhanced access is offered 7.30–9.30 and 18.30–19.30 on Tuesdays, and 8.30–13.00 on Saturdays for pre-booked appointments only.

The practice is located on a quiet road approximately 10–15 minutes' walk from Oval Station. A bus stop is located outside the practice with one bus, the P5, that connects Nine Elms to Elephant and Castle. There is also a bike rack for people who cycle.

There is no on-site car park; however, there is some on-street parking with a time restriction of 30 minutes and no return within an hour. Blue Badge parking was not obvious, but staff members said there is some available. It may be helpful to have information about parking available on the practice website or signage outside the building.

There are drop-off locations directly outside the entrance to Akerman Health Centre, as well as a designated space for an Ambulance.

Patient population

There are approximately 12,000 patients registered with the Minet Green Health practice. The population is relatively young, with an average age of 38.4, including many young families and people of working age. The local population is particularly ethnically diverse, with 42.2% of the patient list identifying as Black/African/Caribbean/Black British, and 34.3% as white. A significant number of patients are members of the Windrush Generation. There is also a high proportion of patients from Hispanic/Latin American backgrounds.

The practice Operations Manager shared with Healthwatch Lambeth that the practice is amongst the 20% most deprived practice populations in England (deprivation score 39.6). Patients face significant social and economic hardship and have a significantly lower life expectancy (73.2 years for men and 75.7 years for women in 2023) than the national average. This contributes to above-average levels of chronic illness and comorbidity.

Services available

The practice is staffed by 3 GP partners, 7 salaried GPs, a practice nurse, two healthcare assistants, four pharmacists, four managers (2 business managers, operations manager, data manager, and operations lead), and 14 administrative staff.

Attached to the practice there is also a PCN Digital Transformation Lead, Drug & Alcohol Counsellor, 2 First Contact Physiotherapists, Dietician, Mental Health Practitioner, Health & Wellbeing Coach and 2 Financial Support Link Workers.

At the time of our visit, we learned that Minet Green Health Practice does not have an active Patient Participation Group (PPG).

Practice website

The practice website is clearly laid out and informative, with up-to-date information and contact details. The homepage is well-structured, providing clear navigation links to essential sections such as Appointments, Prescriptions, Services, About the Surgery, Register with the Surgery, and Contact Us. A search function enhances usability, allowing patients to quickly locate specific information.

The address of the practice is easily accessible, and there is a Google Maps link provided to get directions to the practice. The practice CQC rating (Good) is visible on the website.

Information about how to book an appointment, request a prescription, and other services, such as sick notes and vaccinations, is easily accessible and clear to find. Registering with the practice can be done via an online form—on the page, there is a tool to find if you are within the catchment area for the practice, and information about registering for a GP without proof of ID or address, including in other languages.

The website also provides clear guidance on how to make self-referrals and access out-of-hours services, as well as instructions on how to provide feedback or make complaints.

In terms of website accessibility, the practice has published an accessibility statement, including information on screen-reading capabilities and “Easy Read” format. Patients are asked to contact the practice directly for interpreter services.

There is no mention of a Patient Participation Group on the Minet Green Health Practice website; however, the practice newsletter is published on the practice website and contains information about any changes in staff, closing times and general practice information. These are kept up to date, with the most recent being published on 25th March 2025.

Findings

External Environment

Akerman Health Centre is clearly signposted from outside, with a directory listing the practices that are available inside the building. The exterior and interior of the building are very clean and well-maintained.

The entrance to the building is via automatic double doors, stairs, and two lifts, which are available to take patients to the first floor, where Minet Green Health Practice is located. The lifts are wide enough to fit one wheelchair each. The practice is accessed via a large glass door, which is easily accessible to patients with mobility issues and wheelchair users. Minet Green shares an entrance with Lambeth Walk Medical Centre, which is co-located in the same space; however, they have separate reception desks and waiting areas.

Internal Environment and Waiting Area

As you enter the practice, the reception desk is located directly opposite the door, and an electronic sign-in device is positioned next to the door. This was not obviously signposted, but returning patients knew how to use it.

A Hearing Loop is available on the side of the reception counter. A small sign indicating the availability of hearing loops was displayed at reception.

The waiting areas are very spacious with adequate seating arranged in a very tidy manner. Most of the chairs were the same height and without armrests, and a few with armrests were also available. There is adequate space for wheelchairs to navigate the space and wheelchair users to find a place to comfortably wait for their appointments.



The waiting area has a lot of amenities for patients, including a play bus, shopfront, and children's books are available to entertain younger patients and proved very popular on the day of our visit. There is also a tablet available for patients to use if they need to book an appointment online.

A Blood Pressure monitor, which also measures height, weight, and BMI, is positioned in the waiting area for patients to use. A defibrillator is available behind the reception desk.

There is a water dispenser in the waiting area, with cups kept behind reception for anyone who asks. On the day of our visit, the water dispenser was empty and therefore unavailable.

Recycling bins for general waste and mixed recycling are available, as are hand hygiene stations by the door, on the reception desk and in the hall.

There is no obvious compliments/complaints box; however, when we asked staff about this, they advised that forms are available from reception.

There was a community food shelf with cans of food available for patients.

The waiting area was generally tidy and clean, with just a little scuffing on the floor. All patients are content with the level of cleanliness; however, one referred to yellow and black sticky tape on the floor.

Signage and information

Signage indicates the Fire Exits and toilets; this is clear and easy to read from the waiting area.

Information was available in a variety of formats in the waiting area, including notice boards, TV screens and posters placed directly on wall surfaces. These covered a variety of topics, including sexual health, flu jabs, mental health, malaria prevention, RSV, missed appointments and support to help patients get online.

There was a wall with leaflet holders that had many leaflets from NHS and non-NHS services, e.g. Lambeth Larder and Sexual Health London. Some leaflets were behind the blood pressure measuring machine and were therefore hidden from the public. There were also some leaflets on a table next to the reception desk. Most leaflets were in date.



One board in the middle of the room advertised that the surgery offered an NHS app drop-in, Friday between 10:30 and 12:30. Some of the text on the board was small and not high-resolution, which may make it difficult for some patients to read.

Four large TV screens projected different messages, such as practice policies (e.g. "If more than 10 minutes have passed, notify reception") and NHS campaigns (e.g. vaccinations). One of the projections informed patients that they were in a Safe Surgery and displayed that information in several languages.

Some of the information displayed on the TV screens was in the format of A4 flyers, which meant the text was low resolution, very small and difficult to read. Some slides had a lot of

information crammed into one screen, which was hard to read. The screens also changed relatively quickly, making it difficult to read the full message.

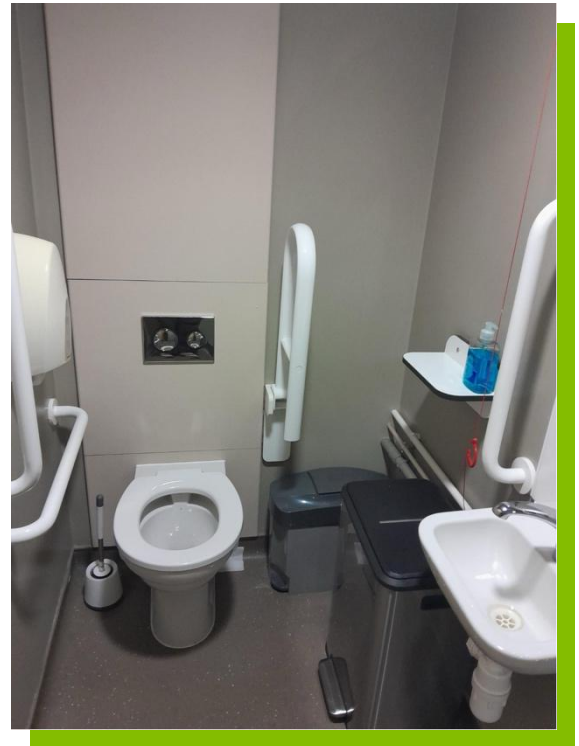
Toilets

There are two toilets located within the Minet Green practice waiting area. One of which is Accessible with a spacious cubicle and doors that were wide enough for a wheelchair to pass through. This same toilet contains a baby change table.

There is directional signage in the waiting area indicating where the toilets and baby change are located. This signage is quite high off the ground, which could make it difficult for some patients to locate and read it.

The toilet doors are labelled with the letters WC (Water Closet) along with a visual image of a Male/Female symbol or a wheelchair.

On the day of our visit, the flush in one of the toilets was not working. There are an additional 2 toilets located in the waiting area of the Lambeth Walk practice, which is located adjacent to the Minet Green practice.



Inclusive Design

Whilst Minet Green Health Practice is not a specialist dementia setting, we conducted observations in alignment with the dementia friendly sections of the Patient Led Assessments of the Care Environment (PLACE) checklist¹ as well as a range of quality indicators identified by the Alzheimer's Society². These principles relate to assessing whether the environment is inclusive of and accessible to all patients, including people with learning disabilities, memory loss, as well as varied visual and spatial abilities. This assessment was undertaken in the waiting areas.

Floors

The waiting area floors are a non-slip matte effect and not shiny, patterned, or speckled, making it suitable for patients affected by dementia. In some areas, we observed stickers on the floor relating to COVID-19, asking people to stand two meters apart. There was also a big "X" marked on the floor with tape.

Décor

The colours of the walls, furniture and floors in the waiting area contrasted. The floors were green, the walls were white, and the furniture was primarily black or brown. The doors are all wood and are distinguishable from the wall. The doors in

² [Dementia Friendly Environment Checklist.pdf](#)

the consultation area have numbers on them, and sometimes the names of the healthcare professionals.

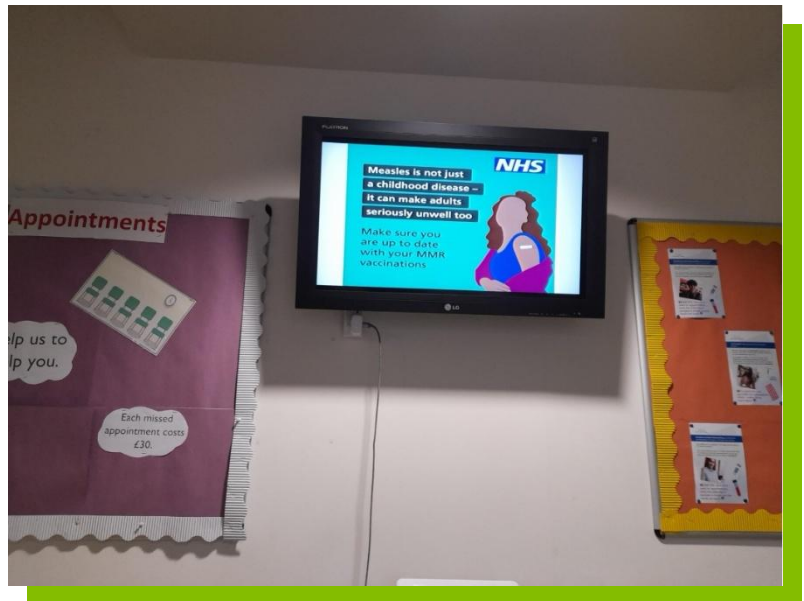
Toilet doors were wood and, as such, did contrast with the walls to make it easy for people affected by dementia to navigate. The toilets were white with a white seat in the Accessible toilet and a black seat in the male/female shared cubicle. The flush handle was silver, as were the sink taps (see photos). The sink and hand drying facilities were also white. These features were contrastable with the walls and floor, but the contrast between different elements is not clear.

A clock is visible on the wall behind the reception.

Signage

Many signs in the waiting area were placed at the recommended 4ft from the ground, which is considered eye level for most people. However, some signs were placed much higher and had a very small font, making them difficult to read for residents with dementia, as well as those in wheelchairs or with visual impairments.

Signs on the toilet doors were consistent but small and placed higher than 4ft from the ground.



Patient Interactions

Healthwatch Lambeth observed patient and staff member interactions during the visit. Staff were kind, friendly and helpful to all patients. We witnessed two separate friendly interactions with staff, including one occasion when a patient brought a gift for a staff member.

Clinicians call patients by name when it is time for their appointment. We observed this to be done in a relatively quiet tone of voice, repeated until the patient reacts. On one occasion, a patient did not hear as she was wearing headphones. The nurse walked around the room until she identified the patient and caught her attention. The health professional then takes them to the consultation room. There are no digital notifications to alert patients to their appointment time.

An electronic check-in machine is available for use, which requires patients to input their surname and appointment date to alert the practice that they have arrived. We were advised by a staff member that the system does not work if patients input their first name instead of their surname. However, patients have the option to confirm their appointment with the reception staff.

The seating area of the waiting room is located a short distance from the reception desk, which should provide sufficient space for patients to speak confidentially with reception staff and not be overheard by other patients. This

would, however, depend on the volume each is speaking, and whether another patient is also waiting to check in for an appointment.

Patient & Staff Feedback

Service Provision

The Total Triage System

In 2024, Minet Green Medical Centre adopted a “Total Triage” system that involves patients completing a form on the practice website via Accurx, which details what they need from the practice. This may be an appointment, a home visit, or any type of administrative request, such as a sick note. These requests are reviewed continuously throughout the day by 2 clinicians and 1 administrative staff member who prioritise appointments based on clinical need. Patients are usually called back within a couple of hours, or they are sent a link to book an appointment. Nurse, physiotherapy, and pharmacy appointments can be booked directly by the administrative team, either on the phone or when reviewing a patient request via the triage system.

Any patient who presents in person or calls the practice is encouraged to complete the same form or is assisted to do so by a staff member. A staff member will also complete this form for a patient who is not able to do so for themselves. The online triage system does not shut down, and any enquiries that come through after hours will be picked up the next morning.

The Total Triage system was implemented to reduce the number of administrative appointments allocated unnecessarily to GPs. This allowed the practice to increase the length of appointments with salaried GPs to 15 minutes, whilst partner GPs retain 10-minute appointments. As a result, GPs are now seeing more complex cases, and on occasion, the appointment lengths do still run over their time allocation. Additional roles, such as the social prescriber, are allocated longer appointment times to allow for sufficient time with patients.

After-hours support

Patients have access to GP appointments at Minet Green practice until 8pm each day. There is after-hours support from Seldoc Healthcare; patients who use this service often speak to a doctor by telephone and are either referred to A&E or back to their GP for follow-up when they reopen again.

Clinicians reported that many patients do not realise there is after-hours support, and many wait to call the practice on Monday morning; as a result, they do experience a rush of calls first thing on a Monday morning.

Accessibility for patients with disabilities

The Akerman Health Centre building is fully accessible with a lift, and there are no steps once you are inside the Minet Green practice. The reception desk is quite high, as such staff keep an eye out for any wheelchair users and ensure they stand up so they can see the patients to speak with them or move to the side of the desk to speak with patients when they enter the practice. Patients who are hard of hearing can text the practice to make an appointment, and a hearing loop is also

available at the reception area. Online consultations are available and well-established within the practice.

The practice does its best to identify patients with disabilities and place a note in their records so that staff are aware of any access requirements. A similar process is followed for patients with a learning disability, whereby a note is made on a patient's record to enable staff to allocate more time with those patients.

If a patient is unable to leave their home, the Health Care Assistant and GPs can do home visits if necessary.

Translation services

Patients at Minet Green practice speak many different languages. To assist these patients, the electronic check-in system is available in English, Spanish and Portuguese, and some staff members can speak Spanish.

DA Languages telephone translation is available for staff; however, there is limited use by non-clinical staff. Staff reported that it can be difficult to get hold of a translator at certain times of day or for some languages. Staff have also experienced challenges relating to the dialect of a particular language, such as a European Spanish translator provided for a South American Spanish speaker.

It is generally good, although some languages can be difficult to get."

Administrative staff reported that only clinicians can use the telephone translation service, which makes it difficult for reception staff to communicate with patients who do not speak English. Staff shared that they have learned a few key words in Spanish that are helpful for their work, and they use Google Translate to translate text messages before they are sent to patients.

"We personally don't use the language line, only the clinicians do...And I think the hardest thing for me was trying to explain the triaging system to them, because they come and ask for an appointment, and having to explain to them is quite difficult."

Several patients we spoke to have needed translation support for their appointments either in the past or currently. One patient shared an experience they had with a rude translator.

"I have been offered a telephone interpreter. Sometimes they work well, but other times they don't. Some interpreters have also been very rude. Once, an interpreter yelled at me over the phone. I was answering the doctor's questions when she yelled: "MAAM. ONLY ANSWER THE QUESTIONS YOU ARE ASKED." Even the doctor was startled and could tell that she was being rude to me."

Patients also reported that they relied on family members for translation before using the telephone service, and that they do not like to call the practice themselves, as they cannot communicate with the reception staff. Most of the

patients who need a translator mentioned that they have been offered that service from the practice.

“They always offer us an interpreter, but I prefer not to use one.”

“I have used when my wife is not available, but mostly, I try to manage myself.”

Support for patients with additional needs

Patients who are identified as needing more support, are vulnerable, or for whom there is a safeguarding concern are assigned a lead GP and a named care coordinator to be their point of contact in the practice. This is recorded on their file and is flagged when the practice receives calls from that patient so that staff know who their named contact is. These patients are also reviewed at regular clinical team meetings.

One of the GPs in the practice has set aside time every week to meet with patients who contact the practice frequently for appointments, ensuring they have continuity of care.

Patients who have frequent or ongoing appointments are also allocated to one GP to ensure they have continuity of care.

“This is done across the whole practice. They tend to be assigned a care coordinator. There is a lot of admin for care coordinators, and then sometimes they are passed along to social prescribers to check the patient is doing what they have said they would do, e.g. housing.”

Elderly patients are supported through Personalised Care Plans, and the practice tries to ensure they see the same GP and conduct dementia reviews where needed.

“Our practice is in the top 5% nationally for deprivation, and there is a lot of SMI and undiagnosed learning difficulty within the population. We spend more time with more challenging patients.”

Appointment management

Total Triage system

The response to the Total Triage system has been generally positive from both staff and patients. Staff are very supportive of this new system as it means clinical staff do not see patients who need administrative support or referrals, and therefore, they have more time to spend on complex cases.

Administrative staff also reported that the new system is working very well; they reported they are taking fewer calls than they used to, as patients are now aware they can complete the form online. They also appreciate the direct contact

between patient and doctor, which means there is less scope for confrontation between patients and administrative staff. One challenge reported to us was that when staff are entering information into the triage system on behalf of patients, they have encountered some patients who do not like all of the questions that are being asked, as they think the staff member taking the call is deciding when they can get an appointment.

“It’s allowed us to also see a lot more patients face to face, which was another reason that we wanted to do.”

“I think it’s been transformative...”

Most of the patients we spoke with on the day of the visit reported making their appointments via telephone; only one mentioned that they googled the practice website to find the details and booked that way.

The few patients who prefer to book appointments online told us that it is easy to make appointments, and they have often received appointments on the same day.

For other patients, particularly those with limited English proficiency, digital systems can create barriers. Patients shared with us that they depend on family members—often children—to act as intermediaries, either by booking appointments online or phoning the practice.

“My daughter makes appointments for me and gets medication. I don’t understand how to book online, so she helps me. One day, I came to the surgery wanting to book an appointment in person, but the receptionist told me to do it online. I don’t know how to do it, so have to ask my daughter. I would like to call to make an appointment because my daughter is not always free to do it for me.”

“Sometimes I avoid coming into the surgery because I don’t understand the language. I’ve lived in the UK for many years, but I never worked, so I didn’t meet many English speakers, and I’ve never really learned the language. My son usually makes appointments for me, as I don’t feel confident making them myself. If he can’t make an appointment for me, sometimes I don’t come get something checked out.”

“It was difficult as they didn’t give me [an appointment] straight away. I have to phone because I can’t use online. On the phone, they sometimes say, I can’t book you an appointment, you have to book online. I can’t do that. I don’t have English as my first language.”

Shift to remote care

Minet Green Health Practice offers telephone appointments for patients; some patients reported this was a challenge for them as they expressed a preference for face to face-to-face appointments.

"I've been here for years, but after the pandemic, everything changed. Now, all appointments are online. It's not the same thing if a doctor sees you in person, face-to-face, than if they see you by video call. They can't feel if you have something in your body or check if you're well. Instead, you have to explain to them what you think you have. That's what's really disappointed me."

"I have been offered phone appointments, but I want face-to-face appointments."

A patient shared with us a challenging time they had when booking their appointment on the day of our visit. They called the practice in the morning to request an appointment and received a call back a while later with an appointment within 45 minutes. While rushing to the practice, they received a text stating that the appointment was half an hour later than they were told on the phone. When they arrived, they were told that the original time they were given was correct. The mixed messages were very stressful for them.

Same day/emergency/urgent appointments

Most of the patients we spoke with had made emergency appointments in the past and had been seen on the same day. However, one patient had an experience of needing an urgent appointment and being given an appointment 8 days later.

"There's no emergency appointments. I've been given emergency appointments before, but not every time."

Quality of Care

All patients we spoke with were very happy with the care and treatment they received; they feel it meets their needs, and the doctors care for them very well.

"Yes. Everyone is kind, very good to me. No one puts me down. The doctor's treatment is great."

"100%. It's an excellent service. We're held back by the language, but the treatment is always very good."

"Yes, once inside, every doctor is treating me well and is friendly, but some doctors allow you to say only one problem, and others say it's ok, you can tell me others."

“Yes, the doctor talks and listens to me. I know my body, so if I say that a medication is not good for me, he gives me a different one.”

Only one patient we spoke with reflected that they would like to be better listened to by their GP.

“No, I would like to be listened more, give my opinion about my care and the prescription I am given.”

Patients were happy with the length of time they spent with their GP, referencing both the 10-minute and 15-minute appointments that are available. A few patients mentioned there are restrictions on discussing multiple health concerns in a single appointment.

“During an appointment, I complained about pain, and the doctor immediately told me to book another appointment to discuss it. I was scared, but the appointment was booked quickly.”

“Yes, it's fine, but sometimes you can't tell more than one problem, and you have to make another appointment. Today was ok.”

Most patients saw the first available GP rather than their preferred doctor. Specific GPs were mentioned by name (e.g. Dr Davies and Dr Ibison), with patients reporting they sometimes chose to wait longer to have appointments with those doctors.

“No, there is no choice, but I would like to have an appointment with the GP I like. I like Dr Ibison but not seen him in 2 years.”

One patient did report that when you book online, you have the option of choosing the doctor you want.

Overwhelmingly, patients were happy with their experience. Only one patient we spoke to said they are disappointed with the service and would not recommend this surgery to others.

“Yes. Everything is going well; I don't have any complaints. I'm happy, happy, happy! Any time I'm called in, I'll come in.”

Communication with the practice

Overall, patients reported that it is easy to communicate with the practice and gave practical examples of how the practice staff assisted them and helped them to understand information better.

"It's good because if I can't understand, I ask receptionist and doctors to speak slowly, and they do."

"It's good. For example, they explained how to use the medication and how to do the exercises when I had back pain."

Conversely, a few patients felt that on occasion, the administration staff are not easy to communicate with and can sometimes be rude.

"Receptionists here snap, growl at you and speak to you rudely, even though I understand some patients can be difficult."

"The GPs are ok, but sometimes the staff are really rude, and they need to change. They need to be calm and kind, but sometimes they are not helpful."

Digital services

As in all GP practices, Minet Green practice is increasingly using its practice website and apps to communicate with patients. Staff shared that the practice has a lot of patients who either have no access to technology or do not wish to use it. There is a tablet in the waiting area of the practice which can be used by patients and staff can use it to show patients how to use the practice website and explain how to complete the appointment request form.

If a patient presents at the practice because they can't book online or speak over the phone, the staff will input the information for them and speak to the triage doctor to let them know a patient is currently in the waiting area so they can respond to their request immediately. For most, the new Total Triage system is very positive. Staff shared that a small subset is now experiencing difficulties, and there is more scope for patients to fall between the gaps, whilst others have told staff that it is removing their chance to interact with the world.

Some of the changes to systems that have been implemented include encouraging asthmatic patients to request their prescriptions online, hosting Friday tech sessions to support patients who need help and a new pilot for automating the upload of normal blood test results to the NHS App. This trial involves patient blood test results being uploaded to the NHS App without any notification being sent to the patient if their blood results are normal. This removes the need for clinicians to have an appointment with patients to give them the results.

In addition, patients can request an appointment via Accurx, on the NHS website, the NHS app or via telephone and can order repeat prescriptions via Accurx, on the NHS website, the NHS app, or by asking their nominated pharmacy to request on their behalf.

Staff identified challenges with the Total Triage system in that patients are asked to distinguish if they have an administrative or clinical question so they can be triaged correctly; however, many patients struggle to distinguish between these

two, as quite often administrative requests also require a clinician (e.g. requesting a sick note).

Only one patient we spoke to has used the practice app; they did so with support from their children, as they reported they are not very good at using their phone. Others rely on family members to book their appointments and find it difficult to use the practice website or app, as English is not their first language. Another patient told us that they have never used the website or app, but there is no reason for that, as they are capable.

"I use the machine when I arrived, but I see some older people struggle with the machine. I don't use the website or app, I find it hard, and I don't have English as my first language."

What works well at this practice

Patients offered positive feedback about what works well at the practice, with specific mention given to the swift appointment system. Whilst some felt they could not comment as they have only been registered at the practice for a few months, others had no complaints and are happy with the care they receive. One patient mentioned that the clinical staff are "ok," but not all the other staff are the same.

"It's not too bad, the doctors are ok, but not all the other staff."

Staff reported a very strong and positive culture within the practice, which is led by the partners. The clinical staff and non-clinical staff have a good relationship and work well together as a team. Staff feel motivated to provide a good quality of service for patients as they support their needs. There is a strong desire for improvement and an openness to hearing feedback to improve the quality of service. Staff encourage patients to leave Google Reviews so they can learn from and improve their service delivery.

The culture is developed by creating an environment of teamwork, which trickles from the top of the practice. There are regular meetings and opportunities to share information and ask for help. Administrative staff and clinical staff work together as a team to triage patients, which has helped foster a strong working relationship between all staff. Recruitment of the right people was also attributed to the strength of the culture that exists within the practice.

"I think the culture and the atmosphere is, is really good. I think the partners set a really good tone."

The diversity of staff backgrounds was also mentioned as an opportunity to diversify perspectives and learn from each other. Staff reported that there was a level of authenticity to the workplace, where they felt comfortable being themselves.

“A real mix, a real – lots of different backgrounds, lots of different ways of doing things. I can't think of two people who are the same. I think that's fantastic.”

The practice is also very proud of the community food shelf, which was established by the practice's Social Prescriber. They identified that when they request food bank vouchers for patients, they do not receive any support for the first week. To fill this gap, the practice collects non-perishable food items from staff, patients, and local supermarkets; all patients are welcome to take items from the food shelf. To encourage more contributions, patients are sent a text message on the day of their appointment to request donations.

Improving the Patient Experience

Information and digital support

Dedication to improving the Patient Experience was evident from our observations and conversations on the day of the Enter & View visit. Notice boards are up around the practice with information for patients and to encourage and support them to use the NHS App. Sessions are offered to help people use the app, such as the Friday tech session run in the practice.

As part of the childhood immunisation strategy, a play bus has been purchased for the waiting area, to encourage children to be less afraid when coming to the GP and associate it more with playing than needles, in the hope it encourages them to come back again.

Total Triage system

The new triage system has improved patient experience by reducing waiting time on the telephone. The practice is trying to implement more efficient processes that improve the patient experience when interacting with the practice, such as the increased appointment times of 15 minutes.

Opportunities for feedback

There are many feedback mechanisms in place to improve patient experience within Minet Green practice, such as the Friends and Family survey and complaints forms available at the front desk, and a dedicated email for patients to send feedback/complaints is available. Patients are also able to give feedback by text message, leaving a Google review or by speaking with staff at reception. The GP patient survey is also available but tends not to have questions that are specific enough to action change.

A few patients we spoke to felt confident that they would know what to do or who to speak to if they were unhappy about an issue or wished to make a complaint. Conversely, some were more reluctant to raise concerns and either felt that these would not be addressed or that they would be viewed in a negative light by staff.

“Why would I speak to you about this when nothing ever improves? Things don't get better; if anything, they'll get worse.”

“No, I keep things for myself. I don’t want to be seen as a troublemaker. I don’t know what may happen.”

“I speak to the manager – it’s ok, but difficult sometimes with words. I have complained to the manager about the staff.”

Feedback management

All feedback received by the practice is discussed at Management Meetings, and there is a bi-annual complaints review. Complaints with serious consequences or about a structural or system issue are discussed at the monthly learning events meetings. In addition to the monthly learning meetings, the salaried GPs also meet with the Practice Manager to discuss any issues.

Staff also reported feeling very comfortable raising issues and concerns in weekly meetings and monthly Learning Event meetings; they reported feeling confident in the process of giving feedback and improvements being made.

Feedback received that is specific to an individual is raised with their manager, who then has a personal chat with that person. Staff reported that managers are very supportive of staff, they understand both sides and work out ways to prevent the same situation from occurring in the future.

Staff spoke about the importance of building a good relationship with patients to have successful communications and be able to explain themselves straightforwardly.

Suggested changes

Patients gave practical examples of changes that could better meet their needs or improve their experience. These include:

Using the screens to show when it is time for their appointment, as sometimes they miss when the Doctor calls them if they are in the washroom.

Having a permanent staff member who can speak Spanish to support them.

More in-person appointments, as they feel the practice is pushing them more towards telephone appointments.

Being listened to more by their GP.

“I wish they had a permanent staff member that spoke Spanish. Us older people have some memory problems and struggle with language; it would be really helpful to have someone there for us.”

Staff also discussed changes they would like to see implemented:

The social prescriber would like to add a book exchange.

More opportunities for clinical and admin staff to mix.

Staff experience

Minet Green practice is staffed largely by GPs and, as such, does not rely on nurse practitioners or physician associates. Staff feel that they do overall have enough staff working on individual shifts and can manage well with the current level of staffing. It was acknowledged that the need and demand for staff, especially clinical staff, changes daily. Staff also raised that whilst there are a lot of appointments available for patients, there is always a greater demand, which can be a challenge to balance at times.

Staff shared that there has been a high turnover of administrative staff members, which was attributed to the pay available for those roles not being very high. The afternoon shift (10:30am–6:00pm) was occasionally flagged as having too few staff members, particularly on days when people call out sick or on Mondays, which tend to be busy days.

Training and support

Staff reported feeling confident and well supported in their roles. Mandatory training must be completed during their induction period in modules such as ICT, Data Protection, First Aid and Connect Chaperones Training. Staff are allocated a lot of time to settle in, with clinical staff having a reduced number of clinical appointments during this time to enable them to complete the compulsory training.

All staff have an annual appraisal and one-to-one meetings with their managers, which include discussing their training needs and keeping them up to date about what training is available to them.

Staff reported that clinical and non-clinical staff work well together, have a positive attitude and create a strong team environment. Managers and administrators are very conscious of creating a positive work culture, which is adaptable to the needs of all staff members. Staff reported a good team environment between both clinical and non-clinical members, with good communication between team members. Staff reported that doors are open, and they feel comfortable approaching other team members and management when needed. They also spoke of a hierarchy which is in place when necessary but is supported by an openness that allows for all views to be valued. A few team members expressed that they would like to see more opportunities for clinical and administrative staff to mix.

Support systems are in place for all staff, such as weekly meetings, access to external networks and resources, and support from previous staff in the same role who provide a handover and transition. Front desk staff always work in pairs, so they are never by themselves if there is an issue with a patient. Managers also support by giving staff space to step away and take time for themselves if they have had a difficult interaction with a patient.

Clinical staff feel well supported to deliver person-centred care; they spoke of the trust that exists between management and staff. They feel that management trusts they are doing everything necessary for their patients and delivering the relevant treatment for patients, and do not challenge them on their decisions.

“Both as a team and as an individual, there is good support from management to deliver person-centred care...There is a trust between management and the GPs.”

Overall staff shared very positive experiences working at Minet Green Health Practice. Many raised how supported they feel in their role, as well as the opportunities for growth within their role. The Total Triage system adopted by the practice involves administrative and clinical staff working alongside each other to triage appointment requests. This has fostered a closer working relationship as they are working so closely together. There is a lot of variety in the roles which staff appreciate.

“They have been very supportive of my growth. That has been a major factor of me staying here.”

Conclusion

Healthwatch Lambeth carried out an Enter and View visit to Minet Green Health Practice, observing the environment and interviewing patients and staff. Our purpose was to understand patients' experiences at the practice, identifying both positives and areas for further improvement.

We found that the external and internal environments are accessible for all patients, and the practice supports patients with different needs in a range of ways.

The patient population is very diverse, with many requiring the use of translators to support appointments. Staff regularly offer this service to patients; however, there are challenges to booking translation for the language needed at the time needed.

The Total Triage system has increased the length of appointment times and has successfully reduced administrative burden on GPs. Patients and staff are very happy with this new system.

Most patients are very happy with the quality of care they receive from the GPs, whilst some shared negative feedback about reception/administrative staff.

Staff feel very supported in their roles at Minet Green Health Practice and spoke highly of the positive work culture and environment. The practice staff are also committed to continuous improvement and regularly discuss patient feedback and opportunities to improve the patient experience.

Based on our observations and the feedback we received from patients and staff, we have developed recommendations for Minet Green Health Practice.

Recommendations

Signage and Information

Some of the resources and leaflets available to patients in the waiting area are obscured from view by the Blood Pressure machine and are therefore not obvious to patients.

Recommendation 1: Consideration should be given to ensuring resources and flyers available to patients are clearly visible and accessible to them.

Access and mobility

Some signs were placed much higher than the recommended 4ft from the ground and were written in a very small font, making them difficult to read for residents with dementia, in wheelchairs, and with visual impairments.

Recommendation 2: Consideration should be given to ensuring that information available to patients is enlarged or, where possible, made available in large font and placed at the recommended height of 4ft above the ground. This includes information displayed on screens and monitors.

The toilet seat in the accessible toilet was white, which does not contrast with the white toilet.

Recommendation 3: Consideration should be given to ensuring that the toilet seat is a contrasting colour to the toilet bowl, in line with PLACE guidance.

After-hours support

Clinicians shared that many patients do not realise that after-hours support is available.

Recommendation 4: Consideration should be given to promoting the after-hours support through various channels such as phone message, practice website, and flyers in the waiting area.

Communication with the practice

Whilst most patients were positive about clinical staff, some shared experiences of rude communication from administrative staff.

Recommendation 5: Consideration should be given to ensuring that staff are trained effectively on core skills such as communication and listening to ensure interactions between patients and staff are positive and consistent.

Online/digital/technology

Patients who do not have English as their first language find it difficult to use online tools such as the practice website or the NHS App to book appointments or follow up information.

Recommendation 6: Minet Green Health Practice should continue to offer support to patients who are not able to make use of digital and online tools. This can cover a variety of reasons, such as not being able to speak or read English, not having access to devices or not feeling confident to use these tools.

Improving the patient experience

Patients seemed unsure about the processes for raising concerns or providing feedback about the practice.

Recommendation 7: Minet Green Health Centre could display clear information on notice boards for patients about how to raise issues and concerns about the practice staff, as well as the quality of care they receive. This could include signposting patients to the feedback forms held behind the reception desk.

Suggested changes

Patients and staff made a number of suggestions for changes that could improve their experience of Minet Green Health Practice.

Recommendation 8: Healthwatch Lambeth encourages Minet Green Health practice to consider these recommendations and implement change where possible.

Provider Response

"It is evident a great deal of care has gone into this project, and we are grateful to the Healthwatch team and volunteers for their time and energy. Thank you very much for this detailed and thoughtful report. We were pleased to hear that the feedback from yourselves and our patients was largely positive and are also glad to be made aware of some areas where the patient experience at the practice could be improved.

Actions that will be undertaken as a result of the report's findings and recommendations:

- Follow up very overdue floor replacement with building management*
- Review of displays and signage in waiting area.*
- Consider lowering all signage to 4m above the floor*
- Obtain higher resolution and larger font size materials for display boards and screens*
- Slow down slide changing rate of display screens*
- Ensure leaflets are not inserted into the displays which are obscured by the blood pressure machine*
- Work with patient facing staff on communication regarding online forms – our systems are set up specifically with the intention to allow easier access via phones/front desk for patients unable or unwilling to contact us online.*
- Remind non-clinical staff that interpreting services are available to all staff. Roll out new Spanish flashcards developed as one of our colleagues as part of an apprenticeship.*
- Increase awareness of feedback and complaints forms – add to displays in waiting area*
- Passed feedback regarding the colour of the toilet seat onto building management. The current white seat was installed as a replacement for a broken item. The previous seat, and the other seats in the practice, all contrast with the bowl.*
- Look at most effective ways to inform patients about the out of hours support available.*
- Continue work with administration staff on communication with patients and managing challenging situations."*



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