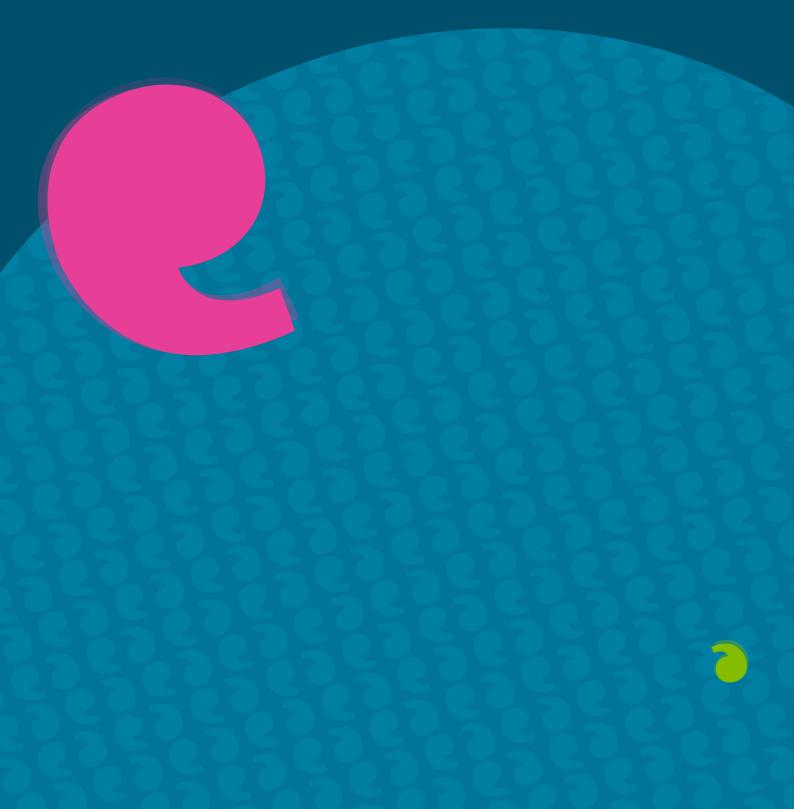


# Gathering views IHUB extended GP access



#### Healthwatch Islington

Healthwatch Islington is an independent organisation led by volunteers from the local community. It is part of a national network of Healthwatch organisations that involve people of all ages and all sections of the community.

Healthwatch Islington gathers local people's views on the health and social care services that they use. We make sure those views are taken into account when decisions are taken on how services will look in the future, and how they can be improved.

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### Introduction

The IHUB is a new service seeking to extend existing GP opening hours. It runs out of three centres across Islington: Ritchie Street Group Practice, Islington Central Medical Centre (at Laycock Street) and Andover Medical Centre.

We spoke to 45 respondents, 15 at each centre on three separate weekend mornings in November and December 2015. We approached everyone who had used the service as they left and those who were happy to take part did so.

## 'I only phoned this morning, it's quick. The local hospital is closer but it would have been a long wait.'

Patient accessing weekend IHUB service at Ritchie Street Group Practice

### Who we spoke to

### Sex of participants

Total	Female	Male	Prefer not to say
45	28	16	1

### Age of participants

Total	0 - 17	18 - 24	25 - 49	50 - 64	65 - 79	80 +	Prefer not to say
45	4	1	27	8	4	0	1

### **Ethnicity of participants**

Asian or Asian British - Bangladeshi	1
Black or Black British - Caribbean	3
Black or Black British - Eritrean	1
Black or Black British - Somali	1
Black or Black British – Any Other	1
Chinese	1
Middle Eastern	1
Mixed – White/ Black Caribbean	1
Mixed – Any Other Mixed	1
White - British	20
White - Irish	1
White -Greek/ Greek Cypriot	1
White - Any Other	12
Total	45

## **Findings**

We asked respondents how they had found out about the service. Almost all of the respondents had been made an appointment through their regular GP. At Ritchie Street, which is co-located with the walk-in service, two respondents had been directed from the walk-in.

#### **Making the appointment**

Respondents reported that they found it easy to make their appointment as this had been done for them. 12 respondents being seen through IHUB were actually being seen in their usual practice. Four respondents had been booked in to IHUB by their usual practice's reception, and staff from this service also work for IHUB.

Three mentioned that it had taken them a while to get through to their regular GP to make the appointment. Three mentioned that this service had been handy because of a problem with an appointment they thought they had booked at their own practice.

'Asked for an appointment on Thursday at 08:00, for an emergency. Phoned for a long time, then it was too late when I got through. Friday I phoned again but it was fully booked until 16th December, so they sent me here.'

Respondent L11 (L is Laycock Street)

'Offered me appointment for 11th December [interview took place on 28th November]. Couldn't wait that long, so offered me this. Couldn't get through to my own practice on the phone, had to go in, in person to get appointment.' Respondent L1 'She (receptionist) arranged it for me. There were no slots at the usual practice.' Respondent L9

'My practice did it for me.' Respondent R6 (R is Ritchie Street)

'Booked for yesterday morning but nurse was sick so re-scheduled for me today. It was good not to have to wait.' Respondent A9 (A is Andover)

#### Locating the service

44 out of 45 respondents found it easy to locate the service (with one respondent not having an opinion on this). In two cases respondents had actually ended up at the wrong hub but appointments had been re-arranged to accommodate them and they were happy with this with one commenting that the centres are fairly close together.

Some respondents referred to being given information about how to locate the practices by call handling staff. This included details of bus routes and parking arrangements. Many respondents reported knowing the centres already or using the internet to locate the centres.

'Gave me address, looked it up, it's near where I live.' Respondent A5

'Lady told me on the phone and where to park.' Respondent L14

'Fairly [easy]. Did it for me. Only just registered so it took a while and here it took 15 minutes to book me in. The IT system was slow.' Respondent A13

#### Convenience of the appointment time

The IHUB system provides appointments from 18:30 to 20:00 Monday to Friday and from 08:00 to 20:00 at the weekend. The service provider is monitoring the uptake of appointments and may modify the timetable to ensure that appointments are offered at times patients actually want to take them. All respondents were interviewed between 08:00 and 12:00.

43 respondents said that the time of the appointment was convenient to them. For the two that said that the time was not convenient they came to the service because they could be seen.

13 respondents appreciated the appointment being in the early morning and 13 appreciated it being at a weekend.

'More convenient than taking time off work.' Respondent L3

'Very convenient because it is Saturday morning and I'm not at work.' Respondent L9

'Very convenient. I could leave my toddler with my husband, the toddler needs attention when they are here but I could speak to the doctor [about her baby]' Respondent R14

Seven respondents commented that they were able to be seen more quickly by using the weekend service and some mentioned that they did not need to wait a long time at the practice (they were seen at their appointed time on the day).

'I only phoned this morning, it's quick. The local hospital is closer but it would have been a long wait.' Respondent R8

'Convenient because I had to have this soon.' Respondent A7

### Where would you have gone before the service existed?

The largest number of respondents 21 would have waited for an appointment with their regular GP if this service were not available. Four would have gone to the walk-in centre. Three would have called 111. Six did not know what they would have done.

One respondent would have gone to the maternity unit at UCLH and two would have left it to see whether it got any worse. An additional respondent would have made a private appointment with a GP instead (to avoid taking time off of work) and one felt they may have tried 111 or waiting for their GP they weren't sure.

Six stated that they would have gone to A&E (now known as the Emergency Department), though in one of these cases they would have actually been attended by a district nurse as they simply needed a dressing changing.

Of the six that would have gone to A&E, not all would have needed to, two needed a dressing changed, one had breathing difficulties, one needed stitches removing and two did not state what their condition was.

Of those that stated they 'don't know' where they would have gone one needed a dressing changed, one needed a prescription, one had tried the walkin but couldn't be seen there and so was directed back to the HUB and one suggested that they could try other health centres.

People appreciated being able to be seen quickly, rather than waiting weeks for an appointment with their regular GP practice. One respondent stated that she had never used her own GP practice because she could never get an appointment there.

#### Lovely staff

Feedback on both the reception staff and clinical staff was very positive. Several patients commented on the service not being rushed in comparison to the general GP service. Staff were described as 'brilliant', 'helpful' and 'lovely'.

In line with the Data Protection Act, patients using the IHUB service will be asked for their consent for the GP and/or nursing staff to access their patient records. 27 respondents said that they felt that the clinician had read their notes, (though the answers of 29 suggested that the GP had read their notes) with some mentioning that they saw the GP/ nurse refer to them during the consultation or that they had asked the patient for consent to see the notes.

Six respondents were not sure whether their notes had been accessed, though in some cases felt that the notes had not been needed (for example, in cases where they had attended for a dressing to be changed).

#### **Friends and Family Test**

We asked patients whether they would recommend the service to a friend or family member requiring similar treatment.

Nine said that they were 'likely' to recommend it, and 33 that they were 'very likely', so 42 were likely or very likely to recommend it. One respondent stated neither likely nor unlikely and another said no (they wanted to see their own GP). One respondent didn't want to answer the question as they felt it was the speed with which they were seen rather than the day of the week on which they were seen that was positive.

Reasons for recommending the service included:

- Convenience of the time of day
- Convenience of the day of the week (a nonworking day)
- Responsiveness of service 'especially for other mums'
- Good service.

#### Would you be likely to recommend the service to a friend or family member?

Total	Very likely	Likely	Neither	Unlikely	Very unlikely
44	33	9	1	1	0

## How the service compared to their usual experience of GP practice

When asked to compare the practice to their usual experience of going to the GP 21 described it as 'just as good' and 15 described it as 'even better' and 1 described it as 'not as good' because they prefer to be seen by a GP they know. Eight did not respond stating that they did not have enough/ any experience of the practice with which they were registered to draw a comparison.

Reasons given were a repetition of the themes above and included convenience and promptness of appointments as well as a relaxed atmosphere and helpful staff.

## Was a face-to-face appointment necessary?

44 of the 45 respondents felt that a face-toface appointment was what had been needed. Reasons giving ranged from the nature of their condition (a dressing change, an injection, a rash or something that needed to be seen) and feeling more reassured by being in the same room as the doctor.

The one person who said it was not needed was picking up a prescription and felt that the appointment could have taken place over the phone.

#### **Other observations**

- Lay out of different centres
- Relaxed atmosphere at Laycock Street
- Capacity for reception staff to attend to patients as they are not also managing the phone lines

- Quickness with which people were seen at the centres (people weren't waiting for long in the waiting area)
- Reception staff had a lot to deal with as it's new, though it was quieter than on a 'normal' day but some really good practice in terms of booking people in and making them feel welcome
- It would be good if patients could confirm their booking (this could also help to reduce the number of patients who 'Do Not Attend' (DNA)
- We also noted an advantage for patients being seen in a HUB which was also their practice. If they needed a follow up appointment, reception could do this for them. For those who were not registered at the HUB at which they were seen, staff had to advise them to call on Monday to book an appointment.

'At my end. I rang my practice to confirm the appointment and they couldn't access it, so I phoned Andover and they had to log out and log back in again (this took them 10 minutes). Hope it continues, convenient, much quicker. Usually have to book an emergency appointment else it's a 4 week wait and not usually an emergency so I don't like taking up an emergency appointment.

Patient trying to confirm booking for appointment with the IHUB service at Andover Medical Centre.

### Recommendations

1	Maintain a central booking service but enable patients to call this so that they can easily cancel/ confirm appointments if they need to.
2	Consider how the IHUB service is promoted.

#### Other questions for consideration

- 1. Will all the benefits of the current service be maintained as it becomes more widely known about, and more heavily used?
- 2. How does this service relate to the walk-in service? Is there duplication? Are both offers needed?
- 3. What is the cost per patient of being seen by the IHUB service compared to being seen through the regular GP service?



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