

# Gathering views

## Revisiting the IHUB service



## **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. It offers weekend and evening (6.30 – 8pm) appointments. It is open to anyone registered with an Islington GP.

We aimed to speak to 54 respondents: 12 at each of the three centres on one weekend in April 2016, and 6 at each centre between 6.30 and 8pm during the following week. We approached everyone who had used the service as they left and those who were happy to take part did so. It was noticeably harder to speak to patients at Ritchie Street as it was hard to distinguish them from the walk-in patients. We were only able to speak to five patients during the evening session at Ritchie Street. There was a wait of up to thirty minutes for one or two patients that evening, as an earlier appointment had overrun.

Patients were also being given an IHUB survey by the receptionists at the centres. This made some people less interested in speaking to us as they felt that they had already given their views.

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## **'Perfect, fits around work.'**

Patient commenting on the convenience of the IHUB service at Laycock Street

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# Who we spoke to

## Sex of participants

Total	Female	Male	Prefer not to say
53	29	24	0

## Age of participants

Total	0 - 17	18 - 24	25 - 49	50 - 64	65 - 79	80 +	Prefer not to say
53	6	5	30	8	4	0	0

## Ethnicity of participants

Asian or Asian British	3
Black or Black British - Caribbean	2
Black or Black British - Any Other	2
Latin American	3
White - British	22
White - Irish	3
White - Any Other	11
Other	6
Unknown	1
Total	53

# 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.

## Choosing the service

Seven of those we spoke to chose the IHUB service because they wanted a weekend/ evening appointment but this wasn't offered at their usual GP practice.

31 respondents said their reasons for choosing this service were 'other' and gave reasons such as; 'it fits around work' (3), 'too long to wait for my GP' (6), 'closer to home' (2), 'needed a dressing changed' (3), 'wanted to be seen quickly' (12), 'was only offered this appointment by my GP' (4). Four respondents mentioned that they choose the IHUB service as there was, 'no nurse at my practice', all four of these respondents were patients from St Peter's Street.

## Making the appointment

Respondents reported that they found it easy to make their appointment as this had been done for them through their usual GP's reception. For 15 respondents the IHUB centre in which they were being seen was their usual practice.

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.

**'Rang surgery (Tufnell Park) and they said there was a three week wait for an appointment. The receptionist there then offered me a choice of weekend appointments at different locations and times and let me choose.'**

Respondent A9 (A is Andover)

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'I arrived at my GP and asked for an appointment. They referred me to Andover. It was a very fast process.'

Respondent A1

'Called up my GP service out of hours and was transferred straight through to the IHUB service.'

Respondent L9 (L is Laycock Street)

'I did some research online and found out about this service. I asked my GP receptionist for a weekend appointment and was told they don't do that. I had to say 'IHUB' and then they knew what I was talking about and booked me in.'

Respondent A10

'I Rang the IHUB service in the evening'

Respondent L8

'Called GP, no appointments available, I asked if other options were available, GP offered me IHUB.'

Respondent R8 (R is Ritchie Street)

## Convenience of the appointment time

The IHUB system provides appointments from 6.30 in the evening to 8pm Monday to Friday and from 8am to 8pm 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.

50 respondents said that the time of the appointment was convenient to them. For the two that said it was not convenient, they came to the service because they could be seen more quickly.

13 respondents appreciated the appointment being at the weekend and 10 appreciated it being either earlier in the day (at the weekend) or later (during the week). 10 respondents commented that their appointment was more convenient because it fitted around their work commitments.

*'I work in the week so needed an appointment that was either in the evening or at the weekend.'*  
Respondent L2

*'Only time available, but it was actually perfect timing for me as it was after work.'*  
Respondent L15

*'10am on Sunday is very convenient as I have weekday work commitments.'*  
Respondent A4

Seven respondents said that they were able to be seen more quickly by using the IHUB service.

*'Very soon after I called my surgery the appointment was available.'*  
Respondent R9

*'It was early, it was quick'*  
Respondent R1

*'Same day appointment'*  
Respondent L9

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

The largest number of respondents (27) would have waited for an appointment with their regular GP if this service were not available. Four would have gone to the Emergency Department (A&E). Two would have gone to a walk-in centre. Ten did not know what they would have done.

Three respondents would have made a private appointment with a GP instead (to avoid taking time off of work) while three others would have taken time off work to see the GP. Two respondents would have had to cancel travel arrangements if they hadn't been able to see the nurse or doctor on the day we spoke to them. These results are similar to those in our previous report.

Of the four that would have gone to A&E, not all would have needed to, one needed a dressing changed, one needed a referral, and two did not state what their condition was.

Of those that stated they 'don't know' where they would have gone, two respondents mentioned that this was because their practice didn't have a nurse currently.

People appreciated being able to be seen quickly, rather than waiting weeks for an appointment with their regular GP practice. One respondent stated that he had never used his own GP practice because he 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 'friendly'.

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. 40 respondents said that they felt that the clinician 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 they felt that the notes had not been needed (for example, in cases where they had attended for a dressing to be changed, or it was a new and unrelated health issue).

Two respondents mentioned that the doctor or nurse hadn't been able to access all their notes during the appointment (referring to x-rays or letters). One other mentioned that the doctor had told her this service was not for repeat prescriptions. At the time of these conversations a new version of the clinical software, EMIS Enterprise, had only been rolled out at six practices in Islington. This new version enables the clinician to easily do repeat prescriptions. However, at least two of the respondents who had been frustrated about this were patients at one of these six practices.

Another respondent had brought their own notes with them.

Two other respondents mentioned that they had come to have their dressings changed but that the nurse did not have any saline or dressings. They had not been told to bring their own with them.

## Friends and Family Test

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

Very likely	43
Likely	5
Neither	2
Unlikely	0
Very unlikely	0
No answer	3
Total	53

Five said that they were 'likely' to recommend it, and 43 that they were 'very likely', so 48 were likely or very likely to recommend it. Two respondents stated neither likely nor unlikely (as they wanted to see their own GP). Three respondents didn't want to answer the question with one saying 'why should I recommend it?'

Reasons for recommending the service included:

- ▶ Convenience of the time of day (16)
- ▶ Flexible service (4)
- ▶ Responsiveness of service (9)
- ▶ Good service (5)

Two respondents commented that they would recommend the service, but didn't want too many people to know about it in case that made it harder to get an appointment.

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

When asked to compare the IHUB to their usual experience of going to the GP 27 described it as 'just as good' and 22 described it as 'even better' and 2 described it as 'not as good', one because the doctor couldn't access their x-rays and the other because the nurse did not have any dressings. Two did not respond, stating that the services were hard to compare.

## Option of a telephone conversation

32 respondents felt that in some circumstances they would be happy to have a phone consultation with a GP rather than a face to face appointment. Four said they would have a phone consultation if it was the only option (eg. couldn't see the GP for 6 weeks), another four said they would be happy with a phone consultation for minor issues, with another saying they'd consider it for serious issues only. Six other respondents commented that they had done this before.

'It's my least favourite option but if I have to wait for 6 weeks to see the GP I'll take the phone interview.'  
Respondent A11

## If you could choose between being seen at your regular practice or being seen at another practice in the borough, what would influence your choice?

For those 15 respondents who were being seen at their usual practice, four wouldn't have taken the appointment if it had not been at the usual practice, for reasons such as 'it's close to home' and 'I have mobility problems'.

Otherwise people's decisions would have been influenced by the time of the appointment (1), the speed at which they could be seen (3) and the proximity to their home/ ease of travel (3).

'I like being seen here, I have a walking problem.'  
Respondent L8

'It depends, for example, Arsenal's at home today so I wouldn't want to go too far. But yes, I would overall.'  
Respondent A12

'I would have taken it. Maybe the time (eg. earlier) I wouldn't be as interested.'  
Respondent A15

Of those 38 respondents who had already travelled to another practice for their appointment

- ▶ 24 stated that being seen when needed was the most important factor for them.

'Don't mind where I'm seen as long as I can be seen when needed.'  
Respondent L5

'I would like to see the same GP but wouldn't want to wait 3 weeks.'  
Respondent R4

- ▶ 14 spoke about the importance of being seen somewhere near to where they live (or somewhere easy to travel to).

'Being seen as soon as possible and relatively local'  
Respondent L4

- ▶ Three commented on the quality of the doctor or nurse being important to them.
- ▶ One other suggested a choice of a male or female GP was important to them.
- ▶ Two others suggested that time of being seen was the most important factor for them.
- ▶ Four of those we spoke to said that they would always choose waiting to see their own GP over an appointment at another location, even if it was quicker.



# Points to consider

1	Consistency of the offer - patients from all GP practices need to have equal access to the IHUB service; including the offer of repeat prescriptions, access to x-rays and letters and referrals.
2	Future offer - what are the aims of this service going forward and how are these going to be measured?

## Other observations from Healthwatch Islington

- ▶ Relaxed atmosphere at Laycock Street and Andover Medical Centre.
- ▶ Increased capacity for reception staff to attend patients as they are not also managing phone lines.
- ▶ Waiting times seem to have increased since our last visits before Christmas. Some patients were waiting half an hour to be seen past their appointment time.
- ▶ 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.
- ▶ Other services run out of Ritchie Street and at Laycock Street in the evenings, which makes the setting more confusing and less relaxed for patients and reception staff.

## Acknowledgements

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along with Healthwatch staff. They conducted  
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Please get in touch to find out more about  
volunteering for Healthwatch Islington.

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