Care Quality Commission

Inspection Evidence Table

Dr Wilson & Partners (1-540691417)

Inspection date: 7 December 2021

Responsive

Access to the service

Rating: Not rated

People were able to access care and treatment in a timely way.

	Y/N/Partial
Patients had timely access to appointments/treatment and action was taken to minimize the length of time people waited for care, treatment or advice	Υ
The practice offered a range of appointment types to suit different needs (e.g. face to face, telephone, online)	У
Patients were able to make appointments in a way which met their needs	Y
There were systems in place to support patients who face communication barriers to access treatment	Υ
Patients with most urgent needs had their care and treatment prioritised	Y
There was information available for patients to support them to understand how to access services (including on websites and telephone messages)	P(1)
There were enough staff to provide appointments and prevent staff from working excessive hours	Υ
There were systems in place to monitor the quality of access and make improvements	P(2)

Explanation of any answers and additional evidence:

Data from the national GP patient survey showed that although the practice was still below local and national averages for patient satisfaction for phone access this area had improved from 25% in 2020 to 40% in 2021 and satisfaction with the appointment offered had improved from 41% to 74% which was in line with local and national averages.

Staff told us there were usually four or five staff answering calls however, on the day of the inspection reception staffing was reduced to three people due to illness and annual leave. Staff were observed to be patient, calm and kind with callers while answering phone calls, managing the intercom, greeting patients and undertaking covid checks.

The practice had a daily duty doctor who mostly sat with reception staff and triaged requests for appointments. Patients were offered telephone or face to face appointments as required. We observed staff escalating concerns to the duty GP and same day face to face appointments being

offered.

The practice had utilised interpreters for zoom calls or to provide in person support for face to face appointments for those with a hearing impairment.

The provider told us they were working closely with the Primary Care Network (PCN) and Clinical Commissioning Group (CCG) to improve access across the area and plans were in early stages.

(1)

As the practice was in a shared building with other community services, they taken steps to limit patient access and an intercom system was in use to access the building. This enabled each service to manage and guide patients to the correct waiting area, implement covid checks such as taking temperatures, ensuring patients wore a mask and maintaining the one-way system. The intercom system was managed by reception staff. We observed queuing outside the building was minimal for patients attending the practice. However, we observed the directions for use of the intercom system were not clear.

The practice website was not up to date with information about extended and out of hours services and how to access these.

The practice had an online system which patients could use to contact the practice, but we were told there had been little uptake of this system by patients and no use in the last few weeks. However, whilst the icon to access this system was on the front page of the practice website there was no explanation of the system or instructions for its use, staff were unaware of the online system and there was no promotional material in the practice.

The practice manager told us they would review all these areas.

(2)

The telephone system within the practice did not enable the provider to audit or monitor its use for example, number of calls into the practice, call waiting times or abandoned calls. They told us they monitored the systems by making random calls into the practice and monitoring complaints about access. They told us they had made several improvements over the last couple of years such as increasing the number of phone lines into the practice and employing additional reception staff. They were also implementing a plan to provide additional support to the reception team by the health care assistants at the busiest time of day.