

## Inspection Evidence Table

Eden Park Surgery

(1-542072057)

Inspection Date: 9 January 2024

Date of data download: 20/11/2023

## Overall rating: Good

We carried out a comprehensive inspection at Eden Park Surgery on 9 May 2019 and we rated the service as 'good' for all five key questions and overall.

This assessment of the responsive key question was undertaken on 9 January 2024 as part of our work to understand how practices are working to try to meet demand and to better understand the experiences of people who use services and of providers. The results of our findings have led us to now rate the responsive key question as 'good'. The service remains rated as 'good' overall.

We recognise the great and often innovative work that GP practices have been engaged in to continue to provide safe, quality care to the people they serve. We know colleagues are doing this while demand for general practice remains exceptionally high, with more appointments being provided than ever. In this challenging context, access to general practice remains a concern for people. These assessments of the responsive key question include looking at what practices are doing innovatively to improve patient access to primary care and sharing this information to drive improvement.

## Responsive

Rating: Good

Responding to and meeting people's needs

**The practice organised and delivered services to meet patients' needs.**

	Y/N/Partial
The practice understood the needs of its local population and had developed services in response to those needs.	Y

The importance of flexibility, informed choice and continuity of care was reflected in the services provided.	Y
The facilities and premises were appropriate for the services being delivered.	Y
The practice made reasonable adjustments when patients found it hard to access services.	Y
There were arrangements in place for people who need translation services.	Y
The practice complied with the Accessible Information Standard.	Y
Explanation of any answers and additional evidence:	
<p>The provider was aware of the requirements to meet the Accessible Information Standards. The patient registration form collected information about the specific needs of individual patients. The patient record system was used to alert staff to specific communication needs of the patient. Translation and sign language services were made available to patients. The premises was accessible to all patients with consultation rooms available on the ground floor.</p> <p>The provider identified health issues that impacted the local population most, including diabetes, and developed services to respond to those needs. Clinical staff had specific areas of responsibility to support continuity of care.</p>	

Practice Opening Times	
Day	Time
Opening times:	
Monday	8am - 6pm
Tuesday	8am - 6pm
Wednesday	8am - 6pm
Thursday	8am - 6pm
Friday	8am - 6pm
Appointments available:	
Monday	8.30am - 6pm
Tuesday	8am - 8pm
Wednesday	8.30am - 6pm
Thursday	8am - 6pm
Friday	8am - 6pm

Further information about how the practice is responding to the needs of their population
<ul style="list-style-type: none"> <li>• Patients had a named GP who supported them in whatever setting they lived.</li> <li>• The practice was responsive to the needs of older patients and offered home visits and urgent appointments for those with enhanced needs and complex medical issues.</li> <li>• The practice liaised regularly with the community services to discuss and manage the needs of patients with complex medical issues.</li> <li>• The practice offered enhanced access appointments on Thursdays from 8am.</li> <li>• Extended access appointments were available via the PCN until 8pm on a Tuesday and between 8am and 12pm on a Saturday.</li> <li>• All parents or guardians calling with concerns about a child were offered a same day appointment when necessary.</li> <li>• The practice held a register of patients living in vulnerable circumstances including homeless people, Travellers and those with a learning disability.</li> <li>• People in vulnerable circumstances were easily able to register with the practice, including those with no fixed abode such as homeless people and Travellers.</li> <li>• The practice adjusted the delivery of its services to meet the needs of patients with a learning disability.</li> </ul>

## Access to the service

### 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 minimise the length of time people waited for care, treatment or advice.	Y
The practice offered a range of appointment types to suit different needs (e.g. face to face, telephone, online).	Y
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 (including those who might be digitally excluded).	Y
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).	Y
<p>Explanation of any answers and additional evidence:</p> <p>Patients could access appointments via telephone, eConsult (a digital triage tool), the practice website or in person at the practice.</p> <p>The practice had an active Patient Participation Group (PPG). We spoke with representatives of the PPG. They told us they felt the practice listened to them and was open and honest. They had suggested improvements to the premises, and this was actioned by the provider.</p>	

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## National GP Patient Survey results

Note: From July 2022, CCGs have been replaced with Sub Integrated Care Board Locations (SICBL) and CCG ODS codes have been retained as part of this.

Indicator	Practice	SICBL average	England	England comparison
The percentage of respondents to the GP patient survey who responded positively to how easy it was to get through to someone at their GP practice on the phone (01/01/2023 to 30/04/2023)	87.5%	N/A	49.6%	Significant variation (positive)
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2023 to 30/04/2023)	75.9%	49.7%	54.4%	Tending towards variation (positive)
The percentage of respondents to the GP patient survey who were very satisfied or fairly satisfied with their GP practice appointment times (01/01/2023 to 30/04/2023)	73.6%	50.0%	52.8%	Tending towards variation (positive)
The percentage of respondents to the GP patient survey who were satisfied with the appointment (or appointments) they were offered (01/01/2023 to 30/04/2023)	81.7%	66.1%	72.0%	No statistical variation

## Any additional evidence or comments

According to the National GP Patient Survey results outlined in the table above, the practice had performed above national 'access' averages and this had been consistent over the last 5 years for all indicators. However, there had been a downward trend in satisfaction rates for patient experience in respect of making an appointment and the appointment they were offered since 2021.

The provider told us they received verbal feedback from patients and also feedback via the Friends and Family test. They have been told by patients that they would like the provider to offer more pre-bookable appointments. A total triage access model will be introduced by April 2024 as part of an ICB wide initiative. The provider hopes this will allow them to increase the number of pre-bookable appointments and increase slots from 10 to 15 minutes each.

The provider told us that they have also increased capacity with the recent addition of a new Advanced Nurse Practitioner.

Source	Feedback
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NHS.uk website (formerly NHS Choices)	Feedback via this website included 7 comments including 5 comments about positive patient experience and two negative comments about access and customer service.
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## Listening and learning from concerns and complaints

**Complaints were listened and responded to and used to improve the quality of care.**

Complaints	
Number of complaints received in the last year.	13
Number of complaints we examined.	13
Number of complaints we examined that were satisfactorily handled in a timely way.	13
Number of complaints referred to the Parliamentary and Health Service Ombudsman.	0

	Y/N/Partial
Information about how to complain was readily available.	Y
There was evidence that complaints were used to drive continuous improvement.	Y

Example(s) of learning from complaints.

Complaint	Specific action taken
Complaints received included concerns about service provided and access to appointments.	All complaints were investigated and used to inform learning.
<p>Explanation of any answers and additional evidence:</p> <p>The provider told us they had identified a number of complaints received in the past that had not been logged or investigated in a timely way. We saw evidence that the provider had taken action to address this shortfall and was using an effective complaints log at the time of this assessment and all outstanding complaints had been addressed. The practice complaints policy was being reviewed to identify and further improvements.</p>	