

# Ashton Medical Group

## Summary of the data collected by Healthwatch Tameside

### June to September 2019

Published in October 2019

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## Introduction

Healthwatch Tameside has a statutory function to gather evidence from the views and experiences of patients, service users and the public about their local health and care services and to provide feedback based on that evidence.

From 1 April 2018, Bedford House, Chapel Street and Tame Valley surgeries joined together, becoming Ashton Medical Group. During the following 12 months, Healthwatch Tameside spoke to several people who use the practice in their regular outreach sessions in the community and read online reviews.

Healthwatch Tameside considered what they had heard so far and decided to investigate more deeply. We wanted to find out what patients thought, and whether they had seen any recent improvements to the patient experience, as a result of changes being put in place by Ashton Medical Group.

Healthwatch Tameside met with one of the GPs at Ashton Medical group to explain what we were going to do. This gave us a chance to find out what actions had already happened, what improvements were coming shortly, and what challenges Ashton Medical Group knew they still faced. We also discussed whether there was anything the practice would be interested in Healthwatch Tameside talking to patients about, that was particular to the future plans for the practice.

With agreement from Ashton Medical Group, Healthwatch Tameside arranged to talk to patients outside the practice. (The buildings are now called Chapel House and Bedford House, after a doorway was created between the Tame Valley and Bedford House buildings.) The data used in this report has been collected between June and September 2019, using the following methods:

27 August 2019 - standing outside Chapel House talking to people going in and out of the building (20 people).

2 September 2019 - standing outside Bedford House talking to people going in and out of the building (13 people).

10 September 2019 - standing outside Chapel House and Bedford House talking to people going in and out of the building (16 people).

17 September 2019 - standing outside Chapel House and Bedford House talking to people going in and out of the building (17 people).

June to September 2019 - Healthwatch Tameside outreach in the community sessions (11 people).

June to September 2019 - Healthwatch Tameside general survey completed responses (13 people).

June to September 2019 - online reviews from the NHS website/Care Opinion website (4 people).

In total, this report is based on information and comments from 94 people. We have tried to use the words that the patients used when talking to us. We appreciate this is a small sample compared to the size of the practice, but hope the comments will be helpful, when the practice is reviewing the service they provide.

# Themes

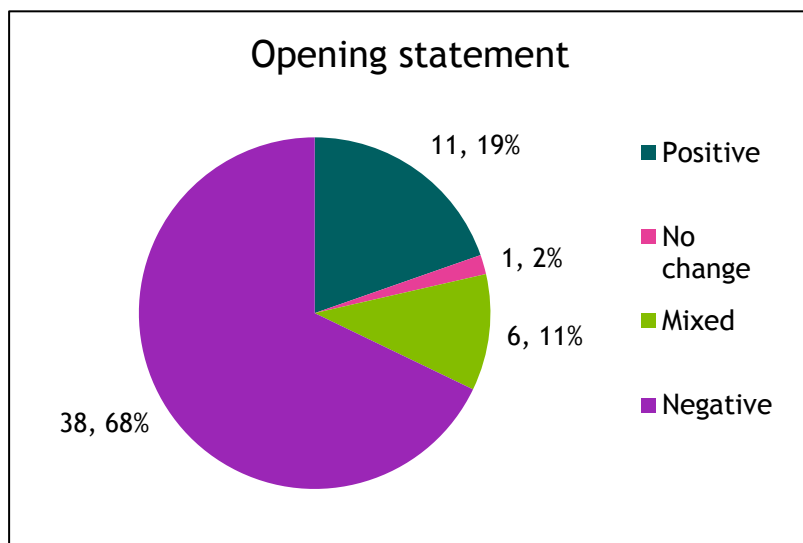
At the start of each conversation outside the surgeries, Healthwatch Tameside staff introduced themselves, and explained they were interested in hearing about the experiences of the patient using Ashton Medical Group. The direction of the conversation was led by the person who had stopped to talk to us, although Healthwatch staff had a prompt sheet with a list of areas we were interested in finding out more about, if needed.

We asked about recent use of the practice, which often led to information being provided about past visits. Some people were in a rush and only provided a brief comment. Others had more time and were happy to chat about many aspects of the GP practice.

We have grouped the comments into themes, including quotations (in italics) and examples. We have included both positive and negative comments.

## Initial reaction

The first statements from many people were short and to the point. The graph shows the sense of reactions.

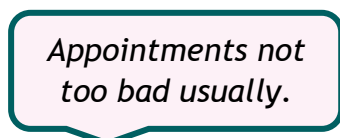


Sometimes people started out with a positive statement, but also had areas they felt still needed improving. Here are a few examples of comments.

### Positive



### Mixed



## Negative

*Rubbish - it's gone to pot.*

*It's a nightmare. You can't get in.*

*It's dreadful. It needs to de-merge.*

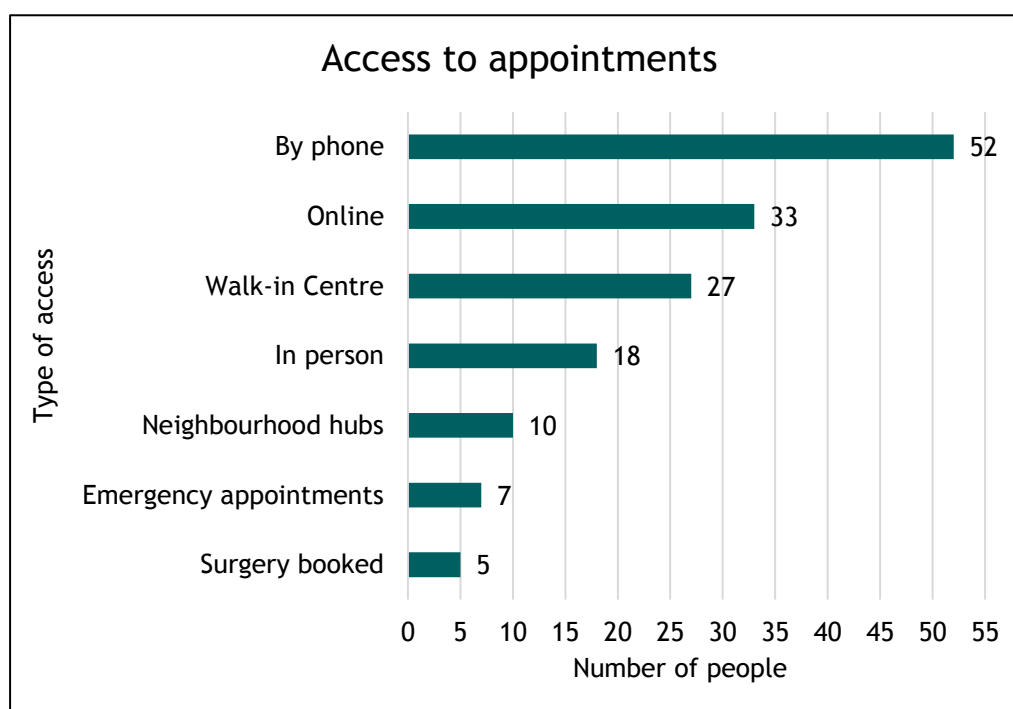
## Appointments

This is the topic people had the most to say about. We will consider the comments in sections, starting with different ways of accessing appointments. We will then look at any comments about the appointments themselves.

### Accessing an appointment

Out of the comments from the 94 people included in this report, 68 people told us about their experiences of making an appointment.

This graph shows the number of people who told us something about each of the types of access listed, after contacting the practice.



We will now look at each of the types of access people talked to Healthwatch Tameside about and how long they had to wait for their appointment. 33 people made comments about the waiting time for an appointment.

## Telephoning the surgery

All the comments made under this section are negative. There are some common themes about ringing to make an appointment. These are:

- **It takes a long time for the phone to be answered.** Some people did not describe what a 'long time' is. For others, the time they complained about having to wait ranged from 10 minutes to over an hour. Some people did not get through at all, and one person re-dialled 40 times on the day we spoke to them.

*Wait on the phone, 27th in the queue - very annoying. Recently got better - not as bad.*

- **You are in a long queue.** Of the people who provided more detail, the example of the number they were in the queue ranged from 7<sup>th</sup> to 27<sup>th</sup>. One person complained they had to listen to options for 5 minutes before they were told their position in the queue.

*I have been 10th and 17th in the queue at 8am. I rang at 1pm and was 24th in the queue.*

- **You are cut off whilst queueing.** Four people told us about being cut off after waiting for a long time in the queue. One person waited from 16<sup>th</sup> to 3<sup>rd</sup>, another waited for up to 30 minutes, and one for up to an hour, before all were cut off, had to re-dial and join the queue from the end again, or visit the surgery to make an appointment.
- **Ringing at 8am is difficult if you work.** People who need an appointment, but it is not an emergency, and so are still able to go to work, find it very difficult to ring up. They cannot keep holding, in a queue, so hang up and try again later.
- **The appointments have all gone when you do get to speak to someone.**

*On phone for 45 minutes at 8am - 18th in the queue - then there are no appointments.*

- **The cost of calls to the patients.** The cost of calls was raised by a few people, including a professional who was talking to Healthwatch and mentioned how long it had taken them to get through themselves. Not everyone has a phone package with inclusive minutes. One person suggested a Freephone number.

*I rang this afternoon with an enquiry about ..... When the call began the automated message advised me that I was number 18 in the queue, which took 44 minutes for me to get to number 1 when eventually the call was answered. I have concerns that if a patient was using a pay as you go mobile then this length of time to be left holding on would be extremely expensive.*

## Making an appointment at the reception desk

Here are some comments about coming to the reception to make an appointment:

- **People have given up trying to ring for an appointment.** 9 people told us they had given up trying to ring and come down to the surgery for 8am to be given an appointment. Is this why there are no appointments left when people who are trying to ring up eventually get through?

*Quick appointment. I went in person to book as too long a wait on phone for appointment. All appointments gone when you get through.*

*Rubbish. Appointments are impossible to get even though there are so many available. You don't phone. I come at 8am to get one.*

*You can't get cancellations any more. You have to come at 8am to get an appointment.*

- **People have phoned and been cut off.** These people had tried ringing but failed to get through, so had visited the practice.

*We had to come down - not picking phone up. We were 16th in list, got to 3rd and then cut off.*

*You ring and are 23rd in the queue, but phone goes dead after 20/30 minutes. Hang up and have to come down to surgery.*

- **It is quicker to travel to the surgery than to ring up.** This is what we were told by 2 people.

*You phone reception for an appointment and can wait 25 minutes - you could have come down in person - it would be quicker.*

- **There is no privacy at the reception desk.** 4 people said they do not like having to explain what is wrong with them to a receptionist, where they can be overheard, and there is no privacy.

*I prefer not to book appointments in person as there is no privacy offered.*

*Not confidential if you want to book an appointment at reception.*

*They ask for details about why you need to see the doctor - I don't always want to say if other people are listening.*

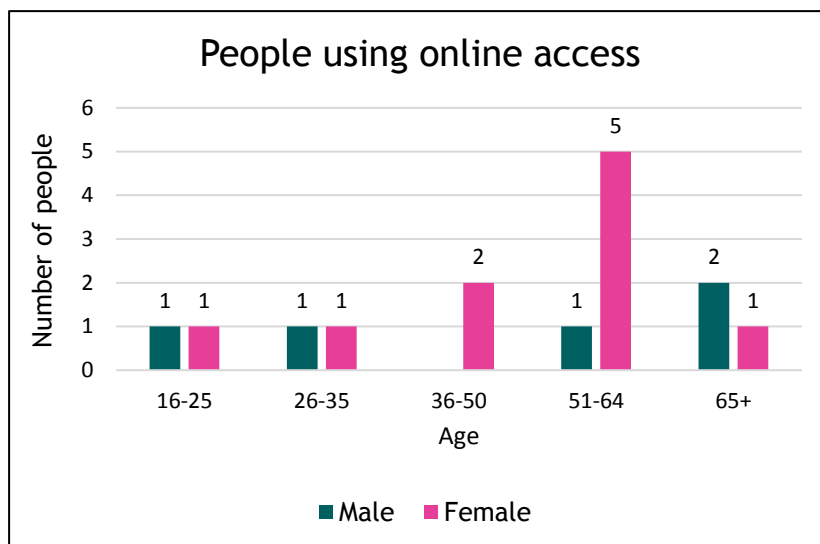
- **Sent away to ring the next morning.** This person had been refused an appointment when they visited the practice, and was told to keep ringing each day at 8am.

*It's a nightmare. You can't get in. You ring up and can't get through. I came in and was told to ring each day.*

## Online access

There were mixed views about using the internet to book appointments. Here are some of the thoughts:

- **Registered for online access.** 15 people confirmed they had registered to go online. The graph shows the range of ages, where we know them.



However, 3 of these people only used the option to order repeat prescriptions.

*Very good today. Problems in the past. Used online booking 2/3 weeks ago. Phone - forget it.*

9 people told us that they wanted to book appointments online, but they had not found any available when they had tried.

*I used to do online but not now - there are never any appointments.*

*On-line appointment system, often all appointments full so you have to do it all again the next day, and the '2 week' is extremely frustrating.*

*Told to use the app then there are no appointments.*

- **Have tried to register for online access.** 2 people had tried to register, but it had failed. 1 person had given up and the other spoke to reception last week for it to be sorted out.
- **Used to be registered for online access.** 1 person was registered previously with Tame Valley but now needs to re-register.
- **Not registered for online access.** This group of people was the largest. Different reasons were given for not wanting to sign-up, including not having a computer, not being online, not trusting the internet, and not wanting to. 1 person was registered themselves, but still had to ring up to make appointments for their children.



*Don't have a computer at the moment - will consider online access when I get a new one.*

*I'm not able to use online access. If you're not online, you've had it.*

*I'm too old for computers  
- they baffle me.*

*I'm tired of being told to do things online. It's not inclusive. What about those who can't do it? I'm being pushed to do something I don't want to do.*

*My mum and dad are in their late 80's and were told to book appointments online. They don't know how to switch a computer on.*

*Not using online access - I've not got a clue and my mum can't even use her phone.*

## **Emergency appointments**

Only 7 people talked about what had happened when they needed an emergency appointment. They had:

- **Gone to A & E.** They said this is because they couldn't get an appointment, or they didn't want to wait weeks.
- **Visited the surgery in person.** They said this is because it is too difficult to phone.
- **Been given an on the day appointment.**
- **Received a home visit.**

*I had to call out an emergency doctor several times for my parents. On 3 occasions ..... attended. He was absolutely brilliant.*

- **Been sent to the Walk-in Centre.**

*If you need an emergency appointment because you are very poorly you are sent to the Walk-in Centre at Tameside Hospital.*

## **Neighbourhood hubs**

Many of the people we spoke to had not used the appointments in the evenings or at weekends, which can be offered at hubs around Tameside. Reasons include:

- **Not being aware that hub appointments were an option.** Healthwatch Tameside explained to a number of people what the hub appointments are.
- **Asking for an appointment, but none being available.**
- **Not needed to.** This person was able to have an appointment at 6.15pm with their own GP.

Three people had used these appointments. One person had to ask, it was not offered. Another was offered a Saturday appointment. The third person is in their 80's and was sent to a hub but found it difficult to get there with mobility issues.

## Walk-in centre

25 people told us they had used the Walk-in Centre, mostly the new Urgent Care Centre at Tameside Hospital. Most people did not say why they had gone there, but the following were given as reasons by some people:

- **Was sent there by the surgery.** There were no appointments available at the surgery.
- **Didn't want to wait.**  
*I had to wait 3 weeks for an appointment. I went to the walk-in centre.*
- **Phoned 111 and was sent there.**

The comments about the service provided by the walk-in centre will be shared anonymously with Tameside Hospital, separately to this report.

## Appointments requested by surgery

5 people told us about appointments made at the request of the GPs.

- **GPs book future appointments for you.** This was welcomed.
- **Got a text to make an appointment.**

*I got a text to make an appointment about my bloods. I got here and was told I don't need an appointment, I can ring up.*

## Waiting time for an appointment

Out of the 33 people who commented about waiting times. only 1 person was happy. Another person was pleased with the text reminders, although a second person said they were 'sporadic' and would prefer more reliability.

People said they had waited different lengths of time, varying from over a week to 4 to 5 weeks.

Some people said they waited a long time but did not explain what they felt 'a long time' was.

Waiting time	Number of people
Over a week	1
2 weeks	11
2 - 3 weeks	6
3 weeks	4
4 weeks	1
4 - 5 weeks	1

*Appointments have been chaos, but good this morning - I made an appointment for 2 weeks off but it is an improvement.*

*Can hardly get an appointment - takes about 4 weeks - could be dead by then.*

*Can't make an appointment in advance when doctor says to see you next week.*

*Fine for me. No complaints although it would be nice if you could get appointments quicker.*

*Have to wait 2 weeks for an appointment unless it's an emergency on the morning, then you can only talk about one thing.*

*It's been OK this morning - I got an appointment for Thursday which is surprising. Sometimes have to wait 2/3 weeks.*

*It's difficult to get an appointment. All our friends have the same issue. You used to get an appointment within a couple of days.*

*It's stupid waiting 2 weeks for an appointment. There should not be a 2-3 week wait to get to see a doctor, the number that they have. Tried looking online and had to wait 4 weeks to see a doctor.*

*They suggested I go to the walk-in centre, but I want to change the frequency of my prescription so I need to see a doctor.*

*Wait a long time for appointments. It is ridiculous, but it's the same across the country.*

*Was asked by the receptionist what the problem was, only to be told 'we don't do ..... anymore, you will have to go to the chemist and buy something over the counter'. She said the receptionist's attitude was extremely rude and she was annoyed she would have to wait for 2 weeks to get an appointment to see a GP for a child.*

*There is an unavailability of appointments in the future.*

## **Other comments about appointments**

### **Arriving for an appointment**

Some comments were made about booking in when you arrive at the surgery. These included the following themes:

- **Length of queue at reception desk.** People said they do not want to be standing in a queue, when they are not feeling well. Also, people have been late for their appointment by the time they reach the front of the queue.

*Queues are longer now because of many people in front who are experiencing problems. Patients should not have to put up with this especially as many are disabled.*

*The receptionist is slow and not prepared for the surgery e.g. files and forms are not handy.*

- **Waiting room.** The waiting room was described as ‘*cramped*’ by one person, and at Bedford House as being ‘*claustrophobic*’. On our general survey we ask, ‘What could be improved?’ about the service being described. One answer was ‘*The surgery environment*’.
- **Length of time in the waiting room.** People said appointments often run late, and one person said they had waited 45 minutes after their appointment time. Others were less specific.
- **Booking-in screens not working.** Several people mentioned this, meaning people have to queue at reception to book in. One person did this, but it was not recorded, they were not called through and they missed their appointment. Another person suggested ‘a bigger counter’ is needed.

*The screens in the surgery have not been working for weeks. I understand what they are going through but there are some quick fixes.*

- **No loud TV.** This person is new to the practice and was pleased to have a quiet waiting room.
- **Receptionists busy.** One person said they should put the patients in front of them first, rather than the other work they are doing.

### Location of the appointment

Use of two buildings is still causing some confusion. 12 people said they were now OK using two buildings, although many of these people said this was not so at first.

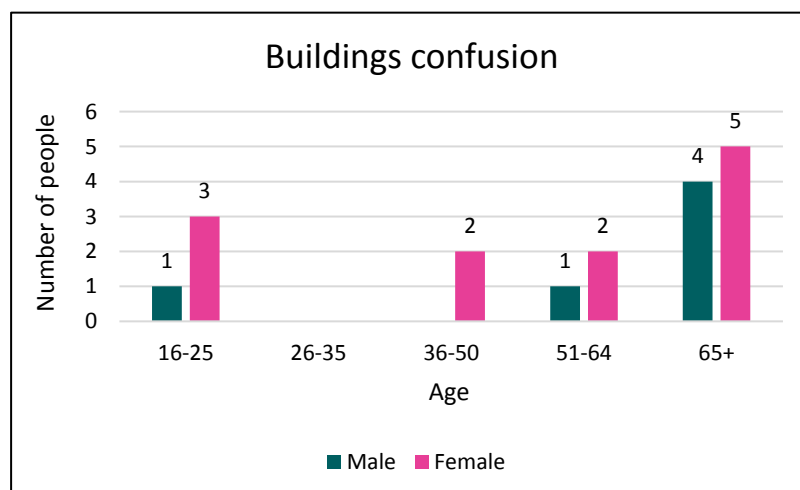
*No problems with two buildings - should have been done earlier.*

*They didn't tell me which building to use at first but it is OK now.*

*Two buildings - doesn't bother me now - just happy to get to see a doctor.*

One person wondered whether they might have problems as they got older, and maybe were less mobile?

19 people told us they were not sure where to go, and went to the wrong building when they arrived. Here are the ages, where we have the information.



The confusion was often when they wanted to drop off or collect a prescription, or collect a copy of a letter.

*I was sent to the other building with no directions other than 'it's behind here'.*

*Staff a bit rude - being sent between buildings to get a letter - had to do it twice.*

Some people did not know where to go for appointments, but others said they were told which building when they booked the appointment.

*If you go the wrong place, staff are good and point out where to go.*

*The two buildings are a pain - my Nana struggles.*

### Length of the appointment

Little information was provided about the length of appointments. People were more concerned at making sure Healthwatch knew about the difficulties they had in making the appointment.

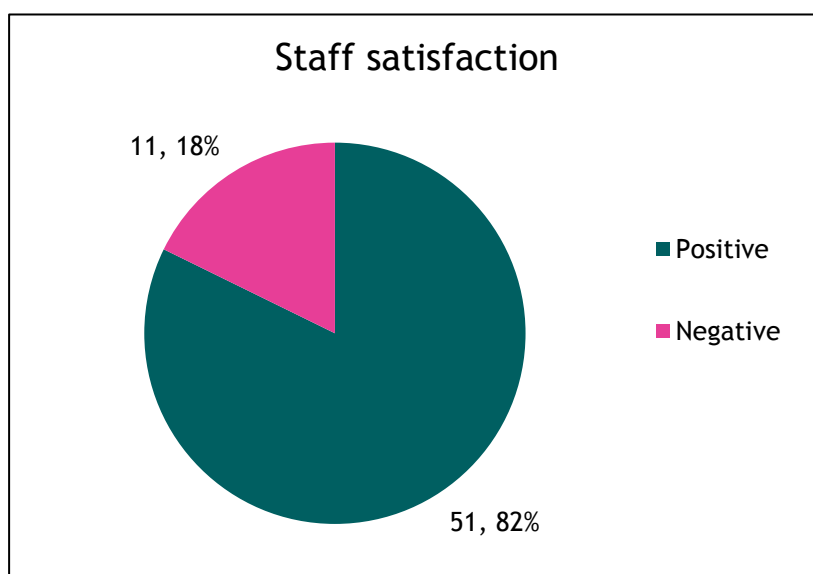
A couple of people mentioned only being able to talk about one thing at each appointment. One person asked whether they should have asked for a double appointment - they had been trying to save appointments for other people by 'combining things.'

### Telephone appointments

2 people said phone appointments were good.

### Staff

Many of the people we spoke to gave positive feedback about the different members of staff they had met or spoken to.



The comments were often generic and were about 'staff' generally.

*Good staff - they have more than one female doctor.*

*Hate being critical - all do the best they can.*

*Have no issues with the doctor or reception. They are governed by the system - need to be a little bit flexible.*

*I feel sorry for staff - people don't like change.*

*Staff are nice - they are getting stick when it's not their fault.*

*Staff are nice and are apologetic.*

*Staff attitude seems to have improved.*

*The staff are good with me. My observation is of other people being seen in the same always first-class way.*

Where we have more specific comments, we will look at these now.

### Receptionists

There were 6 positive and 5 negative comments about receptionists. Within some of the comments, there is recognition that they are doing their job, and have systems to follow. A few people complained about the way that they had been spoken to.

*Receptionists have always been polite and helpful. I have observed them working under pressure with the building works etc.*

*The majority are very polite but there are always the odd one or two who are not friendly.*

*Twice the receptionist has been off with me at Chapel House. One of them needs to learn some manners.*

*Very nice people - no complaints.*

### Doctors

People are generally very happy with the care they receive from the doctors (once they have managed to make an appointment).

*Crisp, efficient service from this GP. She treats me as an equal not an idiot patient.*

*Dr ..... is friendly and puts your mind at rest and straight to the point.*

*I enjoy the trainee doctors - they are keen and show an interest.*

*Student GP was amazing.*

*The doctors are extremely good when you get in.*

*The doctors are very, very good - no complaints.*

*When you get to see a doctor it is brilliant.*

8 people talked about seeing different doctors each time they visit. They think that they should be seen by a doctor who knows them, for more personalised care and continuity.

*Difficult to make appointment with her own doctor who she has seen for years. She understands that there are a lot of other patients now registered at the practice but feels the doctor who has known her for years would be the best for her to see.*

*I rarely get to see the same GP and continuity of care is important to me.*

## Other practice activities

Under this section we will look at all the other comments received.

### Repeat prescriptions

These can be requested in different ways. There was inconsistency in the responses, with some people having no problems with either paper or online, and others not happy. 2 people said things were getting better.

*Prescriptions are OK now but it was higgledy, piggedly for the first couple of months.*

- **Paper request.** Most of the comments were about the changes to where they have to be dropped off (all to Chapel House) and the collection box on the wall outside. People were unsure about the security of the post-box; their personal information was being held in a box on an external wall, and did not drop through into the building. A question was ‘How often is it emptied?’ This leads to the question of the weekend, particularly bank holidays.

*I was stood at the other building and two girls were talking to each other for about 5 minutes then they told me I have to put request in this box.*

*Post box for repeat prescriptions not very secure or robust*

4 people mentioned having to now come down to the practice to put their repeat prescription in, which can be difficult to do if you do not drive.

*I've got no help to get a prescription but sometimes feel too ill to get out.*

- **Online request.** Some people said this worked for them.

*Request repeat prescription online  
- easy*

A couple of people said they had problems getting repeat acute medication [medication that is not automatically on a repeat prescription].

The following points are not specific to either paper or online requests.

*They wanted to change dad's medication of 30 years to something cheaper. Had to insist he got his medication.*

2 people said mistakes had been made, with items being missed off, and/or doses changed without their hospital consultant's advice.

7 people complained about prescriptions not being ready when they expected them to be. Boots had asked 1 person to put in the request a week earlier to the GP to give them time to prepare the medication (takes 3 days) but the GP won't do it early.

*I put a prescription in last Wednesday, it's now Tuesday and it still isn't done. The pharmacy have it ready to make up and I'll have to come back later.*

*My prescription is still not ready from Thursday (now Tuesday).*

Another person talked about trying to order a few items together, but the GP won't let them do this, as the medication is not all due at the same time.

1 person said they would appreciate a reminder that their prescription will be due, when it can only be issued after seeing a GP. This is because they have to book the GP appointment so far in advance.

Some of the comments related to the way a pharmacy packaged medication, or setting up a pharmacy to receive your electronic prescription, or the delivery schedule of a pharmacy.

## Medication reviews

*The GPs don't do a review for medication now. They don't seem to be bothered. It's the same for my wife. We are both overdue.*

*Two weeks ago my prescription for ..... was due but I was told I needed a review. I called in the pharmacy for something else and they told me a prescription was waiting for me. Why wasn't I told that the prescription had been done anyway while I was waiting for the review? I have been without medication for 2 weeks, so now it's like starting to take it all over again.*

## Referrals

12 people were pleased with the way their referral for treatment went.

*The fast-track is fast - 1 month from first appointment to procedure.*

9 people had negative comments to make about their referral, many referring to a lack of communication. Here are some examples:

- **Hard to make initial appointment with the GP.** A referral cannot be started until you have seen a GP.



*I need to see a doctor about ..... to get a re-referral to the hospital, but it's too difficult to get an appointment.*

- Delays by the hospital.
- Results not sent to the GP by the hospital. This delays medication being started.
- Delay in referral leaving GP practice.

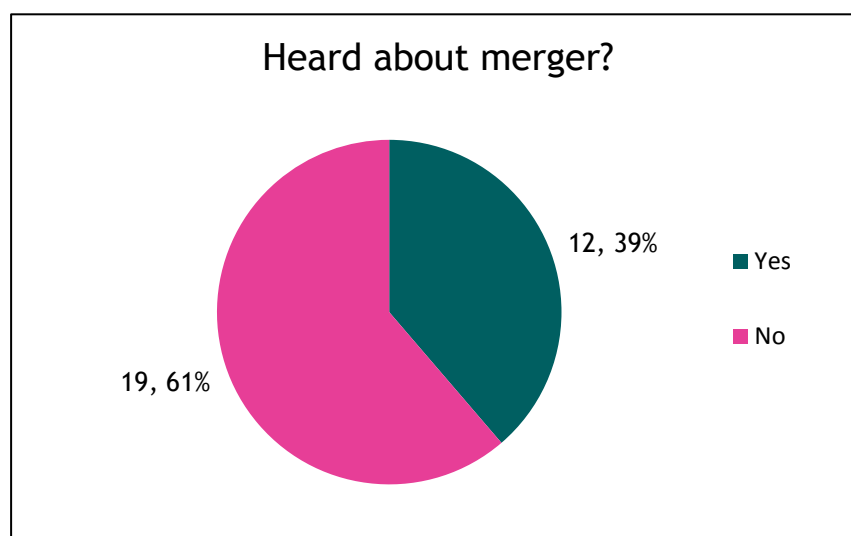
*Not referred by surgery for a scan. It's not been done. I didn't find out until I rang the clinic.*

- Lack of communication between hospital and GP.

*I received a letter from the hospital that a water sample was needed. I dropped one off but they didn't want to accept it because there was nothing on the system requesting one.*

### Communication about the merger

Healthwatch Tameside asked people whether they had received information about the merger before it happened.



Here are some of the comments:

*Communication about the merger was good and open.*

*Rubbish since they joined - no information. They took too much on.*

*The merger was poorly communicated - didn't know what was going on for a long while.*

6 people said they had been told when they visited the practice.

*I didn't know anything about the merger - only found out when I had to go to an appointment at another building.*

*Not enough information, it just happened and then we found out.*

1 person was a staff member from a children's care home and said the manager may have known? A young person had not received anything themselves, but said their parents may have?

The people who did receive a communication before the merger had a letter, email or text.

*Got text message about the merger - I'm fine with that.*

4 people said they had received enough information. 8 people would have liked more detail.

*I got a letter about the merger but there wasn't enough information.*

### **Ashton Medical Group health champions**

These volunteers organise practice activities, particularly community walks.

10 people told us they knew about the champions (9 said they had received texts about the walks). Most of these people said they were not able to walk the distance, and so would not be taking part.

*Get a text but don't go on walks. Nice to know they are on.*

*Get texts from volunteer champions which I pass on to family.*

8 people said they were not aware of the champions.

### **Other comments**

Here is a selection of comments, which do not fit into any of the previous sections.

#### **Positive comments**

*My wife and I are very happy with it. Never had any problems. Been coming about 30 years.*

*Pharmacist saw me when I couldn't get in with doctor - worked OK.*

*They are great in there - going to ring me with an appointment.*

#### **Negative comments**

*A nightmare. Won't describe it because I don't use the language that would be required.*

*Doctors gone down during merger. Appointments, phones - stressful. Prescriptions not ready. Been here 50 years - service gone from 90% to 10%. Might be unkind but seems like they are not really bothered.*

*Friends & family texts - don't reply because don't know who is doing it and might get different treatment.*

*Gentleman refused to talk. He said he is not happy with the surgery but frightened about getting black-listed.*

*Getting an appointment with a doctor is a hassle.*

*Good when you can get to see a doctor. Appointment system difficult to access for the elderly. He is ..... [age], and ..... [condition] so can't easily get to surgery.*

*I'm disappointed. Disgusted with the system. It's not working. The old system was good.*

*It is not accessible or friendly. They have lost the patient connection.*

*It is taking time to settle (after the merger). People don't like change, especially the elderly.*

*Man was angry when he came out of Chapel House. Healthwatch asked if he was OK. He said 'No. This place is ridiculous. Why did they have to change?'*

*They were better when separate. Then I would have given them a score of 9/10. Now I would give them minus 10.*

### **Suggestions made by patients**

*Medical records should be available to see online - I use several hospitals and it would be helpful.*

*The practice should obtain a licence to prescribe medical cannabis.*

*They could use Wilshaw House for keep fit for the elderly. I used to go swimming when it was free, but not now. I might go to activities if transport was provided.*

*They need extra doctors - there are no more than there used to be but a lot more patients. Why do they keep taking on more patients?*

**Parking** - people told Healthwatch Tameside that parking was a particular problem in all the car parks near to the practice. They are driving round and round trying to find a parking space, and are then late for their appointments.

Healthwatch Tameside have themselves noticed that since the opening of Tameside One, including the new Tameside College building, in the summer, all the car parks in the vicinity fill up very quickly early in the mornings, and there are queues of people waiting for a space.

### **Ashton Medical Group questions**

When Healthwatch Tameside met with a GP before we started talking to people, we discussed whether there was anything specific that they would like to find out people's thoughts about. There were two questions:

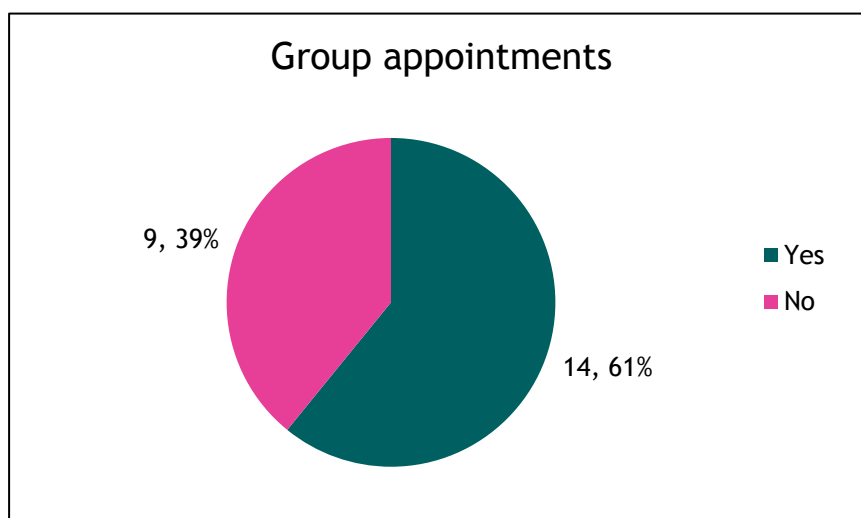
1. What do people think about short educational videos available to watch on the Ashton Medical Group website or in the surgery?
2. What do people think about the idea of group appointments for things like education about a new diagnosis, or a certain condition (e.g. diabetes)?

Unfortunately, Healthwatch Tameside have been unable to get much feedback about the first question. Some people only spoke to us briefly, and many others did not use computers.

Healthwatch Tameside had more success with the second question:

### Group appointments

Here are the responses of the people we asked the question.



The people who thought it was a good idea also said it should only be used for:

- **Education purposes.** This could be about an illness or diagnosis.  
*A good idea for educational information, but not for personal details.*
- **Information sharing.** People could share tips on managing a condition.  
*Could work, speaking to others - could help one another.*
- **Question and answer session.** People might ask questions you haven't thought of.

*I think it will be good. If you had asked me 2 years ago I would have said no, but now I have been to other groups elsewhere about a relative's condition, you get to hear other people with the same condition. You learn a lot.*

It was felt that the group sessions should be a good use of staff time, and make more appointments available to others.

A question was asked about how people who work could be included?

Some of the people who did not want to attend a group appointment themselves (because they wanted to see a doctor and have privacy), said that other people might like the idea.

*Groups won't work for everyone as have own problems.*

*I don't like the thought of group consultations - I need privacy. Not an equal chance to talk?*

*Most people would like group consultations, but I wouldn't.*

## **Conclusion**

A majority of the people who were using Ashton Medical Group on the days Healthwatch Tameside visited, or who provided feedback in other ways between June and September 2019, had concerns they wanted to share. However, whatever they felt needed improving, most people praised the staff across the practice.

The main area of concern was the difficulty people had in making an appointment. Healthwatch Tameside have been told by Ashton Medical Group that changes have been made to the telephone system, and it is being monitored closely. Additional staff have also been employed. This is expected to improve patient experience, by reducing the waiting time when calling the practice. These changes do not appear to have been noticed yet by the people we spoke to. As the changes begin to take effect, to start with people may assume they were just lucky, rather than seeing the shorter waiting time as the norm.

Communication has possibly played a part in the dissatisfaction among patients. Some people say they have not received enough (or any) information about the merger and the changes made during the following months. Some people told Healthwatch Tameside that they still get confused about where to go and what to do.

The feedback about repeat prescriptions is mixed. It is not clear why for many people this '*goes smoothly*', but for others there are delays and/or errors in what has been prescribed.

It is clear from the responses to our final question about a proposal for group appointments, that some people are open to try new ideas, but others do not like to change from what they have always known. How can the patient experience be improved for both groups of people?

Ashton Medical Group know that they still have some way to go before the changes of the past 18 months, and those that are still to come, can be seen to be working. From previous work, Healthwatch Tameside have seen that it takes a long time for people to forget about a poor experience and remember the improvements. The expectations people have can be quite different too.

Healthwatch Tameside hope that the contents of this report will help Ashton Medical Group to review where they are up to now, and make decisions about other changes in the future. With your Patient Participation Group, and other interested patients, solutions could be co-designed/developed, if this isn't already happening.

## Recommendations

The recommendations has been made based on the information contained in this report. There may be other areas where improvements could be made, of which Healthwatch Tameside are not aware.

### 1) Making an appointment

- a) Consider how people who visit reception to make an appointment can do so without everyone around them hearing about their personal health concerns.
- b) Consider how people who work, and cannot ring at 8am, can access appointments.
- c) Consider reducing the length of introductory phone message and options when people ring.
- d) Continue to monitor phone activity throughout the day, and improve where necessary.
- e) Investigate why people are being 'cut off' after a long wait in a queue.
- f) Make sure the neighbourhood hub (extended access) appointments are offered routinely, when there are no more appointments available, or for people who work during surgery hours.
- g) Review whether there are any other options for making an appointment which could be offered.

### 2) Reception and waiting areas

- a) Consider the layout of the reception and waiting areas.
- b) If the booking-in screen is not to be used, consider how people can register that they have arrived promptly, to make sure they are not late for their appointment.

### 3) Online access

- a) Consider whether additional information from the patient's medical record can be made available for patients to see online.
- b) Make sure there are appointments available for people to book online each day.
- c) Offer help to people who want to register for online access.

### 4) Communication

- a) Always tell people which building their appointment will be in.
- b) When appointments are running late, update people in the waiting room with the expected length of delay.
- c) When changes are made (e.g. where to leave prescription requests), consider all the different ways of passing on this information to patients.

- d) When people register their mobile number with the practice, they want to know that they will always get text reminders for appointments.

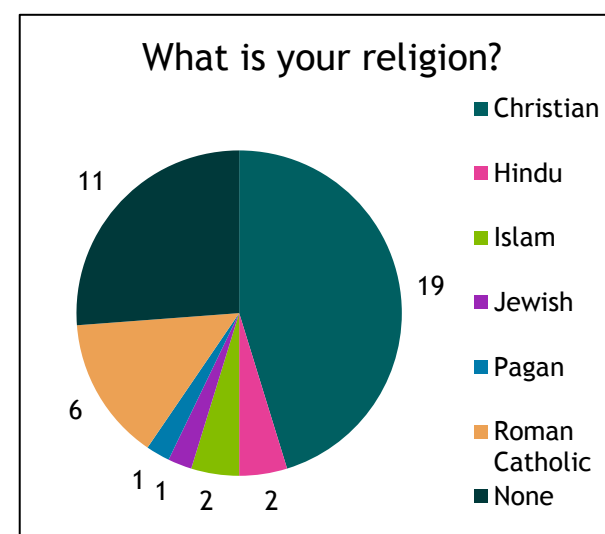
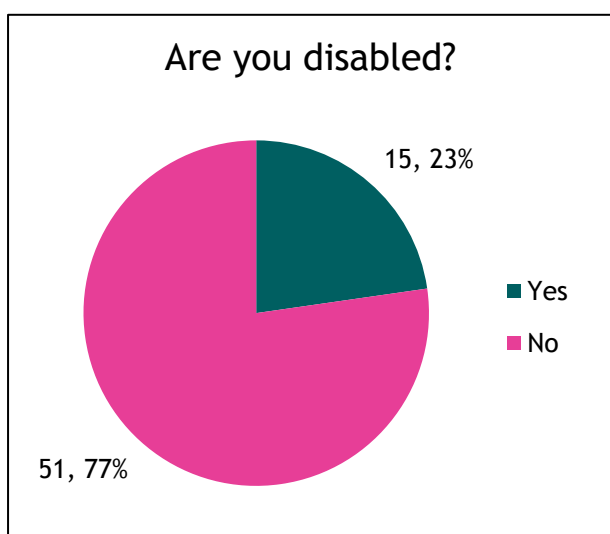
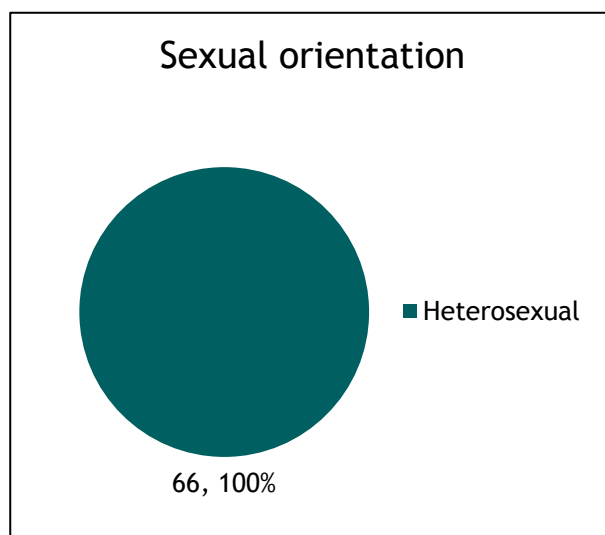
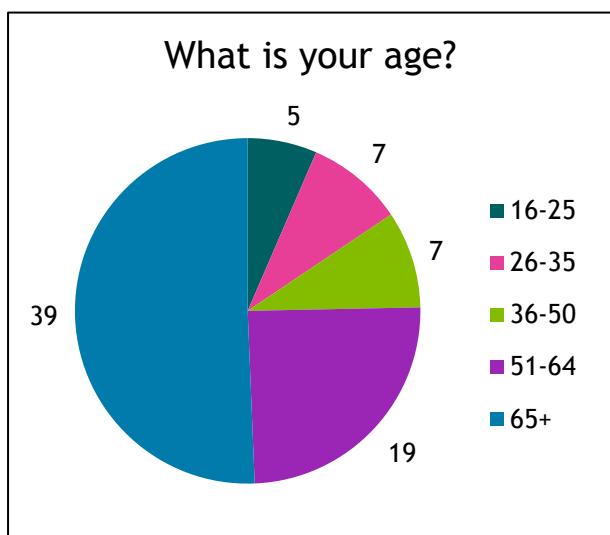
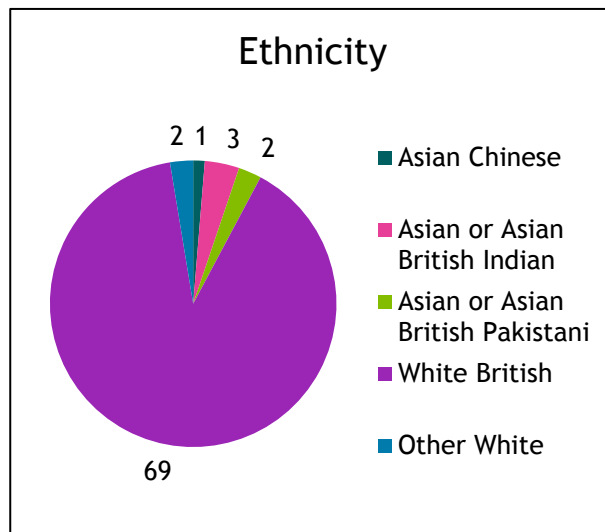
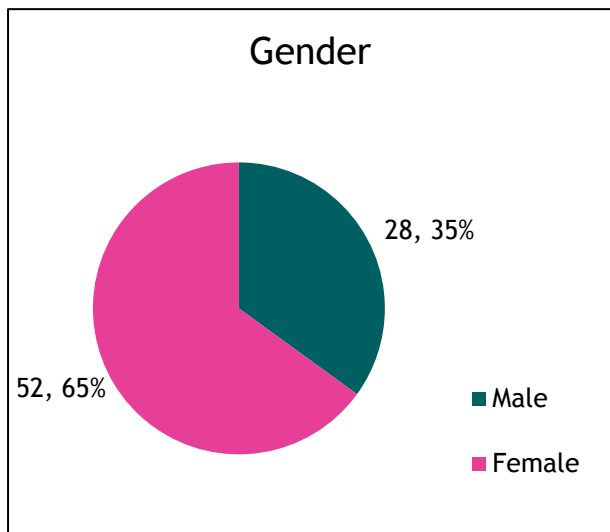
## **5) Prescriptions**

- a) Consider why some repeat prescriptions are not produced containing all the items requested.
- b) Review the location and security of the post box for repeat prescriptions.
- c) Review why some prescriptions are not ready to be collected when people expect them to be.

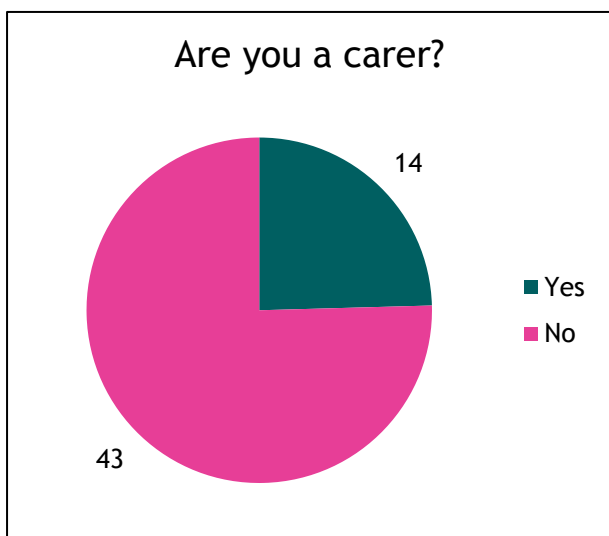
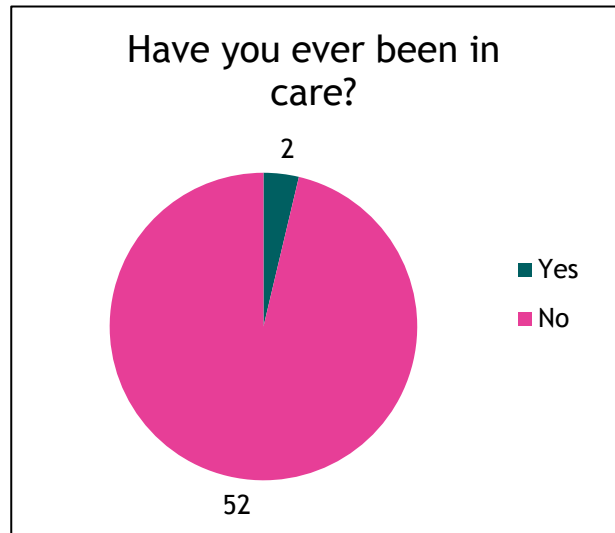
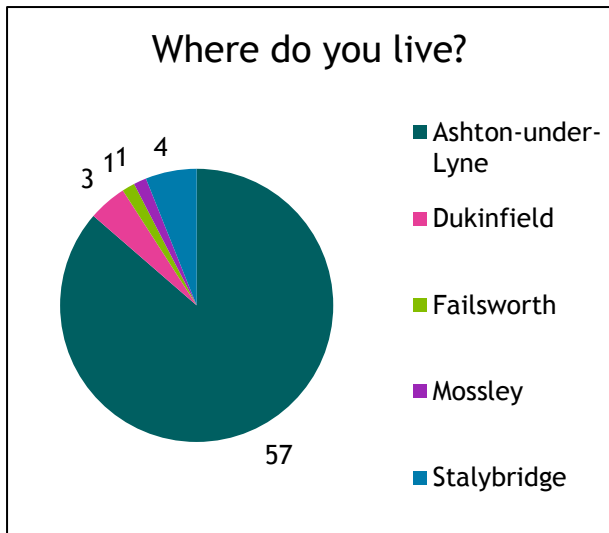
## **6) Parking**

- a) Consider a discussion with Tameside Council regarding the demand for car parking in the town centre, and the impact on attending appointments and accessing services. Other businesses near to the practice may also wish to be involved, e.g. dentists, pharmacies.

## Demographics







## Acknowledgements

Healthwatch Tameside would like to thank everyone for their part in this project, including:

Patients, families and carers who have expressed their views

Ashton Medical Group

Healthwatch Tameside staff

NHS website

Care Opinion website.