

Enter and View – Visit Report

Name of establishment: Cricklewood Health Centre and Walk-in Centre
Britannia Business Park
2 Cricklewood Lane NW2 1DZ

Staff met During Visit: Dr Nicolas Routledge (Medical director)
Ms Sherine Sallion (Practice Manager)

Date of visit: Monday 24th September 2018

Healthwatch authorised representatives involved: Mr Derrick Edgerton
Mr Stewart Block

Introduction and Methodology

This is an announced Enter and View (E&V) visit undertaken by Healthwatch Barnet's E&V Volunteers, as part of a planned strategy to look at a range of care and nursing homes within the London Borough of Barnet to obtain a better idea of the quality of care provided. Healthwatch E&V representatives have statutory powers to enter Health and Social Care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the views of the people using those services. The aim is to report the service that is observed, to consider how services may be improved and how good practice can be disseminated.

The team of trained volunteers visit the service and record their observations along with the feedback from residents, relatives, carers and staff. Questionnaires are provided for relatives/carers/friends who are not able to attend on the day of the visit, but wish to provide some feedback. These are returned directly to Healthwatch. The volunteers compile a report reflecting all of this, and making recommendations. The Report is sent to the Manager of the facility visited for validation/correction of facts, and for their response to the recommendations. The final version is then sent to interested parties, including the Head Office of the managing organisation, the Health Overview and Scrutiny Committee/Adults and Safeguarding Committee, CQC, Barnet Council and the public via the Healthwatch website.

DISCLAIMER: *This report relates only to the service viewed on the date of the visit, and is representative of the views of the staff,*

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visitors and residents who met members of the Enter and View team on that date, and those who completed and returned questionnaires relating to the visit.

General Information

This was a follow up visit to the visits made in January and March 2018 and was arranged with the recently appointed Practice Manager to discuss the Recommendations of those reports.

Their Care Quality Commission January 2018 Report rated the Practice (including the Walk-In Centre) as "Good".

Premises and entrance

The sign for the Health Centre was still only on one side of the entrance and the entrance could easily be missed if coming from the wrong direction.

On our arrival on site, it was noted that there were no obvious signs stating that parking was not allowed and where parking was available. We did see an individual (not a Health Centre user) get out of their car and walk off, and a very short time later the security guard came and issued a ticket. It was noted that the surface from the road to the entrance was in a poor state of repair. The hand rail around the slope to the entrance and the stairs was loose and missing in part, a clear danger to anyone walking along the walkway. Indeed, we were told that this had proven potentially hazardous to a visually impaired patient the previous week. There is a potential Health & Safety issue with concomitant legal liability. We were also told that lighting of the area is not good. Another Health and Safety issue for both patients and staff.

The area is covered by CCTV (provide by the landlord) and the entrance is covered by CCTV from the centre. We assume, but didn't confirm with staff, that both are monitored.

On entering the premises, the plethora of notices that had been present on the facing wall had been removed and the display of notices rationalised. There was also a leaflet display stand with relevant leaflets neatly inserted.

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The premises have undergone a major refurbishment, increasing the number of consulting rooms from three to five and one more by Christmas. The décor was pleasant and there was a wall-mounted TV (on with text) and a digital (Jaytex) board displaying information.

Response to Healthwatch Barnet Previous Report Recommendations

Reporting to Reception, we were asked to sign in and the manager was informed of our arrival. We then went with her to an office where Dr Routledge joined us and we were handed an action plan detailing the response / action to each of the points raised.

1) Work with the relevant authority to improve signage from the main road. Healthwatch Barnet is happy to try and support this.

The centre has publicised the location in local businesses in the area, talked to local councillors to raise the profile of the centre.

2) Ensure that the water dispenser in the waiting area is visible and available to all patients.
This has not been moved from the reception area due to logistical and Health and Safety issues (spillages on floor etc) but patients should see it on registering their arrival, a poster indicating where it is, is now clearly visible and the Jaytex digital sign refers regularly to its presence.

3) Look into the provision of vending machines for hot drinks and snacks, for patients while waiting for their consultation. (This could be more than 2 hours at times.)

This provision is still under consideration.

4) Ensure reception staff give clear information on where parking is available, if asked.

There are ongoing discussions with the landlord about this. Also, consideration has been given to renting some spaces in the nearby B&Q carpark. A map showing where parking is available is being prepared.

5) Ensure that all patients are advised how the process of registering and seeing patients operates. Perhaps a leaflet could be available for patients attending for the first time.

On arrival patients for the Walk-in service are questioned about their presenting problem using a recently introduced proforma which acts as a triage. They are informed at this time as to what the current waiting time is.

6) Introduce a means of updating walk-in patients with waiting times.

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Reception staff update patients of the current waiting time via the digital (Jaytex) display. This is allocated to a designated individual on a daily basis.

7) Introduce a comprehensive system to check staff understanding of e-learning training, and that they can properly apply the training undertaken via e-learning.

An in-house audit system for training has been introduced and regular training meetings implemented.

8) Update the website, to make the service offer clearer to the public and ensure that all information is up to date.

This was an issue for the parent company (Barndoc) and was being pursued. We noted that the current web site makes no reference to the availability or otherwise of parking and the potential for incurring a parking charge. There is also a spelling mistake.

9) Update and organise information on the notice boards to provide clearer up to date information for patients.

This had been done as previously mentioned.

Future of the GP practice and Walk-In Centre

Discussion then took place about the future of the Centre. The centre is on the border of Barnet, Brent and Camden; we were told that about half the patients come from Brent, about 40% from Barnet and 10% from Camden. Barnet CCG have extended both the GP service and Walk-in service contracts until 31st March 2019. The CCG have said that they will give 3 months' notice if closure is to occur.

The centre has had a major refurbishment, has recruited more staff (including a GP) and the patient list is growing. Approximately 70 patients are seen per day as walk-in patients. We were told that GP patients usually able to get an appointment on the same day as requesting one.

If both services are closed (with 3 months' notice) concern was expressed about relocating patients on the GP list and where the patients using the 'walk-in' facilities would go and the implications for the staff.

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Conclusions

It was felt that the recommendations of the previous report within the control of the Health Centre Staff had or were being actively being acted upon.

We also appreciate that it is difficult to keep staff motivated when faced with potential closure.

Recommendations

For Healthwatch Barnet:

1. To liaise with the landlord and any relevant authorities such as Barnet Council, to improve the surface over which people walk to get from the pavement to the entrance, and to repair the handrails and to improve the lighting.
2. To identify who is responsible for addressing the various Health and Safety issues that we have raised and request an answer as to why they have not been immediately addressed.

For Barnet Clinical Commissioning Group:

Healthwatch Barnet will liaise with BCCG to request urgent clarification on:

1. Whether liaison has taken place with Brent and Camden Clinical Commissioning Groups about the contract end date of end March 2019 Whether it is planned to extend the contract for the GP surgery and Walk-In Centre.

Response

To enable consultation to take place with patients and other stakeholders, including Healthwatch, the separate contracts for the NHS Walk-in-Centre service and the GP APMS contract for registered patients have been extended to 31st March 2020.

NHS Barnet CCG is the responsible Commissioner for the Cricklewood Walk in Service; NHS England is responsible for the GP APMS contract for patients registered with the practice.

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Both Brent and Camden CCGs are aware of the extension of the contracts until 31st March 2020 to enable consultation to be undertaken with patients and other stakeholders. Particular liaison is taking place with Brent CCG, which recognises about 50% of patients registered with the practice or using the walk-in centre, are Brent residents.

A consultation on the future of the GP APMS service is being undertaken by NHS North Central London GP Commissioning & Contracting and runs from 30th April – 19th July 2019

A consultation on the future of the Walk in Service is planned for later in the year.

2. Whether the contract will be extended or whether it is planned to close the surgery and/or the Walk In Centre.

Response:

The contract for both the Walk-in –Centre and the separate GP APMS contract for patients registered with the practice are extended until 31st March 2020, to enable patient consultation and stakeholder engagement to be undertaken. Decisions in respect of both contracts are subject to careful consideration including the consultations that are to be undertaken.

3. Why only three months' notice of closure is required. If the Walk-In service is closed, we are concerned about the impact on other services such as Royal Free A+E.

Response:

The Commissioner notice period to the service provider for termination under the contract of the Walk-In Centre states a minimum of three months' notice is required

There are two other WiC services within the borough of Barnet which offer services for minor illnesses and injury until 10pm, seven days a week, that in addition also have diagnostic facilities. In addition to this

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the CCG has commissioned an additional 48,000 GP appointments across the borough. The CCG is keen to work with Healthwatch and others to ensure patients use primary care.

4. How patients will be informed and directed/guided to other services.

Response:

There has not been any decision made by the CCG to close the Cricklewood Walk-in Centre service (WiC). A consultation on the proposal to decommission the Cricklewood WiC service will be undertaken which will inform future commissioning arrangements. If there was a decision to close the Walk-in-Centre service, then the CCG would draw up a plan to ensure patients are informed and appropriately directed to other alternative services

5. If the GP is closed, what guidance will be given to patients. We have previously found the closure letters from NHS England to patients misleading and confusing. To date, NHS England has not confirmed that it will provide clearer explanations and guidance to patients in Barnet.

Response:

No decision has been made to close the GP practice. The consultation being undertaken is to look at the options for the practice– re-procurement of the contract or a dispersal of the registered patient list to other local practices. Patient consultation letters contain further information. But the CCG notes the concern of Healthwatch and would be keen to discuss closure letters IF such a decision was taken.