

**GP & Dental Access in Harrow Report  
&  
Mental Wellbeing Report**

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# Background

- ❖ The role of Healthwatch is to gather intelligence / evidence, to check and challenge service delivery, identify where services need to change and to make recommendations to the Clinical Commissioning Group (CCG), Council and other health and social care providers
- ❖ Access to General Practice's (GP's) and Dental Services is an issue that we are increasingly hearing about, our recent report can be found here:  
<https://www.healthwatchharrow.co.uk/insight-and-reports>
- ❖ There is general awareness of the issues that need to be addressed. Our report was written in the spirit of collaborative working, knowing how hard people are working due to the pandemic but also recognising that patients have the right to access services
- ❖ In April we shared our Quarterly Trend Analysis Reports for Q4 - January to March 2021. It is important to note that these reports are only as reflective as the data we collect and people are more likely to raise negative feedback than positive. The GP Patient Experience Report - April 2020 to March 2021 is based on the experiences of 561 people.  
[http://healthwatchharrow.co.uk/sites/default/files/gp\\_patient\\_experience\\_01.04.20\\_-\\_31.03.21.pdf](http://healthwatchharrow.co.uk/sites/default/files/gp_patient_experience_01.04.20_-_31.03.21.pdf)
- ❖ In summarising the key issues and recommendations we would like to highlight the general concerns raised do not relate to the quality of care that people receive, the issues that need to be addressed relate to accessing services.



# Key points re GP & Dental Access:

- ❖ Feedback suggests that people are broadly satisfied with customer service (staff attitude and quality). While service access remains an issue for many - complaints about ability to book appointments, waiting times and lists have all marginally decreased this quarter. Administration also remains an issue, with more complaints recorded. Overall sentiment is 60% positive, 39% negative and 1% neutral.
- ❖ Accessibility on appointment bookings has improved in quarter 4 by 4%.
- ❖ Positive feedback remains low at 32% (figure 4.1.3 in the report).
- ❖ Health Alliance PCN appears to have a particular issue with 92% of feedback negative (figure 4.1.4 in the report). The following GP surgeries are all part of the Health Alliance PCN: Aspri Medical Centre, Belmont Health Centre, Stanmore Medical Centre, Streatfield Medical Centre, Circle Practice, Enterprise Practice.
- ❖ Bacon Lane Surgery, GP Direct and Mollison Way Surgery receive a notable volume and ratio of positive feedback, while others receive a notable volume of negative comments particularly regarding appointment booking.
- ❖ The ability to obtain timely appointments is a problem for many, with accounts of congested telephone lines and waits of days (or more) to see a clinician. Choice is also an issue, with some patients not comfortable with, or able to undertake remote appointments. However, sentiment about booking and waiting has improved by 11% this quarter.
- ❖ More clarity and promotion is required for patients around how to make appointments, for many patients they start with a phone call not the website. So therefore, awareness needs to be raised with some patients on how the system is currently working.



## Summary of key issues:

- ❑ GP Telephone systems and online booking systems are not efficient and do not meet the demands / needs of patients needing to contact the surgery. For those experiencing difficulty with access, over half (58%) cite telephone related issues, while over a third (42%) suggest a problem with online booking. *“ I dread needing to make an appointment to see my doctor”*.
- ❑ Commissioning of NHS Dental Care is not meeting current demand. *“My usual dentist has said I am no longer registered with them and cannot register as an NHS patient at this time.” “NHS practice has now told me that I have to go private.”*
- ❑ The Black, Asian and Minority Ethnic communities are disproportionately affected in accessing services.

Those with Mental Health conditions, Carers, Black, Asian and Minority Ethnic respondents and those of working age are disproportionally impacted, in terms of access, confidence across platforms and overall satisfaction.
- ❑ Accessibility is particularly an issue for those patients with language, mental health and learning disabilities.



# Recommendations

1. CCG to work with the Primary Care Networks and Harrow GP surgeries to put in place improved, quicker and more accessible phone and online appointment booking systems to reduce patient waiting times and cancelling appointments, and to review the effectiveness of their GP texting service in reducing missed appointments.
2. NHS England to review the commissioning of NHS Dental Care in Harrow, to ensure commissioning is kept up to date with demand and that the dental contract is fit for purpose. For example, one element is the Units of Dental Activity (UDA'S), as each dental practice is commissioned for a set number of UDA's and in Harrow this is not meeting the current demand.
3. Primary Care Networks, GP practices and Dental Surgeries to work collaboratively with the Black, Asian and Minority Ethnic communities to further understand the issues which are affecting these communities in accessing services e.g. language barriers, lack of digital access etc. and to put a plan of action in place to address these issues.
4. CCG to work with the Primary Care Networks and Harrow GP surgeries to improve accessibility particularly for those patients with language, mental health and learning disabilities.



# Responses to report:

## Clinical Commissioning Group Response:

- The CCG Executive team have agreed that they will support General Practice in their transition back to normal business arrangements, supporting access, particularly telephone access to services, will be a critical component. They will work with Practices to look at what the right capacity and balance of virtual and face to face conversations will be within this.
- The issue of GP access was discussed at a GP Forum, highlighting the findings of the HWH report, and practices were asked to consider the access challenges that patients are facing as part of their recovery plan. Many Practices have highlighted that telephone access has been a significant problem over recent months due to the volume of patients calling with COVID vaccination queries. As a result, the CCG have worked with Harrow Council to promote the Harrow contact centre as a place local people can call with queries about COVID vaccinations.
- Looking at how extended access GP arrangements can support some of the issues that patients are facing. Encouraging Practices to re-engage in using these extended access services for Harrow patients, as well as looking at how they can provide additional access to essential services, such as NHS Health Checks, they may have been paused over the COVID surge period.



## Responses to report (continued):

Where specific issues were highlighted about Practices, this has been shared with them:

- ❑ Concerns relating to Stanmore Medical Centre have been raised by the CCG Executive team and an action plan put in place to address the key issues. The Q4 report was too early to assess the impact of these changes. The Practice (to date) have made progress in engaging with Patient Group representatives to discuss their action plan, communicate changes to the way telephone/appointment systems will operate and raise local awareness on changes made to their digital points of contact.
- ❑ The CCG raised concerns arising from the Q4 report with the Pinn Medical Centre, who acknowledged the findings and responded formally via a letter to the CCG Executive. A meeting between the Practice and the CCG Primary Care Team is due to take place on 2nd June to discuss the practice response and a plan going forwards.
- ❑ Given the on going concerns with a practice in the Health Alliance PCN, the CCG reached out to the PCN Clinical Director to look into the findings of the Q4 report and are awaiting a statement from them on how the PCN will collaboratively address these matters.



# Responses to report (continued):

## NHS England:

- Responded to state the context is that the NHW General Dental Services are currently operating a significantly reduced capacity due to the pandemic and the controls now in place set out by the Chief Dental Officer for England and Public Health England.
- If a patient is seeking an earlier routine NHS appointment than is currently available, a private appointment may be offered by the practice.
- The response did not address the recommendation to ensure commissioning is kept up to date with demand to ensure NHS patients are receiving the service they are entitled to. This is national issue, not specific to Harrow, which Healthwatch England are escalating.

## CQC Response:

- They are aware of access concerns continuing across NWL which includes Harrow. It does appear to be largely based around the new remote methodologies implemented at pace.
- They are monitoring this risk in line with other regulation monitoring activity. This includes provider reviews and if required inspection activity.



# Harrow Mental Wellbeing Report

## Report conclusions:

- ❖ Accessing out of hours services is cited as an issue along with the consequences of digital exclusion.
- ❖ Stress, worry and anxiety are cited as key areas of concern as a result of isolation, demanding workloads, risk of infection, poverty and job security.
- ❖ The easing of restrictions will certainly improve some of the key issues identified regarding loneliness and isolation, as people will be able to meet with friends and family and be able to take up their hobbies etc.
- ❖ The longer-term impact places a greater reliance on support services being available and people being aware of where they can get support. This relates to local community support through Community teams, GP's and the voluntary sector and also through Central and North West London NHS Foundation Trusts (CNWL) who care for people with a wide range of physical and mental health needs.
- ❖ There needs to be greater communication of the support that is available and future commissioning of services needs to meet the increasing demand.

*“Appreciate that it is not just formal mental health services which contribute to a person's mental health, it is also clubs like the bowling clubs which contribute hugely to people having a positive outlook on life.”*



# Next steps: Response from CNWL

- ❖ All Community Adult Hubs are offering Patients' choices for face to face appointments, Telephone Consultations and Telemedicine. We have set target for our face to face contacts to go up gradually.
- ❖ The Psychotropic Medication and Physical health Clinic for Depot and Clozapine has remained opened through the Pandemic and Patients attend Bentley House as per usual and where necessary we facilitate home visits and we are carrying on with Physical health checks.
- ❖ We have invested through the VCSE project and currently Dawn is providing Social inclusion groups 2 days a week Wednesdays and Sundays and Ignite due to also offer services in the coming weeks.
- ❖ We also have the option of referring our Patients to the Coves for extra support during Crisis.
- ❖ We have three Social Prescribers in the adult hubs and going forward we expect their relationship to strengthen with Primary Care.
- ❖ We have received new LTP funding for new posts.
- ❖ Our Group therapies are more formalised now across a number of mental health conditions and we follow the Trauma Informed Approach.



## In Summary:

- CCG have responded and are taking steps to address the issue of access to GP Surgeries
- Issues relating to specific GP Practices are being addressed with a plan of action being put in place
- CQC are monitoring
- NHS England have not responded on the issue regarding commissioning not being kept up to date with demand
- Working in partnership we all need to build in improving communications for those communities who suffer from the greatest inequalities
- Mental Health services need to be commissioned to meet the increased demand.

