Gunnery House

9-11 Gunnery Terrace

London

SE18 6SW

020 8301 8340 or info@healthwatchgreenwich.co.uk

Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012. Within this legislation Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider/commissioner.

**Report & Recommendation Response Form**

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| Report sent to: | To provide CCG Response: HOWDON, Maria (NHS SOUTH EAST LONDON CCG) [maria.howdon@nhs.net](mailto:maria.howdon@nhs.net)  To provide LMC response: PATEL, Nayan (BLACKHEATH STANDARD PMS) [nayanpatel@nhs.net](mailto:nayanpatel@nhs.net)  & TRAN, Tuan (VALENTINE HEALTH PARTNERSHIP) [tuan.tran@nhs.net](mailto:tuan.tran@nhs.net)  To provide Federation response: JAMES, David (GREENWICH HEALTH LIMITED) <[davidd.james@nhs.net](mailto:davidd.james@nhs.net)>  To provide LGT Response: MWEBAZE, Jeni (LONDON AMBULANCE SERVICE NHS TRUST) [jeni.mwebaze@nhs.net](mailto:jeni.mwebaze@nhs.net) & TALL, Robin (LEWISHAM AND GREENWICH NHS TRUST) [robin.tall@nhs.net](mailto:robin.tall@nhs.net)  To provide dental response: Martin Skipper [martin.skipper@ldc.org.uk](mailto:martin.skipper@ldc.org.uk)  To provide RBG response: [Lisa.Wilson@royalgreenwich.gov.uk](mailto:Lisa.Wilson@royalgreenwich.gov.uk) & Maxine Bruniges [Maxine.Bruniges@royalgreenwich.gov.uk](mailto:Maxine.Bruniges@royalgreenwich.gov.uk)  To provide Circle MSK response: [msk.greenwich@circlehealthgroup.co.uk](mailto:msk.greenwich@circlehealthgroup.co.uk) |
| Date sent: | **28/3/22** |
| Title of Report: | **Feedback Report 2021-22 Summary** |
| Response | If there is no response, please provide an explanation for this within the statutory 20 days (by 26th April 2022)  **Please note: This form and its contents will be published by Healthwatch Greenwich.** |

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| Date of response provided | 12.4.2022 |
| General response[[1]](#footnote-1) | Greenwich LMC is grateful for the sharing of this informative report.  This is a joint response from myself (LMC Chair) and Dr N Patel (LMC Vice-Chair). Our comments are in *italic.* |
| Response to recommendation no: | Recommendations:  1. Standardised pre-recorded message whilst waiting, informing service users of their number on the queue, to call later in the day if concern is  not urgent, menu options to divert calls according to nature of request, recommending using econsult to book appointments and giving an alternative for those unable to use digital tools.  *Support the principle, but practices should be allowed to tailor the message.*  2. Call handling training to include explanation of telephone triage to patients, for example, “Hello, my name is Jenny, I’ll need to ask you a  few questions to make sure you get the help you need…”  *Again, support the principle, and suspect that many practice have this as part of Reception induction.*  3. Deaf awareness training for practice staff.  *Yes, although may be more useful as part of overall disability awareness training (which I suspect many practices already encourage staff to undertake already)*  4. Information about how to complain (including response times, named contact, and process) to be made more visible and accessible for patients both inside practices (leaflets/posters) and on practice websites  *A reasonable expectation, and I believe CQC already requires practices to have a complaints policy in place: “…*but it is important that your complaints policy is**clear and accessible**, andthat youhave a proactive, fair and transparent process for dealing with any complaints.”  Recommendations  5. Raise awareness amongst patients of alternatives to econsult, for those unable to use digital tools  *Perhaps on the website and through the telephone messaging if not done so already.*  6. Include facility to book double appointments, or make it easier to find on the form  *Perhaps, best for further 'double appointments' to be determine by clinician, as can have significant impact on capacity, and equity for other patients.*  7. Offer patient 3hr time slots for call backs.  *Callbacks on the day are for urgent problems, often by the Duty Doctor. Difficult to set a time slot. Happy to allow practice to determine this service.*  8. Send patient SMS and email informing them when to expect to receive a call back.  *Most practice has a SMS appointment reminder system. A further e-mail seems unnecessary duplication as most Reception staff are required to checked the patients mobile contact at the time of booking.*  Recommendations  9. SMS sent to service users informing their prescription is ready to collect  *This would be down to the Community Pharmacy.*  10. Informing service-users of how long it will take to issue a prescription to a pharmacy  *This is usually part of a practice policy and agree that it needs to be communicated, via website, or usually verbally when a request is put in.*  Recommendations  11. Timely acknowledgment, so service users know their referrals have  been sent to relevant departments  *This should have been done within the consultation. Or if done outside the consultation, reasonable for the patient to be informed (e.g via SMS).*  12. Service users are made aware of how to raise concerns if they feel they have not been listened to, or their concerns have not been considered  *See response to Recommdation 4 above.*  Recommendation  13. Raise awareness of accessible information and implications of the Equality Act in service design and delivery for health and care staff  *This seems part of 'Equality, Diversity, and Inclusion' training recommended.*  14. Provision of appropriate ways to contact health and care services for those with additional language needs, for example - use of Deaf  friendly apps.  *See response in 13.*  15. Clear information for service users on how to access translation/interpreting services.  *Reasonable. May be displayed in waiting room and on website*.  Recommendation  16. Standardisation of information on complaints procedure on GP websites that is clear and easy to find  *See answer to Recommendation 4.*  17. Distinction made clear between ‘feedback’ and ‘complaint’ and how any concern raised will be dealt with.  *See comment to above- this can be highlighted as part of the practice policy.*  18. Complaint information to be visible and accessible to service users visiting GP practices, information displayed at or near the reception  desk, as well as in the waiting area.  *See comments to Recommendation 4. Happy for practices to determine their internal policy.* |
| Response to recommendation no: |  |
| Response to recommendation no:  *Please add additional rows as required.* |  |
| Signed: |  |
| Name: | Tuan Tran |
| Position: | Greenwich LMC Chair |

1. Please expand boxes as needed for your response. [↑](#footnote-ref-1)