



**Details of visit**

**Service address:**

**Service Provider:**

**Date:**

**Authorised**

**Representatives:**

**Complaints Procedures Visit**

**Church Path, East Cowes, Isle of Wight, PO32  
6RP**

**East Cowes Medical Centre**

**21/05/2015**

**Maurice Dix and Philippa Daley**

**Acknowledgements**

Healthwatch Isle of Wight would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

**Disclaimer**

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, it is only an account of what was observed and contributed at the time.



**What is Enter and View?**

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.



## Purpose of the visit

This visit was arranged as part of the ongoing complaints work plan. The visit was designed to look at the accessibility of the complaints procedure throughout the GP surgery.

## Methodology

The visits took place unannounced. The GP surgery were made aware that healthwatch would undertake visits related to the complaints workplan and were given a 2 week window but were not informed exactly when, or what the visits would involve.

The visits framework contained 2 sections.

Section 1 looked at the accessibility. The walls, leaflet stands, desks, tables were observed to see whether information was available informing people of the complaints procedure.

Section 2 focused on staff knowledge of the complaints procedure. Staff members were approached and asked questions related to making complaints and their comments recorded.



## Results of Visit

### Accessibility

#### *Complaints Procedure Posters and Leaflets*

Throughout the surgery no complaints posters displayed.

Complaints leaflets were available from the receptionist.

The complaints leaflets were easy to understand and the panel felt they would know how to raise a complaint based solely on the information provided within the leaflet, including how long the process would take.

The text size within the leaflet was not readable with ease.

There was nothing to indicate that the leaflets are available in any other format such as another language or braille.

Throughout the surgery there were no independent advocacy services being promoted, however there was reference to CAB as an independent source of advice.

Healthwatch Isle of Wight materials were on display in this surgery.

#### **Staff Conversations**

During the visit the panel asked 4 staff members how to make a complaint. They were consistent in their responses and stated that initially staff members would try to resolve and issues. If they were unable to do so they would refer the complaint to the practice manager or the senior GP and would refer to PALS if the complaint needed investigating independently of themselves.

Complaints can be raised on behalf of staff members and relatives and verbal complaints are accepted.

All 4 staff members were confident in their responses and were welcoming and friendly towards the panel.



## Recommendations

Healthwatch Isle of Wight Recommends the following:

1. Posters should be created and displayed throughout the practice. They should clearly state all the information a person would need to make a complaint, (including potential timescales involved)
2. All posters and leaflets should be available in other formats upon request.
3. Independent advocacy should be widely advertised throughout the surgery and included on the GP designed posters and leaflets to ensure service user are aware they have a choice to be supported with the complaints process.

