

Dear Sir/Madam,

Response to Healthwatch Visit

I refer to your visit on 20th January 2016 to Central Surgery.

Please find enclosed our responses to your recommendations;

1) Telephone Bookings – since your visit we have increased our available online bookings since your visit and have had a recent drive to encourage patients to sign up for Patient Access Online to enable them to book a GP appointment online so they do not necessarily need to call the surgery at peak times.

We have also approached our network provider to amend our telephone messages so that patients can get through on a separate option to make appointments only. Another message will be added to ask patients calling for test results and non-urgent matters to call after 11.00am so to free up the receptionists to be available to make appointments with patients over the telephone, especially in the early morning.

In addition, I have asked for YHC's IT Department to co-ordinate and install additional power points where they possibly can, with the Landlord's consent, in the 'back office' of reception so we can have additional phones and computers installed for staff to take telephone bookings.

2) As mentioned to the Healthwatch representative on the day of the visit, we had recently migrated from the VISION clinical system to the EMIS clinical system. This has resulted in lengthy arrangements with various contractors and sub-contractors to fund, erect and connect a new check-in machine that is compatible with the new clinical system. After several delays by the various parties they have now advised me this is scheduled to be complete and up and running by the end of March 2016.

3) Please find attached a photograph that shows that signage has now been displayed on the TV in Central Surgery's waiting room. Please note only one screen belongs to Central Surgery and that the additional screens around the building belong to other practices and departments who are tenants in the building.

4) Additional information has now been added to the plaque in the display cabinet explaining what is meant by an 'Imperial College London Academic Practice.' Please see the photographic evidence attached.

5) All new mums have contact with midwives attached to Central Surgery, prior to and during the birth process. A one hour 'new birth' visit is made by a Health Visitor to mother and baby 10 – 12 days following delivery. This will include advice on Child Benefit and Healthy Start Vouchers. Nutritional advice will also be given on both breast and formula feeding. If additional support is needed we have an in house dietician who the GP will refer the new child and mother to. This will be discussed in a consultation with the GP.

Health Visitors will remain in contact with the family on a regular basis (usually via the baby clinics) and will signpost the family to any other services which may become necessary such as Social Services, the DWP for further financial help or suggest a further visit to a Central Surgery GP.

The attached letter (baby boy version) is an example of what is sent from the surgery to the parents welcoming their new baby, reminding them to register their child as a patient at the surgery and to make an appointment for the six week check.

6) A further recommendation was to put up a notice in the disabled toilet about how to lock the door. The building was passed Disability Discrimination Act compliant in 2013 and to date there have been no complaints regarding the locks on the disabled toilets. As tenants of the building we are unable to put up fixed signage that requires drilling holes without the landlord's consent. When I made the suggestion for signage to be put up, the landlord's response has been that 'it may be offensive to place such signage in a disabled area.'

7) In response to your recommendation for the use of air fresheners in the toilets at Surbiton Health Centre, there is already a mechanical air ventilation system installed in each lavatory that turns every nine seconds to ventilate the WC areas. This is in accordance with building control requirements.

Regrettably, aerosols are considered a fire hazard and also as the toilets are shared with substance misuse clients from Wellbeing they are not an appropriate alternative. They can also cause breathing difficulties for some

people so the policy is to avoid the use of aerosol sprays at SHC. We have considered using the slow release gel type of fresheners; however they would need to be placed in a way that could not be accessed by children using the facilities. This again is not physically possible with the restrictions placed on the tenants in SHC to position them, as it would require shelving that would in turn require drilling the walls which we are not permitted by the landlord to do.

I hope that you are assured by our responses. Please do not hesitate to contact me further if there is anything you would like me to clarify.

Kind regards

Kerry Essop

Practice Manager

