

# ENTER AND VIEW

## REPORT



BIRCHILLS HEALTH CENTRE

7<sup>TH</sup> & 9<sup>TH</sup> JULY 2025

<b>1 Contents</b>	<b>Page</b>
<b>2 Introduction</b>	
2.1 Details of visit	3
2.2 Acknowledgements	3
2.3 How we collected the data	3
<b>3 What is Enter and View?</b>	
3.1 Purpose of visit	4
3.2 Strategic drivers	4
<b>4 Overall summary</b>	5
<b>5 Methodology</b>	5
<b>6 Summary of findings</b>	
6.1 Overview	6
6.2 Premises	6
6.3 Services Offered	7
6.4 Staffing	7
6.5 Staff interaction	7
6.6 Patient interviews	8 - 10
6.7 Staff interviews	10 - 12
<b>7 Recommendations</b>	
7.1 Examples of best practice	12
<b>8 Service provider response</b>	13 - 14

## 2 Introduction

### 2.1 Details of visit

As the Practice Manager would not be available on the day of the main visit. Tom Collins (Healthwatch Walsall staff member) visited on the 7 July to undertake the Practice Manager and staff interview as well as completing an environmental/facilities check.

Name of GP service	Birchills Health Centre
Service provider details	23-37 Old Birchills, Walsall, WS2 8QH Telephone: (01922) 614896
Opening hours	Monday - Friday 8.00 am - 6.30 pm. Extended hours Thursday 6:30 pm - 19:30 pm
Date and time of visits	7 July 2.30 pm & 9 July 2025. 9.00 am - 12 noon.
Authorised Representatives (ARs)	Tom Collins (HwW Staff) Richard Jolly (AR Volunteer Lead) Salma Aftab (E&V AR Volunteer)

### 2.2 Acknowledgements

Healthwatch Walsall would like to thank the service provider, staff, service users and their families for contributing to this Enter and View visit, notably for their helpfulness, hospitality, and courtesy.

### 2.3 How we gathered the data

This report is based on our observations on the day and answers/experiences shared by patients to a set questionnaire that was used.

Patients were asked if they wished to take part whilst they waited for their appointment. They had a choice as to whether they wished to participate.

Responses were collected and the paperwork was later collated to establish what people told us. Staff were interviewed in the same manner albeit a different day.

## 3 What is Enter and View

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives Authorised 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 if applicable.

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 View visits are not intended to identify safeguarding issues specifically. 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 staff member wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission, where they are protected by legislation if they raise a concern.

### 3.1 Purpose of visit

We wanted to understand how this service delivers a quality service and how this service is received by its patients. The surrounding area has a rich cultural mixed background with a significant amount of new build properties that have been built recently and increasing possible patient numbers.

### 3.2 Strategic drivers

There are almost 60 GP services in Walsall that serve the public. We strive to visit a number of mixed service types i.e. GP services, Care and Nursing Homes and primary care services e.g. Pharmacies.

The majority of service user experiences are based around GP services and GP access. Therefore, our main areas of Enter and View are largely based around GP practices.

## 4 Overall summary findings

- The premises appeared well maintained and clean.
- There is a small car park, but on-road parking is also available.
- Although we were told that there is a hearing loop in place, there was no signage to indicate that it was available.
- The most favoured way of communicating with the GP was by telephone.
- Most patients felt that getting an appointment was positive. However, one patient told us it took a couple of weeks.
- Patients use various methods for booking appointments such as telephone, online and walk-in appointments.
- Some patients expressed the need for more evening appointments as they worked late.
- Patients felt that they are listened to by doctors.
- Almost two thirds of patients had not heard of 'Extra GP Appointments' (an alternative GP access pathway).
- There were many positives about the service raised. The majority of patients felt getting an appointment quickly is a big positive.
- There were a few negatives raised. Some of those were around availability of early/late appointments for people that work.

## 5 Methodology

1. These were announced visits.
2. On the first visit carried out on 7 July we spoke to the Practice Manager and a member of staff. On the second visit carried out on 9 July we spoke to the patients.
3. Initially the Practice Manager was interviewed, followed by a staff member interview who was based on reception at the time.
4. Demographics: We spoke to a mix of patients from the local diverse community.

The Authorised Representatives arrived at 9:00 a.m. and actively engaged with waiting patients/relatives between 9:00 a.m. – 11.00 a.m.

On arrival, the Authorised Representatives introduced themselves to staff, and the visit details were discussed and agreed.

The Authorised Representatives used a semi-structured questionnaire when talking to patients on a one-to-one basis, mainly in the patient waiting area. Waiting patients and relatives were approached and asked if they wished to take part in a short questionnaire

relating to their experiences of using said GP services. It was made clear to patients that they could withdraw from the conversation at any time especially if they were called in for their appointment. They could continue to completion if they wished when they had finished their appointment.

## 6 Summary of findings

### 6.1 Overview

The GP service was registered with the Care Quality Commission (CQC) on the 13 August 2019. It has not yet been visited or rated.

We were told by the Practice Manager that service provides care to approximately 7,000 patients. The local demographic is varied/mixed.

A number of new properties have recently been built close to the location of the Health Centre.

We noted patient information leaflets were available in several languages.

### 6.2 Premises

The Centre entrance is via lockable metal gates, and a metal fence fronts the car park and property. There are approximately 12 car parking spaces of which one is marked for disabled use. There is a further small car park for staff use to the side of the premises.

The exterior of the property appeared to be well maintained. Access to the main entrance lobby is via a ramp with a handrail. There is CCTV in operation to the exterior and interior of the building.

Entry to the reception and patient waiting area is via two internal glazed doors. We noted that the one door had a crack in the glass.

There is a reception area/desk to the right and staff are seated behind a glass partition. Staff greeted patients and asked for details for their visit. There appears to be limited privacy as the patient seating area is very close by.

There is an electronic self-booking in system with a hand sanitising unit on the wall. This was tested and was dispensing sanitising solution.

There is an internal lift and stairs to the upper floor.

Consultation rooms run off the lower corridors and upper floor corridors as well as an administration and Practice Manager office based on the upper floor.

There are two patient waiting areas. The main waiting area is on the ground floor with seating for approximately 15–20 patients with room for a person with a mobility scooter or wheelchair. The upper level waiting area is a lot smaller offering reduced waiting capacity. The interior appeared to be clean and tidy, and décor appeared to be maintained.

## 6.3 Services offered

The service has a dedicated website, link to the site: <https://www.birchillshc.co.uk>

As taken from the practice website the following services and clinics are available:

- Well Person
- New Patients Checks
- CHD
- Diabetes
- Asthma
- Teenage Screening
- Family Planning / IUCD
- Antenatal / Postnatal
- Minor Surgery – Joint Injections
- Smoking Cessation
- Covid & Flu vaccinations
- Travel Immunisation
- Ear Syringing
- Obesity / Diet and Exercise advice
- Stress Management
- Minor Illness Assessment
- Maternity Services
- Well Baby Clinic
- Contraceptive Services
- Mental Health Nurse
- Travel Vaccinations

\*Home visits can be arranged for housebound patients.

## 6.4 Staffing

Role/Title	Number of staff
GP's	3 Partner, 2 Salaried, 2 Registrar
Practice Manager	1
Reception/Administration staff	5 mix of full and part time
Business Manager	1 half a day per week
Advanced Nurse Practitioner (ANP)	1
Community Psychiatric Nurse (CNP)	1 visiting 1 day per week
Health Care Assistant (HCA)	1
Social Prescriber	1
Pharmacists	2
Paramedic	1 (starts in August 2025)
Physiotherapist	1 for 3 days a week
Locum GPs	Used as and when needed

## 6.5 Staff interaction

- Reception staff acknowledged entering patients to the service and confirmed their attendance details and patient details.
- Staff promptly answered the incoming telephone calls.
- Staff called patients verbally into their appointment and room.

## 6.6 Patient interviews

We interviewed 13 patients on the 9 July 2025 using a pre-set questionnaire. In response to our questions, the following information was shared with us.

### Q. How often do you try to access GP services?

3 – approximately every 6 months

2 – every two months.

2 – annually.

2 – not a lot.

1 – monthly.

1 – every 3 months

1 – when needed.

1 – quite often.

### Q. How do you currently communicate with your GP service?

The responses included: online, by telephone (most favoured form), face to face.

One person said that they were unable to access online.

### Q. Have you been notified of other alternative routes to see a clinician to seek medical services?

8 – yes.

5 – no.

### Q. Do you know about 'Extra GP Appointments'?

9 – no.

4 – yes.

### Q. Do you feel that you been listened to around your health needs?

7 – yes.

5 – somewhat.

1 – no.

### **Patients' comments:**

*"Absolutely"*

*"GP is good, and reception is friendly"*

*"Certainly, yes"*

*"Definitely, yes"*

*"Can get frustrated by Locum Doctors"*

*"Not always"*



**Q. What Barriers (if any) do you face or encounter?**

5 – barriers around communication, language barriers,

3 – no barriers.

2 – did not return an answer.

1 – parking a van.

1 – can be a long wait.

1 – getting there on time due to walking difficulties.

Other comments were around appointments.

**Q. Name one positive and one negative about the service**

**POSITIVE:**

*"Happy about everything"*

*"They are more helpful, improved from the past"*

*"See straight away, accommodating"*

*"Convenient"*

*"Get seen quickly. E Consult took half an hour to get call"*

*"Seen within time"*

*"Phone early, get appointment"*

*"Always try to fit me in"*

*"Reception is good"*

*"All is good"*

**NEGATIVE:**

*"They don't recognise the urgency of the matter. Or I would say diagnose the problem"*

*"Can do better"*

*"But for young people, they have to wait over 2 weeks"*

*"Don't always see the same Doctor"*

*"Can't get early appointments"*

*"Sometimes they ignore the problem and only say you are fat"*

5 – none.

1 – did not answer this question.

**Q. How are you notified about changes with your surgery? (e.g. appointments, PPG's, changes of staff etc.)**

9 – receive texts.

2 – text and phone.

2 – phone.

**Q. If you are being referred to hospital, are you given a choice of hospital?**

4 – yes.

4 – never been given a  
choice.

3 – no.

2 – sometimes.

Note: For those that said never been given a choice or no, it may be that they had not need a referral to a hospital.

**Q. Can you understand the information you have given and are you able to ask questions. Is it always in an easy format such as BSL, Interpreter?**

11 – yes.

1 – sometimes “Not provided with a good interpreter”.

1 – no

**Q. Do you know how to raise a complaint/concern at your surgery?**

10 – yes

3 – no.

**Q. If you could change one thing what would it be and why?**

3 patients could not think of anything.

*“10-minute appointments, you can’t explain the problem”*

*“System for appointments not good. On phone, go online. Can’t always do”*

*“Should be evening appointments for people who work”*

*“Phone is not always good. Can’t use the internet”*

*“Have a water machine/fountain”*

*“More doctors. Evening appointments”*

*“Give them more attitude”*

*“More organised”*

*“Immigration takes away appointments”*

## 6.7 Staff Interviews

We interviewed two staff members, the Practice Manager and an administration/reception staff member using a set series of questions.

### **PRACTICE MANAGER**

**Q. How can patients get appointments or get in touch?**

By telephone, patients can walk in, and online by using Accurx (online booking system).

**Q. How does the surgery/practice communicate with patients?**

By text, letters and telephone calls.

**Q. How do you identify vulnerable patients or carers?**

Use a flagging/alert system.

**Q. Do you have an active Patient Participation Group (PPG)?**

Yes. It is two people, but we would like to recruit more patients.

**Q. How do you gather patient feedback about the surgery/practice services?**

Undertake NHS 'Family & Friends Survey' and also a patient satisfaction survey after patients have had their care.

**Q. Can a patient choose to see a Male or Female GP?**

A. Yes.

**Q. Do you have any staffing vacancies at the moment?**

A. No.

**Q. What training do staff receive?**

Staff undertake online (electronic) training in mandatory, and role associated needs.

**Q. Do staff suffer from aggressive patient behaviour?**

Yes, occasionally. (We noted a poster in reception regarding a 'Zero Tolerance' attitude to aggressive behaviour).

**Q. What barriers if any, do you face or encounter at this practice/surgery?**

Making patients aware of the best treatment pathways/clinicians to meet their needs. Also increasing people/patients from ethnic communities to take up vaccinations. We have a dedicated immunisation Nurse each Wednesday who educates patients on the benefits and need.

**Q. Name any positives and any negatives about this practice/surgery?**

**Positives:** Generally, patients can get appointments in 24 hours. Staff are friendly and we offer a range of services.

**Negatives:** Patient awareness of care pathways. Sometimes they expect to see a GP when another member of staff can care for them and in many cases, be accessed quicker for an appointment.

**Q. How do you make patients aware of how to complain about your services or its delivery?**

Complaints can be made online or in writing (letter). We acknowledge receipt within 2 days and offer a response by 28 days.

**Q. Are there any future plans for the surgery/practice?**

Looking to have an onsite Pharmacy.

**ADMINISTRATION/RECEPTION STAFF MEMBER**

**Q. How can patients get appointments or get in touch?**

Patients can walk in, by telephone and online by using Accurx.

**Q. How does the surgery/practice communicate with patients?**

By telephone, text messaging, letters and telephone calls.

**Q. How do you identify vulnerable patients or carers?**

Use a flagging/alert system. We identify via consultation notes.

**Q. What training do staff receive?**

E-Learning and some face to face such as First Aid training.

**Q. Do staff suffer from aggressive patient behaviour?**

Yes. If that happens patient would get a warning letter. May get taken off patient list.

**Q. Name any positives and any negatives about this practice/surgery?**

**Positives:** Helpful staff

**Negative:** None

**Q. How do you make patients aware of how to complain about your services or its delivery?**

We take a verbal complaint, but we do ask them to put in writing or by email. It is then passed to our Practice Manager/GP.

## 7 Recommendations

1. Display the 'Hearing Loop' logo so that hard of hearing patients can see they have access to a hearing loop system.
2. Continue to encourage patients to get involved to join the 'Patient Participation Group'.
3. Identify if there are further opportunities for evening appointments for workers etc. Or if in place already look at circulating information to patients.
4. Promote/raise awareness of 'Extra GP Appointments' to patients.

### 7.1 Examples of Best Practice

The majority of those we asked though that getting an appointment in a reasonable timescale was good. Also, that reception staff were helpful and tried to help.

There is a range of patient information across various walls, some are in different languages.

## 8 Service provider response

The service provider responded with the following comments:

The interpreting services are provided by ICB and there are 2 organisations which we are able to choose from; Global Translation Services and Word 360. Both organisations are able to provide translation services in up to 200 languages and dialects.

In regards to staff speaking different languages, yes, we have staff fluent in some languages such as Punjabi, Hindi, and Urdu, however, for accuracy during a clinical encounter, we would encourage a translator service in the first instance.

Having read through your report, I would like to make the following comments;

“The practice does have a hearing loop in the place and staff are well versed in using this. However, as noted, there was no signage in place but we have corrected this now with a hearing loop sign placed next to reception;



We pride ourselves on our new ‘total triage’ system which has been formulated with the help of GPs and other clinical staff to provide GP appointments within 1-2 days.

Yes, as stated correctly, we do offer evening appointments (up to 19.30 on Thursdays) but we also offer extra GP Appointments via our “Enhanced Access Service <https://www.ournhs.co.uk/walsall-extended-access-service/>. This information is available on our website under the appointments tab however, we will ask staff to offer this service should patients prefer a later evening, or weekend appointment and we will also amend our website to make it more clear.

**CQC:**

We have been registered with the CQC since 01/04/2013.

Our last physical rating/inspection was in January 2018 where we obtained an overall "Good" in all areas.

Our last DMA (Direct Monitoring Activity) inspection was 18/07/2022 where we were classed "Safe and Effective" and no further action was required.

**Patient Participation Group**

This used to be a very active group, however this has not been the case since Covid. We will look to prioritise this once more in the near future.

I trust I have responded to your recommendations. I would like to say thanks once again for your visit and patient feedback.



Share your Walsall Health and Social Care services experiences by getting in touch by using our services review platform "Have Your Say" on our website. Link: <https://tinyurl.com/3778j3ps>

Find us and our reports on our Social Media platforms



Facebook: @HealthwatchWSL  
X (Twitter): @HWWalsall  
Instagram: healthwatchwsl  
YouTube: Healthwatch Walsall 2020



**Committed  
to quality**

We are committed to the quality of our information. Every three years we perform an in depth audit so that we can be certain of this.

How to contact us  
Office:  
Blakenall Village Centre  
79 Thames Road  
Blakenall  
Walsall  
WS3 1LZ

**Tel: 0800 470 1660**  
**Email: [info@healthwatchwalsall.co.uk](mailto:info@healthwatchwalsall.co.uk)**

