

# Enter & View: The Fairfields Practice

Joint visit with CQC Inspection



## Who is Healthwatch Nottingham & Nottinghamshire?

Healthwatch Nottingham & Nottinghamshire is the local independent patient and public champion. We hold local health and care leaders to account for providing excellent care by making sure they communicate and engage with local people, clearly and meaningfully, and that they are transparent in their decision making. We gather and represent the views of those who use health and social care services, particularly those whose voice is not often listened to. We use this information to make recommendations to those who have the power to make change happen. This is a part of our statutory role under Regulation 44 of The NHS Bodies and Local Authorities Regulations 2012.<sup>1</sup>

## Why is it important?

You are the expert on the services you use, so you know what is done well and what could be improved. Your comments allow us to create an overall picture of the quality of local services. We then work with the people who design and deliver health and social care services to help improve them.

## How do I get involved?

We want to hear your comments about services such as GPs, home care, hospitals, children and young people's services, pharmacies and care homes.

You can have your say via:

0115 956 5313 | [www.hwnn.co.uk](http://www.hwnn.co.uk) | [HWNN Facebook.com](https://www.facebook.com/HWNN) | [\\_hwnn X](https://twitter.com/hwnn)

Healthwatch Nottingham & Nottinghamshire

Unit 1, Byron Business Centre, Duke Street, Hucknall, Nottinghamshire, NG15 7HP

---

<sup>1</sup> [The NHS Bodies and Local Authorities \(Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch\) Regulations 2012](#)

## Report Authors

Deborah Ferguson

Richard Mayer

## Report signed off by

Name	Position	Date
Sabrina Taylor	Chief Executive Officer	9 September 2025

\*We have used artificial intelligence (AI) to assist with some drafting and editing. All content has been reviewed and approved by the project team to ensure accuracy, relevance and alignment with organisational standards

# Contents

Contents.....	3
Executive Summary .....	4
Introduction.....	5
Our Approach.....	6
Summary of Findings .....	8
Conclusion .....	14
Recommendations .....	15
Response from the Provider.....	17
References .....	18
Appendix – Survey .....	19

# Executive Summary

Care Quality Commission undertook an inspection of Fairfield's GP Practice, Mary Potter Centre, Nottingham. Notified in advance, Healthwatch Nottingham & Nottinghamshire (HWNN) was invited to join this inspection with the specific aim of speaking to patients as a part of this process.

HWNN developed a short survey to be delivered face-to-face at the practice on the same day as the CQC inspection, 5<sup>th</sup> March 2025. Two HWNN staff members were involved in the visit, in the main waiting room; the opportunity was also taken to speak to those patients who were waiting at reception to talk to receptionists.

We spoke to 17 people over the course of five hours, 10 female and 7 male. Of these, 14 were themselves patients, whilst the other 3 were family members or carers of the patient.

Broadly the findings were that people were happy with the care offered by the practice but that they struggled to make appointments. Many felt that the practice made an effort to help those who did not speak English as their first language, and that the challenge was actually booking an appointment in a timely fashion.

Our recommendations to improve the quality of care given are:

**Recommendation 1: For reception staff, increase the level of resource, training and support to enable them to deliver the same level of courteous and compassionate care to all patients**

**Recommendation 2: Better communication around the operation of the triaging process**

**Recommendation 3: Clear advice to patients who cannot get an appointment on the day as to what steps they should take to secure an appointment.**

**Recommendation 4: An improved mechanism to book routine appointments ahead of time**

Overall, HWNN recognises that Fairfield's Practice offers a good service despite the pressures of high patient demand in an area of significant deprivation, and with the need to support many patients with language and access barriers.

# Introduction

Healthwatch Nottingham & Nottinghamshire (HWNN) was invited to work alongside inspectors from the Care Quality Commission (CQC) in visiting the Fairfields General Practice, sited in the Mary Potter Centre in Radford, Nottingham. This visit took place on 5<sup>th</sup> March 2025, though preparation for the visit took place earlier.

This visit was an opportunity for HWNN to develop resources and skills as the organisation increases its exercise of the Enter & View statutory power<sup>2</sup> to be able to directly gather the experience of service users and patients. HWNN receives plenty of commentary from the public on the challenges of General Practice, so this was an opportunity to explore the feelings of patients from a specific practice.

The practice serves a highly diverse community, with many patients who require interpreting support to fully access care. This places significant importance on timely interpreter availability and longer consultations. HWNN was particularly interested in how the practice adapts to meet these needs while also serving an area of high deprivation.

---

<sup>2</sup> Healthwatch have a power under the Local Government and Public Involvement in Health Act 2007 and Part 4 of the Local Authorities Regulations 2013 to carry out Enter and View visits



# Our Approach

We recognised that the presence of HWNN added to the burden of the practice already undergoing a CQC inspection, something we wanted as far as possible to ameliorate. We spoke with the practice in advance of the date of the inspection to reassure as to our role and independence. Additionally, we visited the practice to get a sense of its physical layout to determine how and where we would speak with patients and family members.

On the day we were based in the main waiting room, speaking to patients as they arrived if they would be willing to talk. Some were happy to talk straight away, others preferred to wait until they had finished their appointment.

We developed a short questionnaire to explore the feelings of patients towards their experience of using the practice. Patients were offered the choice to complete the survey themselves or to answer the questions put to them by our two investigators. Most chose the latter.

The survey was broadly split into four areas: Access to the GP; Communication with the Practice; Treatment by Staff; Overall Rating and Feelings.

We were warned that a significant proportion of the patients did not have English as their first language and that indeed some had no English at all. These patients were, in some cases, able to access NHS interpreters, but others relied on family to support them. It was not possible to provide surveys in other languages because of the breadth of possible languages required. Similarly we had enquired into the possibility of accessing interpreters, but these require booking in advance, and we had no way of knowing which languages would be required on the day of the visit.

The survey and the raw data collected was shared with the CQC for their own report on the practice.

## Demographics

Of the 17 people we spoke to, 10 were female and 7 were male, and all identified with the gender assigned at birth. Of these, 14 were the patients themselves, while three were family members or carers.

The practice serves a highly diverse community. Of the patients we spoke to, seven identified their nationality as Pakistani, Bangladeshi, Polish and Romanian. Four participants said they preferred to use a language other than English, and two of these relied on support from either an interpreter or a family member during their appointment.

It is possible that some patients who were not confident speaking English chose not to participate. Interpreters could not be arranged in advance, as the languages required were not known prior to our visit.



# Summary of Findings

## What is it like to make an appointment?

Our first question asked the patient what it was like to make an appointment with the practice, rated from 1, Very Poor to 5, Very Good. The mean Rating was 2.9 out of 5 (n=17). The largest number, 29.4% (n=5) rated the practice 'Okay/Satisfactory', but the split is quite polarised, with 23.5% (n=4) rating 'Very Poor', whilst the same number rated 'Very Good'.



On the 'Poor' end, patients commented:

"I don't like the online booking service. If you don't have a smartphone then you really struggle. I booked today's appointment by telephone and had to wait 25 minutes to get through"

"You go on the phone and by the time you get through there's no appointments"

At the 'Very Good' end patients commented:

"Very quick – perhaps because of my health condition. I get fast appointments and they are very good at helping me make an appointment"

"It's a good practice – we like it here. It was easy to get a routine appointment"

One of those rating the practice as 'Okay' describes:

“It is difficult sometimes to get an appointment but they are consistent [in] giving an appointment in a couple of days. Today I had phoned for a routine appointment. But in the mornings it can take a long time to get through”

There are clearly challenges with accessing the practice through the telephone system with waiting times and unavailability of appointments, but this reflects a more general trend in General Practice, which HWNN has identified in its own report into Access to General Practice<sup>3</sup>. It is possible that the divergence of viewpoints is heavily influenced by patient expectations.

### How well did the staff communicate with you?

The results here skewed definitely toward ‘Very Good’, with a mean score of 4.2 (n=17). No one rated the practice communication as ‘Very Poor’ or ‘Poor’, whilst 47% (n=8) rated them as Very Good.



“I understood what the staff were asking me and felt they listened to me”

“The receptionist guides you through, asks what the problem is, offers to speak with the GP and then call you back with an appointment.”

Of the lower ratings, some patients indicated that dealing with reception staff can be a challenge:

<sup>3</sup> HWNN Access to General practice report July 2025

“Mostly good but receptionists can sometimes have an attitude, like I shouldn't be there. But they do listen.”

“I don't find the receptionists really helpful”

Some patients suggested that the practice could employ more staff who speak additional languages:

“There is a challenge with languages – they should favour staff with language skills.”

Meeting the communication needs of a linguistically diverse patient population can be complex. While this requires careful resource planning, NHS guidance<sup>4</sup> expects services to provide equitable access, including through interpreters or multilingual staff where possible.

Finally, it is pointed out by some patients that the issue lies with the system, and not with the staff operating under that system:

“There are no issues with the staff, just the booking process (since COVID)”

### How caring and respectful are the staff?

Again, the opinion of those spoken to trended towards the positive. The mean rating is 4.2 (n=17). None rated the practice as Very Poor or Poor, and 35.3% rated the practice as Very Good.



<sup>4</sup> [Improvement framework: community language translation and interpreting services 2025](#)

We asked, and many called out, that they feel safe and have privacy. However, one of the follow-up questions we developed to gather richer information involved asking patients specifically on this issue. It may have been this prompt that brought this detail to mind.

Nonetheless staff are noted for being courteous and professional:

"They are courteous, understanding and listen to me."

"They listen to everything I ask. Very professional when they answer you."

"The staff listen, and you can tell them anything. If there is anything wrong, they will look into it."

Patient experiences of the reception team were mixed. While staff were generally rated as courteous and professional, communication skills scored lower, and one patient described some staff as having an 'attitude.' This suggests that the patient experience is inconsistent and may depend on which staff member is on duty. Ensuring a consistent approach across the reception team would help reduce this variation

"I would rate the reception staff higher than the GP because they do a great job and feel they are taken for granted and they get fobbed off a lot."

"Yes they respect me - they are helpful even with language problems."

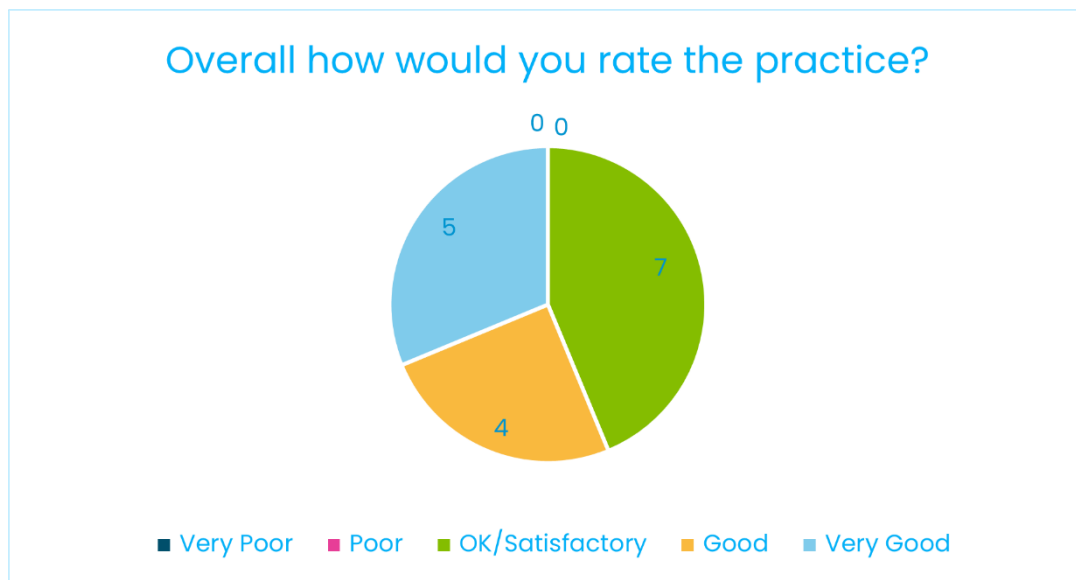
If there are any concerns it is that not all staff are seen as communicating well in their dealings with specific patients, as has already been highlighted:

"Some staff take their time to listen, other staff I don't get along with so well."

"The GP tends to speak too quickly and it takes me a while to process what they are telling me"

## How many stars would you give for your overall experience of using this service?

When it comes to overall rating, one person did not give a value. The mean rating is 3.9 (n=16). The dominant rating was 3 (n=7), but none gave the service a rating of 1 or 2 stars.



The main area of dissatisfaction lies with the system for booking appointments. Some admit they struggle with the online system:

"My only wish is they get rid of the online booking system!"

"I don't like when they tell you to go online. What if you don't know how to?"

"If I could change anything about this service it would be the GP's understanding of issues and the frustration of doing things online!"

However, it is the overall booking process that causes the greatest challenges:

"It is hard to give an overall rating as the staff are really good, but the booking is awful! If I could change anything it would be the booking process."

"I rated them average because of the challenge of getting an appointment."

"Using this service leaves me feeling mixed emotions. I would definitely change the booking system so you can make appointments at any time"

It is important to recognise that, despite the challenges of booking appointments, most patients are happy with the care they receive upon being seen:

"The GPs are good: explain things properly, get you scans if needed, get on it any concerns and break things down. I feel good using this service"

"The referral process needs work – getting the appointment is hard. BUT the GPs make you feel valued."

"Everybody helps everybody. It's a lovely surgery."

"They know I don't know English and the receptionists are really helpful to me. They make sure I have information."

# Conclusion

The challenges faced by the Fairfield's Practice echo the challenges seen by many GP Practices across the county: the struggle to provide sufficient appointments accessible by different routes, to equitably and conveniently meet the needs of their patient population<sup>5</sup>.

The practice serves a highly diverse community in one of the most deprived areas of Nottingham City. Many patients experience barriers to accessing healthcare, including the need for interpreter support and accessible health information. HWNN was particularly interested in how the practice adapts its services to meet these needs.

Overall, the feedback from patients and families that we spoke to is that when they can get an appointment, the service offered by the practice is very good. This is reflected in the Ratings given in the recent inspection by the Care Quality Commission<sup>6</sup>.

The task for the practice is to improve the triaging process, to help patients get access to an opportunity to talk to a clinician and feel that their issues are being examined. If this can be offered easily and electronically, then with encouragement more patients will choose to use this route over the traditional 8am telephone call.

This will also answer some of the perceived patient challenge of dealing with reception staff, which essentially arises from the difficulty of getting an appointment.

In general, this should reduce the number of patients feeling unable to access services when they need them, improving patient care and satisfaction.

---

<sup>5</sup> See also HWNN Report on GP Access, July 2025

<sup>6</sup> [CQC Report of The Fairfield's Practice, following assessment in February and March 2025](#)



# Recommendations

HWNN makes the following recommendations:

## Recommendation 1:

**For reception staff, increase the level of resource, training and support to enable them to deliver the same level of courteous and compassionate care to all patients**

Patients were clear that their perception of good support depends on which staff member they are dealing with. Levelling up this experience will improve service. Particular focus should be on the understanding and development of cultural competence<sup>7</sup>, and on staff resiliency in the face of the pressure of demand.

## Recommendation 2:

**Better communication around the operation of the triaging process**

A definite factor in patient dissatisfaction is not understanding what they should expect from contacting the practice. Clarity on this process, including clear guidance on when to expect call-backs, will answer many of these patient worries. See the Response from the Provider for further information on this issue.

## Recommendation 3:

**Clear advice to patients who cannot get an appointment on the day as to what steps they should take to secure an appointment.**

With a finite number of appointments available, there will inevitably be patients that cannot be seen on the day. To have to call back again the following day risks the repetition of the same disappointment, particularly for those who, due to work or ill health, find it hard to call at 8am. Guidance on how to avoid this repeat calling will allay patient worries and improve patient satisfaction.

## Recommendation 4:

**An improved mechanism to book routine appointments ahead of time**

---

<sup>7</sup> [Developing Cultural Competence](#), Health Education England

Several patients commented on the challenges of getting a routine appointment as a follow up to an earlier appointment. If a number of bookable slots can be offered several weeks in advance, this should make it simpler for the clinician to book these appointments at the time of the first visit, thus eliminating the need for the patient to try and get an on-the-day appointment as a follow-up.

# Response from the Provider

"The practice has been using a total triage system since January 2020. This means that all appointment requests, whether made in person, by phone, or online, are entered into our online system first. Each request is then reviewed by the duty GP, who decides what type of appointment is most appropriate. This may be an urgent GP appointment, a routine GP appointment, or an appointment with another member of the wider practice team such as a pharmacist or physiotherapist. Once the decision has been made, the reception team contacts the patient to book the appointment, or, where suitable, sends a booking link so the patient can arrange the appointment directly.

"The main difficulty for the practice is not the triage system itself, but that the number of people asking for appointments is greater than the number of appointments we can safely offer.

"This is part of a bigger problem. The way NHS funding is given to practices (through the Carr-Hill formula) does not always match local needs. Practices like ours, which look after patients in areas of higher deprivation, often get less money than needed. This makes it harder to meet the high demand for appointments with the resources we have."

# References

CQC Report of The Fairfields Practice, following assessment in February and March 2025

*Developing Cultural Competence*, Health Education England

HWNN GP Access Desktop Study report July 2025

*Improvement framework: community language translation and interpreting services 2025*, NHS England

Joint Strategic Needs Assessment Nottingham and Nottinghamshire

*Local Government and Public Involvement in Health Act 2007* and *Part 4 of the Local Authorities Regulations 2013*: Healthwatch power to carry out Enter and View visits

The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012, UK 2012

# Appendix – Survey

Support to CQC Inspection visit

Setting:

Interviewer:

Before continuing, we need to obtain your consent to collect and store your data. Your data will be used to analyse and produce reports. From time to time, this data may be shared with other services but it will be anonymised and WILL NOT contain anything that could identify you as an individual.

Date of consent:

**Are you:**

The patient

The patient's family member/friend/carer

## Access

### 1. What is it like to make an appointment?

(please circle the response) 1 = very poor, 2 = poor, 3 = ok/satisfactory, 4 = good, and 5 = very good



Can you tell me more about why you feel this way?

How did you book today's appointment? Phone/email/website/NHS App/In person

Urgent or Routine?

Were you given an option of having a telephone appointment?

Were there any challenges in booking the appointment?

## Communication

### 2. How well did the service staff communicate with you?

(please circle the response) 1 = very poor, 2 = poor, 3 = ok/satisfactory, 4 = good, and 5 = very good



Can you tell me more about why you feel this way?

Do you understand what they are asking you?

Do they listen to you?

If you ever needed to, do you feel confident to make a complaint?

Do you know how to make a complaint?

## Staff

### 3. How caring and respectful are the staff? Including Doctors/Nurses/Reception/Support Staff

(please circle the response) 1 = very poor, 2 = poor, 3 = ok/satisfactory, 4 = good, and 5 = very good



Can you tell me more about why you feel this way?

Did you feel safe with the staff?

Were you given privacy for communication?

Were you given privacy for personal care?

Any other examples?

### Overall Experience

4. Using a five star scale how many stars would you give for your overall experience of using this service? (please circle the response) 1 = very poor, 2 = poor, 3 = ok/satisfactory, 4 = good, and 5 = very good



Tell me more about your rating?

What are the not so good things?

What has worked well?

How has using this service made you feel?

If you could make any changes to this service, what would you change and why?



Interviewer notes/observations
Please include any details that you think are relevant

## Acknowledgements

We would like to thank everyone involved in this project.

To all those who participated in our survey, thank you for giving up  
your time to share your stories with us.

We would also like to thank the Practice for its support.



**healthwatch**  
Nottingham & Nottinghamshire

Unit 1, Byron Business Centre  
Duke Street, Hucknall  
Nottinghamshire  
NG15 7HP

[www.hwnn.co.uk](http://www.hwnn.co.uk)

☎ 0115 956 5313

✉ [hwnn@hwnn.co.uk](mailto:hwnn@hwnn.co.uk)

📘 [@\\_HWNN Facebook.com](https://www.facebook.com/HWNN)

Charity Number: 1159968

Company number: 8407721