

# Wokingham Medical Centre Quality Report

Wokingham Medical Centre 23 Rose Street Wokingham RG40 1XS Tel: 0118 978 4566 Website: www.wokinghammedicalcentre.co.uk

Date of inspection visit: 26 January 2016 Date of publication: 18/02/2016

This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

#### Ratings

Overall rating for this service	Good	
Are services safe?	Good	
Are services responsive to people's needs?	Good	

#### Contents

Summary of this inspection	Page
Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	6
Detailed findings from this inspection	
Our inspection team	8
Background to Wokingham Medical Centre	8
Why we carried out this inspection	8
How we carried out this inspection	8
Detailed findings	10

#### **Overall summary**

#### Letter from the Chief Inspector of General Practice

Our previous inspection in May 2015 found breaches of regulations relating to the safe and responsive delivery of services.

We found the practice required improvement for the provision of safe and responsive services, and was rated good for providing effective, caring and well-led services. Consequently we rated all population groups as requiring improvement.

This inspection was undertaken to check the practice was meeting regulations that were in breach from the last inspection. For this reason we have only rated the location for the key questions to which these relate. This report should be read in conjunction with the full inspection report of 9 July 2015.

We found the practice had made improvements since our last inspection. At our inspection on the 26 January 2016 we found the practice was meeting the regulations that had previously been breached.

Specifically we found:

- The practice had a revised cold chain policy to ensure the safe storage of vaccines. For example, medicine fridge temperatures were monitored daily and records maintained.
- The practice had developed a protocol for medicine reviews in accordance with national guidance. The practice had shown significant improvements since our previous visit in May 2015, and medicine reviews had been increased from 18% to 57%. The practice was continuing to improve this and planned to achieve 80% target by July 2017.
- A comprehensive audit programme had been implemented to drive continuous improvement and better patient outcomes.
- Improvements had been made to the appointment booking system. For example, additional appointments had been introduced during weekdays and the practice was offering additional extended hours during weekdays (two mornings and one evening) and every second Saturday from 8am to 12pm.
- The practice had revised protocol for a GP call back system. For example, patients were offered to request a time range for a call back to accommodate their commitments such as work.

• Most of the patients we spoke with on the day informed us they were satisfied with appointment booking system and were able to get appointments when they needed them. We have amended the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe and responsive services. Consequently we have amended the rating of all population groups as good.

#### **Professor Steve Field (CBE FRCP FFPH FRCGP)**

Chief Inspector of General Practice

#### The five questions we ask and what we found

We always ask the following five questions of services.

#### Are services safe?

The practice had taken appropriate action to become good for the provision of safe services.

Records we reviewed and processes we observed confirmed this.

In January 2016, we noted the practice had addressed the issues, surrounding storage of vaccines and medicine reviews. These were judged as contributing to breach of regulations at our inspection on 6 May 2015.

- The practice had reviewed the protocols for safe storage of vaccines and the medicines fridge temperatures were monitored daily. We checked four medicine fridges, temperature recording logs and graphs, which showed the fridge to be operating within the required temperature ranges.
- The practice had reviewed the protocols for the management of medicines reviews and was using a new template. The practice had shown significant improvements in medicine reviews and number of medicine reviews had been increased from 18% to 57% since our previous visit in May 2015.
- The practice had recruited a new clinical pharmacist to take a lead role in medicine reviews to ensure continuous improvement.
- A comprehensive audit programme had been implemented to drive continuous improvement and better patient outcomes.

#### Are services responsive to people's needs?

The practice had taken appropriate action to become good for the provision of responsive services. Records we reviewed, comment cards we received and patients we spoke with confirmed this.

In January 2016, we noted the practice had taken number of steps to address the issues, surrounding appointment booking system to ensure it was meeting the needs of all population groups. This was judged as contributing to breach of regulations at our inspection on 6 May 2015.

- The appointment booking system had been reviewed and a number of additional appointments had been introduced. For example, face to face pre-bookable appointments had been increased from three to eight for each GP every day.
- The practice had introduced five pre-bookable telephone appointments and five online appointments slots for each GP every day.

Good



- Extended hours appointments were available, two mornings and one evening during week days and every second Saturday from 8am to 12pm.
- The practice informed us they had reviewed a GP call back system. For example, the GPs were always ringing patients twice if they were not able to speak to the patient first time. The practice informed us that patients were offered to request a time range for a GP call back to accommodate commitments such as work.
- Most of the patients (seven out of 10 patients) we spoke with on the day informed us they were satisfied with appointment booking system and were able to get appointments when they needed them.

#### The six population groups and what we found

We always inspect the quality of care for these six population groups.

#### **Older people**

The practice is now rated as good for the care of older patients. Nationally reported data showed that outcomes for patients were good for conditions commonly found in older people. The practice offered proactive, personalised care to meet the needs of the older people in its population and had a range of enhanced services, for example, in dementia and end of life care. It was responsive to the needs of older people. It offered home visits and employed a practice nurse who visited older patients to administer flu vaccinations and undertake health checks when appropriate.

#### People with long term conditions

The practice is now rated as good for the care of patients with long-term conditions. Nursing staff had lead roles in chronic disease management and patients at risk of hospital admission were identified as a priority. Longer appointments and home visits were available when needed. All these patients had a named GP and were offered a structured annual review to check that their health and medication needs were being met. For those people with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.

#### Families, children and young people

The practice is now rated as good for the care of families, children and young patients. There were systems in place to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young patients on the risk register. Immunisation rates met the national 90% target for all standard childhood immunisations. The practice undertook mother and new baby health checks at the same time as first baby immunisations. This avoided two appointments and supported achievement of the targets for baby immunisations. Appointments were available outside of school hours and the premises were suitable for children and babies. We saw good examples of joint working with midwives, health visitors and school nurses. A counselling service for young patients was available on site and the practice promoted chlamydia screening.

## Working age people (including those recently retired and students)

The practice is now rated as good for the care of working-age patients (including those recently retired and students). The needs of the working age population, those recently retired and students Good

Good

Good

Good

had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care. The practice offered telephone consultations, online appointments and extended hours (during weekdays and on every second Saturday). The practice was proactive in offering online services as well as a full range of health promotion and screening that reflects the needs for this age group. Patients who wished to check their own blood pressure and their weight and height were encouraged to do so and the results were reviewed by the health care assistant.

#### People whose circumstances may make them vulnerable

The practice is now rated as good for the care of patients whose circumstances may make them vulnerable. The practice held a register of patients living in vulnerable circumstances including homeless people, those with learning disability and carers. The practice had carried out annual health checks for people with learning disabilities and 52 out of 82 of these patients had received a follow-up. Staff received training in equality and diversity and interpreter services were available for both patients whose first language was not English and patients who needed sign language interpretation. The practice regularly worked with multi-disciplinary teams in the case management of vulnerable patients. The practice had sign-posted vulnerable patients to various support groups and third sector organisations. Staff knew how to recognise signs of abuse in vulnerable adults and children. Staff were aware of their responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.

### People experiencing poor mental health (including people with dementia)

The practice is now rated as good for the care of patients experiencing poor mental health (including patients with dementia). 92% of patients with poor mental health had carried out annual health checks. The practice regularly worked with multi-disciplinary teams in the case management of patients experiencing poor mental health, including those with dementia. It carried out advance care planning for patients with dementia and one of the GPs took a lead in supporting patients living with dementia. The practice had told patients experiencing poor mental health about how to access various support groups and voluntary organisations. Staff had received training on conflict resolution and in caring for this group of patients. There was evidence of close working with community teams specialising in supporting this group of patients and the practice had access to talking therapy services. Good

Good



# Wokingham Medical Centre Detailed findings

## Our inspection team

#### Our inspection team was led by:

This focused inspection was carried out by a lead CQC Inspector. The team included a GP specialist advisor.

## Background to Wokingham Medical Centre

Wokingham Medical Centre is located in the town centre of Wokingham. The practice premises were purpose built and opened in 2014. The new building provided an accessible and modern practice with a broad range of facilities to meet patients' needs. It is open from 8am to 6.30pm.

Patients are registered from the town and local rural areas. The practice population has a high proportion of patients in local care homes (240). There is minimal deprivation according to national data.

Approximately 23,000 patients are registered with the practice. Care and treatment is delivered by eight GP partners, two salaried GPs, with six male and four female GPs, 12 members of nursing staff including practice nurses, nurse practitioners and health care assistants. The practice has recruited a new clinical pharmacist who was due to start from February 2016. There was a management team, administration and reception staff.

The practice is a member of Wokingham Clinical Commissioning Group. We visited Wokingham Medical Centre, 23 Rose Street, Wokingham RG40 1XS as part of this inspection. This practice is an accredited training practice. The practice had a General Medical Services (GMS) contract. GMS contracts are directly negotiated between the General Medical Council and the practice. The practice has opted out of providing out-of-hours services to its own patients. There are arrangements in place for patients to access care from an out-of-hours provider and NHS 111.

# Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 6 May 2015 and published a report setting out our judgements. These judgements identified breaches of regulations. We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

We carried out a focused inspection on 26 January 2016 to follow up and assess whether the necessary changes had been made, following our inspection in May 2015. We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection.

This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, review the breaches identified and the rating awarded for the safe domain, under the Care Act 2014.

# How we carried out this inspection

Before visiting on 26 January 2016 the practice confirmed they had taken the actions detailed in their action plan.

## **Detailed findings**

Prior to the inspection we contacted the Wokingham Clinical Commissioning Group, NHS England area team, two local pharmacies and local Healthwatch to seek their feedback about the service provided by Wokingham Medical Centre. We also spent time reviewing information that we hold about this practice including the data provided by the practice in advance of the inspection.

The inspection team carried out an announced focused visit on 26 January 2016.

During our visit we undertook some observations of the environment. We met with the general manager and the operations manager. We spoke with two GPs and a practice nurse. We spoke with 10 patients and reviewed 16 comment cards where patients and members of the public shared their views and experiences of the service. All were relevant to demonstrate the practice had addressed the breaches of regulation identified at the inspection of May 2015.

## Are services safe?

## Our findings

#### **Medicines management**

When we visited the practice in May 2015, we found medicines were checked and monitored to ensure they were safe but vaccines were sometimes stored at a temperature slightly above the maximum indicated by national guidance. We noted17 occasions when vaccines were stored at a temperature slightly above the recommended level in national guidance and appropriate action was not taken. Medicine reviews did not always take place within required timeframes to ensure ongoing treatment was appropriate. Five out of nine patients who used the repeat prescribing service told us they had poor experience. There was no comprehensive system of completing clinical audits.

At the inspection on 26 January 2016, we looked at four fridges and found medicines were checked regularly and stored securely. The practice had reviewed the cold chain policy and the medicines fridge temperatures were monitored daily. The practice had fitted all medicines fridges with a tracker temperature gauge and all the readings and graphs we checked showed the fridge to be operating within the required temperature ranges. We looked at 10 patient records for medicine reviews and found all contained appropriate records to ensure reviews were undertaken within timeframes identified by the practice to ensure repeat prescriptions were appropriate. The practice had reviewed protocol for medicines reviews and repeats prescribing and developed a new template. The practice had set a target of undertaking 80% medicines review until July 2017. The practice had shown significant improvements since we visited the practice in May 2015, for example, the medicines reviews had increased from 18% to 57% in the last six months.

On the day of inspection, we spoke to eight patients who used the repeat prescribing service told us they had good experience and were collecting the medicines from a pharmacy of their choice.

The practice had recruited a new clinical pharmacist to take the lead role in undertaking medicine reviews, monitor the clinical performance and promote good outcomes.

We saw the practice had developed and implemented a comprehensive plan of clinical audit cycles.

## Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

#### Access to the service

When we visited the practice in May 2015, some patients said it was difficult to make appointments face to face and some were concerned about the quality of their care as a result. The practice operated a GP call back system which some patients reported was difficult for them if they had other commitments such as work due to unpredictability in when call backs would take place. Patients reported that online booking was not always available.

At the inspection on 26 January 2016, the practice informed us they had taken number of steps to address the issues, for example;

- The practice had reviewed appointment booking system and increased face to face pre-bookable appointment slots from three to eight for each GP every day.
- The practice had introduced five pre-bookable telephone appointments and five online appointments slots for each GP every day.
- The practice had introduced additional extended hours appointments. For example, the practice opened on two mornings (Tuesday and Thursday) from 7am to 8am and one evening (Wednesday) from 6:30pm to 7:30pm.
- The practice was offering additional extended appointments (for both GPs and nurses) on Saturday (fortnightly) from 8am to 12pm.
- We checked the online appointment records of three GPs and noticed that the next available appointments with named GPs were available within two weeks. Urgent appointments with GPs or nurses were available the same day.
- The practice informed us they had reviewed a GP call back system. For example, the GPs were always ringing

patients twice if they were not able to speak to the patient first time. The practice informed us that patients were offered to request a time range for a GP call back to accommodate commitments such as work.

- As part of our inspection we also asked for CQC comment cards to be completed by patients prior to our inspection. We received 16 comment cards which were mostly positive about the standard of care received. We spoke with 8 patients and two patient participation group (PPG) members during the inspection. Patients we spoke with and comments we received were very positive about the care and treatment offered by the GPs and nurses at the practice, which met their needs.
- Most of the patients we spoke with on the day informed us they were fairly satisfied with appointment booking system and were able to get appointments when they needed them.

Results (published on 7 January 2016) from the national GP patient survey (105 responses out of 280 and a response rate of 51%) showed that patient's satisfaction with how they could access care and treatment was above the CCG average and the national average. For example:

- 83% of patients said they could get through easily to the practice by phone compared to the CCG average of 77% and national average of 73%.
- 79% of patients were satisfied with the practice's opening hours compared to the CCG average of 76% and national average of 75%.
- 74% of patients said they usually waited 15 minutes or less after their appointment time compared to the CCG average of 73% and national average of 65%.

However, the result was below the CCG average and similar to the national average for:

• 73% patients described their experience of making an appointment as good compared to the CCG average of 78% and national average of 73%.