

# Willesborough Health Centre

## Inspection report

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

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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 location

Good



Are services effective?

Good



# Overall summary

## **This practice is rated as Good overall.**

The practice was inspected on 21 November 2017 and was found to be good overall. The practice was rated good in safe, caring, responsive and well led and requires improvement in effective.

We carried out an announced focussed desk top inspection of Willesborough Health Centre on 1 May 2018 .We reviewed the practices clinical performance in respect of the Quality and Outcome Framework, as this had declined during the previous year 2016/2017.

At this inspection we found;

- The practice had identified 148 patients as carers, 1% of their patient list and were supporting them to access support services.
- The practice had improved their clinical performance. Unverified Quality and Outcome Framework 2017/2018 data showed that the practice had achieved 94% of the points available.

**Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

## Population group ratings

## Our inspection team

Our inspection team consisted of a CQC lead inspector.

## Background to Willesborough Health Centre

Dr A Naky and Partners own and run Willesborough Health Centre and Singleton Medical Centre. They hold a general medical service contract for Willesborough Health Centre and have 14009 registered patients. The practice serves an affluent community with low unemployment. The practice reports pockets of deprivation within their community. Life expectancy for males and females is similar to the national average.

The practice website is  
[www.willesboroughhealthcentre.co.uk](http://www.willesboroughhealthcentre.co.uk)

The practice provides services from;  
Willesborough Health Centre, Bentley Road,  
Willesborough, Ashford TN24 0HZ

## Are services effective?

We carried out an announced focused desk top inspection of Willesborough Health Centre on 1 May 2018. The inspection reviewed the practice's clinical performance in respect of the Quality and Outcome Framework, as this had declined during the previous year 2016/2017.

At our previous inspection on 21 November 2017, we rated the practice as requires improvement for providing effective services as the practice's clinical performance in respect of the Quality and Outcome Framework, had declined during the previous year 2016/2017. These arrangements had significantly improved when we undertook a follow up inspection on 1 May 2018.

### Monitoring care and treatment

The practice had a programme of quality improvement activity and routinely reviewed the effectiveness and appropriateness of the care provided. The practice reviewed the clinical performance of the practice against the Quality and Outcome Framework.

The practice acknowledged a decline in their clinical performance from 2015/2016. They told us this was due to the practice changing their clinical recording system. Staff initially lacked confidence and familiarity with recording practices.

The Quality Outcome Framework (QOF) results for 2016/2017 showed the practice achieved 80% of the total number of points available. This was below the clinical commissioning group (CCG) average of 94% and national

average of 95%. The overall exception reporting rate was 4%, which was below the local average of 5% and the national average of 6%. (QOF is a system intended to improve the quality of general practice and reward good practice. Exception reporting is the removal of patients from QOF calculations where, for example, the patients decline or do not respond to invitations to attend a review of their condition or when a medicine is not appropriate).

The practice had significantly improved their performance during 2017/18. The practice's unverified QOF data for this period showed the practice had achieved 94 of the total number of points available. The practice achieved 96% of the public health indicators and 90% of the clinical achievements.

Previously we had found improvements were required in how the practice managed patients with poor mental health. In 2016/2017 the practice achieved 71% of the QOF points available. The practice reviewed their systems for contacting and supporting patients and improved their engagement with them. The unverified QOF data for 2017/2018 showed the practice achieved 94% of the points available.

The practice also showed us they had improved their care of patients with dementia, providing dementia screening and regular patient reviews. For example, the practice achieved 59 out of the 50 points available for the dementia indicators.