

Bedford On Call

Quality Report

Room 8 Simon Whitbread House
Bedford Hospital
Kempston Road
Bedford

Date of publication: 25/04/2014
Date of inspection visit: 29/01/2014

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.

Summary of findings

Contents

Summary of this inspection

	Page
Overall summary	3
The five questions we ask and what we found	4
What people who use the out-of-hours service say	5
Areas for improvement	5
Good practice	5

Detailed findings from this inspection

Our inspection team	6
Background to Bedford On Call	6
Why we carried out this inspection	6
How we carried out this inspection	6
Findings by main service	8

Summary of findings

Overall summary

Bedford on Call Limited (known as BEDOC) is a group of GPs with practices in North Bedfordshire who work in shifts to provide urgent medical care for their patients outside normal surgery hours. Patients access the service by telephoning their own doctors surgery or by calling NHS Direct.

We carried out an out-of-hours announced inspection of the service on the 29 January 2014. A team made up of a practice nurse, practice manager an expert-by-experience and a GP assisted the inspectors with the inspection.

During the visit we observed care being given, talked to patients and staff and looked at treatment records, policies and procedures and other paper work.

We found that patients who used the service were kept safe and protected from avoidable harm. Care and support was given to patients by a caring team of staff who were responsive to patient's needs.

We found some dust under examination couches in treatment rooms. Although we did not consider this a significant risk to patient safety we have asked the provider to monitor the cleaning arrangements they have in place to make sure all areas are clean and dust free.

Feedback from patients during the inspection and from people who had completed comment cards all expressed a high level of satisfaction with the service they had received. The majority of patients felt that overall care and treatment was good, that staff were caring and treated people in a sensitive, dignified manner.

There was rigorous monitoring of all clinician performance which ensured that poor performance was dealt with quickly. Because of this, any risk to patient care and safety was minimised.

We found locum doctors were not employed at BEDOC and the only person who was not a permanent member of staff was a nurse, recruited for a specific role. This significantly contributed to the safety of patients.

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

Patients received a safe service.

Each clinician was closely monitored to ensure that as far as possible patients who used the service were kept safe and protected from avoidable harm.

Are services effective?

Patients experienced an effective service.

Measures were in place to closely monitor the delivery of treatment and care in accordance with best practice guidance. Patients accessing the out-of-hours service consistently reported that their health care needs were met to a high standard.

Are services caring?

Patients who had used the service told us that they were very well cared for. They said all the staff had been kind, caring and compassionate towards them.

Are services responsive to people's needs?

The provider was responsive when meeting patient's health needs.

Patients can be assured that there are mechanisms in place to respond to and learn lessons when things do not go as well as expected. Complaints about the service were taken seriously and were appropriately responded to in a timely manner.

Are services well-led?

The service was well-led.

There were clear lines of accountability and responsibility within the organisation. Key members of staff were committed to maintaining and improving standard encouraged good working relationships amongst the staff and other stakeholders.

Summary of findings

What people who use the out-of-hours service say

All of the patients we spoke with during our inspection made positive comments about the quality of the service. Patients were particularly complimentary about the caring, friendly attitude of staff and said they felt safe.

Comments cards that had been left by the CQC to enable patients to record their views on the service were overwhelming positive and emphasis the caring and respectful attitudes of staff and the excellent standards of care.

Areas for improvement

Action the out-of-hours service COULD take to improve

Monitor the cleanliness of the clinical areas more effectively.

Good practice

Our inspection team highlighted the following areas of good practice:

We found locum doctors were not employed at BEDOC and the only person who was not a permanent member of staff was a nurse, recruited for a specific role. This significantly contributed to the safety of patients.

There was rigorous monitoring of all clinician performance which ensured that poor performance was dealt with quickly.

Bedford On Call

Detailed findings

Our inspection team

Our inspection team was led by:

A team made up of a practice nurse, practice manager an expert by experience and a GP assisted the inspectors during the inspection visit.

Background to Bedford On Call

Bedford on Call Limited (BEDOC) is a group of GPs with practices in North Bedfordshire who work in shifts to provide urgent medical care for their patients outside normal surgery hours. Patients can access the service by telephoning their own GP or by calling NHS Direct.

Bedford is a largely urban region, with 19.5% of people belonging to non-white minorities. Of these, Asian / Asian British and Indian constitute the largest ethnic groups.

All of the indicators for life expectancy and causes of deaths for Bedford are not significantly different to the England average.

Rates of drug misuse, people diagnosed with diabetes and acute sexually transmitted infections are a cause for concern as they are above national averages. The rate of incidence of malignant melanoma and hospital stays for self-harm and alcohol related harm are lower in Bedford in comparison to the England average.

The provider registered with the Care Quality Commission on 28 December 2011 and is currently registered to provide services at one location, Bedford On Call which is based within Bedford Hospital. They are registered to provide diagnostic and screening procedures, transport services, triage and medical advice.

This was the first time this service had been inspected by the Care Quality Commission (CQC).

Why we carried out this inspection

We inspected this out-of-hours service as part of our new inspection programme to test our approach going forward. This was the first time the service had been inspected since registration with the Commission in 2011.

How we carried out this inspection

To get to the heart of patients' experiences of care, we always ask the following five questions of every service and provider:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

Before visiting, we looked at a wide range of information we held about the service and asked other organisations such as the local CCG to share with us what they knew about it. Before our visit we asked patients to complete comment cards about their experiences of the service.

We carried out an out-of-hours announced inspection of the service on the 29 January 2014. A team made up of a practice nurse, practice manager an expert by experience and a GP assisted the inspectors during the inspection visit.

During the visit we looked at the treatment records of patients who used the service. We observed how patients were cared for, both at the centre and on a GP home visit.

Detailed findings

We talked with people who were using the service and the staff who were on duty at the time. We also met with a patient who offers advice and support to the service. They act on behalf of patients to give feedback about their experiences to the provider.

In addition we also reviewed information we had asked the provider to send to us such as policies, procedures and some audits they had completed. During the inspection we talked with key people within the organisation such as the medical director the chief executive of the company, the nominated individual and the registered manager.

Are services safe?

Summary of findings

Patients received a safe service.

Each clinician was closely monitored to ensure that, as far as possible patients, who used the service were kept safe and protected from avoidable harm

Our findings

Safe Patient Care

People who visited the out-of-hours service told us they felt safe and had confidence in the doctors and nurses. The service was easily accessible and signage within the hospital to the BEDOC service was clear. The clinical rooms were adjacent to the hospital's Accident and Emergency department (A&E). This enabled swift and easy transfer of patients should a serious medical emergency arise. One person told us about a prompt assessment and transfer to A&E for a patient with complex needs. They said the staff were 'Caring and compassionate' and acted quickly.

The staff we spoke with during the inspection had been trained in resuscitation techniques. The car that transported the emergency doctor had on board a portable defibrillator and oxygen. We found the service had systems and equipment in place to ensure all emergencies could be responded to in a timely manner.

We found locum doctors were not employed at BEDOC and the only person who was not a permanent member of staff was a nurse. They had been recruited for a specific role. This significantly contributed to the safety of patients.

We saw that accurate records regarding treatment and prescribed medication were maintained when patients used the service. These records were electronic and were sent directly to the patient's electronic record held at their own doctor's surgery. This meant that information was available the next working day for the patient's own doctor to review. This demonstrated continuity of patient care.

Infection Control

The service is located within Bedford Hospital's fracture clinic, which is adjacent to the A&E department. The provider had a cleaning contract with the hospital that they monitored to ensure the areas they worked in were clean. Unfortunately we saw that the cleanliness of the clinical rooms was below the expected standard, with visible dust

on equipment and hand wash basins that were stained. The provider may wish to evaluate the systems they had in place for monitoring the cleanliness of areas. So they can be assured that clinical rooms had been cleaned properly and to an acceptable standard.

We spoke with a nurse who told us that infection control and health and safety were an integral part of their role. They said that at the beginning of each shift they made sure that there were enough gloves and aprons available in the consultation rooms. They also checked that the sharps bins were assembled correctly and out of patients' reach. We saw that there were notices next to all of the sharps bins offering information on how to manage a needle stick injury if one should occur.

We looked at infection control audits that had been completed. We saw that if an issue was identified a detailed, time bound action plan was put in place. This meant appropriate action was taken to rectify the issue and reduce the potential of further risk.

Medication

We found there were appropriate arrangements in place to provide medicines when required.

GPs prescribing practices were monitored closely. We saw evidence of a clear audit trail and we were told if any unusual pattern occurred this would be investigated immediately and appropriate action would be taken.

Staff Recruitment

We saw that BEDOC had a robust recruitment policy and procedure in place. Staff turnover was low. One member of staff told us they had worked at the service for six years and thought it was a "brilliant" place to work. We looked at a selection of staff files during the inspection. We saw that appropriate checks were carried out before people started to work at BEDOC. These included checks with appropriate registered bodies such as the General Medical Council (GMC), the Nursing and Midwifery Council (NMC) and the Criminal Records Bureau.

There was evidence in staff files that staff were given a good induction and were supported by regular supervision sessions, observation of practice and appraisal. All of these measures helped to ensure that staff were safe and competent.

Are services safe?

Safeguarding

There was a policy and procedure for staff to access should they suspect someone was at risk of potential abuse. We were told that 75% of all staff including doctors, reception staff and drivers had been trained in safeguarding procedures. When we talked to staff about this they told us that they would report any concerns to the lead agency for safeguarding and had procedures they could refer to. The medical director was BEDOC'S safeguarding lead. All staff

said that if they were concerned, they would always contact him or any senior member of staff for advice. This helped to protect people from harm and made sure concerns were escalated appropriately to the right agency to investigate.

Patients told us during the visit that they felt safe. One person wrote "I felt in safe hands, the staff were lovely and I trusted them."

Are services effective?

(for example, treatment is effective)

Summary of findings

Patients experienced an effective service.

Measures were in place to closely monitor the delivery of treatment and care in accordance with best practice guidance. Patients accessing the out-of-hours service reported that their health care needs were consistently met to a high standard.

Our findings

Clinical audits

The medical director was responsible for making sure that clinical standards were maintained. We saw that records of patient consultations were reviewed and audited by them and a group of clinicians using the Royal Collage of General Practitioners consultation assessment tool. Doctors were monitored according to their experience and past performance. Comments could be added to the consultation record by the clinical assessors and were available for the doctor to view. Each doctor's performance was then rated. Each month four of the assessors met and discussed these results and any concerns they may have had. Doctors were given feedback and then monitored to

establish whether practice had changed. Failure to change could result in the doctor being removed from the out-of-hours service. This was a good system for monitoring clinicians practice.

National quality requirements (NQRs)

There are National Quality Requirements for out-of-hours providers. These are reported regularly to demonstrate that the service is safe, clinically effective and delivered in a way that gives the patient a positive experience. We saw evidence that BEDOC had met all the national targets in the last three months.

Recruitment and Training

The provider reported that they had a robust statutory and mandatory training programme that enabled all staff to acquire the skills and knowledge required. Due to the working hours of many of the staff, much of the training was available online for staff to complete at their convenience. Where courses needed to be completed face-to-face, training was offered at different times and dates to allow staff to attend.

Continuous Professional Development was provided for staff to enable them to maintain their professional registration and also advance their professional and personal development.

Are services caring?

Summary of findings

Patients who had used the service told us that they were very well cared for. They said all the staff had been kind, caring and compassionate towards them.

Our findings

Before the inspection took place we had asked people who used the service to complete comment cards regarding the care and treatment they had received. We received forty-four completed cards. Forty two of the comments were all positive and demonstrated that people were extremely satisfied with the care they had received.

Some of the positive comments we received from patients included:

“Very good advice and was listened to by the doctor”. And “Very satisfied. The doctor called to see me at home, fifteen minutes after my phone assessment. I was given a thorough check out. I was treated well and given advice on aftercare.”

Staff were trained to respect people’s dignity and privacy. We noted during the inspection that conversations were overheard in the consultation rooms that were next door to

each other. Staff were aware of this and said that they tried not to have patients in either room simultaneously in order to protect patient’s privacy. However when the service was busy this was unavoidable.

We observed some patient consultations. We saw that staff treated people with respect and dignity. Patients also confirmed this, one person said “The doctors are very supportive, I feel listened to and the doctor always explains things well”. Another said “Staff are caring and respectful”.

Patients told us they felt that they had been involved in decisions about their care and treatment and that the doctor gave them plenty of time to ask questions and responded and in a way they could understand. They were satisfied with the level of information they had been given and said that any follow up treatment was clearly explained to them.

Patients told us how staff had treated them when they attended the service. One person said “My son who is one year old needed to see a doctor, and everyone who dealt with us was kind and reassuring. They were understanding to our worries”. Another patient said “I’ve been treated good and I have felt listened to. Staff are caring and I have been given explanations”. And “Nothing but praise for care and support given by all staff, in a very professional manner at all times”. These positive comments demonstrated that staff are kind, caring and compassionate to the patients who used the service.

Are services responsive to people's needs? (for example, to feedback?)

Summary of findings

The provider was responsive when meeting patients health needs.

Patients can be assured that there are mechanisms in place to respond to and learn lessons when things do not go as well as expected. Complaints about the service were taken seriously and were responded to in a timely manner.

Our findings

Responsive to Patient Needs

The service was meeting all of the national quality requirements relating to response times. Patients we spoke with told us that they had been dealt with quickly and had not waited very long to be seen. Comments included "The service has been fast and efficient and I cannot fault it." And "I was quickly referred to BEDOC, very quickly seen by the doctor who was very polite and compassionate."

We were told how they ensured they responded to people's cultural beliefs when needing to be examined. This demonstrated that the service responded to the individual's need and patients expectations.

Serious untoward incidents.

All staff have access to risk assessment and management and incident reporting training. The organisation also has a 'Raising a Matter of Concern' Policy. All incidents whether clinical or operational in origin were entered onto a web based reporting form. The system was set up so that identified individuals within the organisation received an email alert and link to the incident details. The level of risk identified to patients would determine the priority of subsequent investigation and possible actions.

The Quality and Patient Safety Manager ensured all incidents are investigated and identified learning or changes in practice were actioned. We found any learning or changes in practice were disseminated to the individual and the team if applicable.

Concerns and complaints

The service had an effective complaints procedure. We saw that complaints were logged and responded to appropriately and in line with the policy.

Staff told us that they would try to rectify any 'concerns or grumbles' raised with them straight away if it was within their remit. They said they would always signpost patients to the complaints procedure if they were unable to resolve the matter at the time. Staff said that it was important to them that patients remained satisfied and happy with the service they received.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Summary of findings

The service was well-led.

There were clear lines of accountability and responsibility within the organisation. Key members of staff were committed to improving standards and encouraged good working relationships amongst the staff and other stakeholders.

Our findings

Structure and culture within the organisation

When we spoke with the medical director it was evident that they set high standards. They had been medical director for six years and led by example. They were patient centred, committed to improving standards and encouraged good relationships amongst the staff and other key stakeholders. There was a rigorous and effective monitoring system for all clinical staff and during the inspection we were able to see how this worked in practice. This demonstrated that BEDOC he has high expectations of the workforce.

Nursing and reception staff told us that they were supported in their work by their managers. They said that all senior members of the management team were approachable and there was a 'No blame, open culture' within the organisation. One member of staff said "To work here feels comfortable, professional. I feel supported. It's all transparent. There is no problem going to somebody to ask for help. We all gel really well."

Involvement

Engagement with patients is done through the patient participation person. During the inspection we spoke with them. We were told that they visited the service

unannounced and speak to patients. The visit focused on the reception, information available to patients and patient views. A report made from the visit included some opinion of patients, conclusions and recommendations. They told us that the service was responsive to suggestions made to them regarding improvements to the service that enhances the patient experience when visiting the service. They said for example that patients had suggested that the names of the staff that were on duty be displayed in the waiting area. We saw during the inspection that this had been done.

Governance

BEDOC has an Integrated Governance Committee (IGC) which meets quarterly and looks at audits undertaken on the service, any complaints, serious adverse events that have occurred, patient feedback and any human resource issues. The committee included the patient who was used by the provider to represent patient's views and opinion of the out-of-hours service. We spoke with them during the inspection. They told us that all issues brought to the attention of the committee were talked about in detail during these meetings. Complaints outcomes and serious incidents were discussed in depth and any lessons learnt taken forward as action points and cascaded to the team. We noted that the name and contact details of the patient representative was not readily available to patients. The provider may wish to consider ways in which patients who used the service could contact them to give feedback on their experiences of the service.

Improvement

Regular audits were undertaken to monitor the quality of treatment and services provided. They included: infection control, medication audits, documentation of consultations and the National Quality Requirements. All staff were involved in the audit monitoring within the organisation and there was a willingness at all levels to respond to change to improve and enhance the service.