

Taw Hill Medical Practice

Inspection report

Aiken Road
Swindon
Wiltshire
SN25 1UH
Tel: 01793 709500
www.tawhillsurgery.nhs.uk

Date of inspection visit: 25 January to 25 January
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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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Requires improvement



Are services well-led?

Requires improvement



Overall summary

We carried out a comprehensive inspection at Taw Hill Medical Practice on 25 January 2019, as part of our inspection programme. The provider was given limited announcement of the inspection due to concerns raised about another service that is also part of the same partnership arrangement. Taw Hill Medical Practice has not been previously inspected under the current provider.

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

We have rated this practice as Requires Improvement overall.

The key questions at this inspection are rated as:

- Are services safe? – Requires Improvement
- Are services effective? – Requires Improvement
- Are services caring? – Good
- Are services responsive? – Requires Improvement
- Are services well-led? – Requires Improvement.

The population groups (for example, older people and those experiencing poor mental health) are all rated as Requires Improvement.

This means that:

- Patients had good outcomes because they received effective care and treatment that met their needs.
- Patients were supported, treated with dignity and respect and were involved as partners in their care.
- People's needs were met by the way in which services were organised and delivered.

However, the leadership, governance and culture of the practice did not always promote the delivery of high quality person-centred care. For example:

- There was no evidence of systems to ensure audits were conducted regularly.
- Recruitment checks for staff did not include all information relevant to employment in their roles.

The areas where the provider **must** make improvements are:

- Ensure care and treatment are provided in a safe way for service users.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensure staff employed are suitably qualified to carry out their role.
- Ensure recruitment procedures are established and operated effectively.
- Ensure effective care is provided for service users with diabetes, so that there is lower exception reporting and healthier outcomes for these indicators.

The areas where the provider **should** make improvements are:

- Continue to identify carers to enable this group of patients to access the care and support they require.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

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

Population group ratings

Older people	Requires improvement 
People with long-term conditions	Requires improvement 
Families, children and young people	Requires improvement 
Working age people (including those recently retired and students)	Requires improvement 
People whose circumstances may make them vulnerable	Requires improvement 
People experiencing poor mental health (including people with dementia)	Requires improvement 

Our inspection team

Our inspection team was led by a CQC lead inspector, and included specialist advisers in general practice, nursing and practice management.

Background to Taw Hill Medical Practice

The provider, Taw Hill Medical Partnership, delivers regulated activities from its sole site at:

Taw Hill Medical Practice,

Aiken Way,

Swindon.

SN25 1UH

Tel: 01793 709500

Website: www.tawhillsurgery.nhs.uk

Taw Hill Medical Practice is based in Swindon, Wiltshire, and is one of 24 practices serving the NHS Swindon Clinical Commissioning Group (CCG) area. A staffed reception area is located on the ground floor, and the practice has consulting/treatment rooms on the ground floor.

The provider entered into a partnership arrangement with Integral Medical Holdings (IMH) in April 2018. The role of IMH is to offer non-clinical support such as human resources, administration, and standardisation of policies and auditing systems.

The practice has around 12,600 registered patients from an area surrounding the practice and Swindon town centre. The practice age distribution is broadly in line with the national average, with most patients being of working age or older.

The practice has an Alternative Provider Medical Services (APMS) contract to deliver healthcare services. An APMS contract is a locally negotiated contract to commission or provide services that the provider considers necessary to meet all reasonable healthcare requirements.

Taw Hill Medical Practice is registered to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Diagnostic and screening procedures
- Maternity and midwifery services
- Surgical procedures
- Family Planning

There are two GP partners (both male), and four salaried GPs (one male, three female). The wider clinical team consists of two nurses, one health care assistant (HCA), and a phlebotomist. The practice team includes a General Manager, along with patient support officers (PSOs) and an office supervisor.

Ninety-two per-cent of the practice population describes itself as white, and around 8% as having a Black, Asian

and Minority Ethnic (BAME) background. The practice boundary has an estimated low level of socio-economic deprivation: a local area measure recorded a score of 10, on a scale of 1-10, with a higher score indicating a less deprived area. (Note that the circumstances and lifestyles of the people living in an area affect its deprivation score. Not everyone living in a deprived area is deprived and not all deprived people live in deprived areas).

Taw Hill Medical Practice is open from 8am to 6pm, Monday to Friday, and the practice will take calls during

these times. Routine and urgent GP appointments are also available during these times. The practice has opted out of providing Out-Of-Hours services to its own patients. Outside of normal practice hours, patients can access the NHS 111 service, and an Out-Of-Hours GP is available at Swindon Walk-In Centre. Information about the Out-Of-Hours service was available on the practice website, in the patient registration pack, and as an answerphone message.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met...</p> <p>The provider was failing to ensure that care and treatment was being provided to patients in a safe way. Specifically, the monitoring of fire safety systems was not effective or well managed.</p> <ul style="list-style-type: none">• Staff had not completed on-line fire safety training;• There was no fire marshal or record of fire alarm checks;• There was no record of a recent fire drill;• The last fire risk assessment was dated 19 July 2016 and had not been updated.• Patients with high blood pressure and diabetes had relatively high exception reporting and less healthy outcomes.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met...</p> <p>The provider had failed to ensure that systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular:</p> <ul style="list-style-type: none">• There was no system to ensure audits were conducted regularly or embedded in practice improvement activity, as a means to assess, monitor and improve service quality.• The system of recruitment checks for staff did not include all information relevant to employment in their roles. For example, not all staff files contained a DBS check, or a risk assessment if this were not undertaken.

This section is primarily information for the provider

Requirement notices

- The practice was unable to verify the date of the last formal minuted clinical team meeting.
- There had been no formal minuted internal clinical meetings to discuss safeguarding risks, vulnerable patients and other safeguarding issues.
- Staff had not completed on-line fire safety training, there was no fire marshal or record of fire alarm checks; and there was no record of a recent fire drill. The last fire risk assessment was dated 19 July 2016 and had not been updated. Patients with high blood pressure and diabetes had relatively high exception reporting and less healthy outcomes.