

Colville Health Centre

Quality Report

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London W11 1PA.
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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 service	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	

Summary of findings

Contents

Summary of this inspection

Overall summary

Page

2

Detailed findings from this inspection

Our inspection team

3

Background to Colville Health Centre

3

Why we carried out this inspection

3

Detailed findings

4

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Colville Health Centre on 7 June 2017. The overall rating for the practice was Good, however the practice was rated as requires improvement in relation to providing 'effective' care. The full comprehensive report on the June 2017 inspection can be found by selecting the 'all reports' link for Colville Health Centre on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 31 July 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 7 June 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as Good.

Our key findings were as follows:

- The practice had appropriate infection control processes in place.
- When incidents did happen, the practice learned from them and improved their processes.
- The practice had appropriate systems for reviewing patients with long term conditions.
- The practice had implemented appropriate system for supporting patients to live healthier lives.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Colville Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

The focused review was carried out by a CQC Inspector.

Background to Colville Health Centre

The Colville Health Centre, 51 Kensington Park Road, London, W11 1PA, provides primary medical services through a General Medical Services (GMS) contract within the London Borough of Kensington and Chelsea. The services are provided from a single location to around 10500 patients. The local area is culturally diverse and the practice population comes from mixed backgrounds.

Why we carried out this inspection

We undertook a comprehensive inspection of Colville Health Centre on 7 June 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement in providing effective services. The full comprehensive report following the inspection in June 2017 can be found by selecting the 'all reports' link for Colville on our website at www.cqc.org.uk.

We undertook a follow up desk based focused inspection of Colville Health Centre on 31 July 2018. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Are services safe?

Our findings

At our previous inspection on 7 June 2017, we rated the practice as good for providing safe services. However, we found the arrangements in respect of infection control and systems to ensure lesson learnt in relation to incidents were not adequate.

These arrangements had significantly improved when we undertook a follow up desk based review on 31 July 2018.

Safety systems and processes

At our last inspection in June 2017 we found the practice nurse was the infection control clinical lead, however they had not received up to date training. We also found appropriate clothing was not always worn by the nursing team in relation to infection control requirements.

At this review we received evidence to confirm the practice had purchased specially designed uniform for the nursing staff which is compliant with infection control requirements. Further, an infection control audit had been carried out by NHSE and we note from the report that the practice overall compliance with standards of Infection Prevention Control was 99%.

Lessons learned and improvements made

At our last inspection in June 2017 we found that lessons were not always shared with all staff at the practice when incidents occurred.

At this review we received evidence to show that incident reporting process is now included in the staff induction checklist. All incidents are now discussed at the monthly practice meeting which is attended by all staff at the practice. We received the minutes of the most recent practice meetings and saw that incidents and significant events were discussed.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 7 June 2017, we rated the practice as requires improvement for providing effective services as the arrangements in respect of reviewing some patients with long term medical conditions, cervical screening and childhood immunisation rates needed improving.

These arrangements had significantly improved when we undertook a follow up inspection on 31 July 2018. The practice is now rated as good for providing effective services.

Monitoring care and treatment

At our last inspection in June 2017 we found the practice performance for diabetes related indicators was 70% which was 14% below the CCG and 20% below national averages.

At this review we received evidence that demonstrated the practice performance in relation to diabetes had increased. The practice HCA contacted all diabetic patients to carry out a review. They managed to get 100% attendance which resulted in improvement in their diabetic outcomes. We saw copies of the local CCG Diabetes Dashboard which showed that in March 2017 the practice achieved 33.3% in the 9 key care processes, however in March 2018 the practice achieved 78.2% in the 9 key care processes. The 9 key care processes included HbA1c, Cholesterol, BP, BMI, foot risk, retinal screening and smoking.

Further, the practice have joined a local primary care network of GP practices and one of the items on the standing agenda of the group was to initiate collaborative working to address the management of diabetic patients in the local area.

Helping patients to live healthier lives

- At our last inspection in June 2017 we found the practice's uptake for the cervical screening programme was 70%, which was below the CCG average of 76% and the national average of 82%

Following our inspection the practice employed an additional practice nurse and offered designated cervical screening clinics. These clinics were offered during weekdays and on Saturdays for the women who find it difficult to attend during the working week. Cervical screening recalls were sent to the women who were due for a smear test by text message. Clinicians and reception staff were encouraged to opportunistically remind patients to book for their smear test if due.

However the practice found they had a large number of 'ghost patients' on the practice list who have had no contact with the surgery and do not respond to recalls, therefore 278 patients were removed from the practice list.

At this review we received unpublished data that demonstrated the practices current achievement in this financial year is 63% against the CCG average of 56% and the England 72%.

- At our last inspection in June 2017 we found childhood immunisation rates for the vaccinations given to under two year olds were below the national averages of 90%.

Following our inspection the practice allocated the task of managing recall and follow up of these patients to their new practice nurse who was very experienced in this area. They have also identified a member of the administration team who contacts parents and invites the child for immunisation, books the appointment and pursues any DNAs. They have found that some parents are actively refusing to immunise their child and notifies the health visitor when this occurs.

At this review we received unpublished data that demonstrated they have achieved 83% in the under-two year olds' immunisations up to July 2018.

Are services caring?

Our findings

At our previous inspection on 7 June 2017, we rated the practice as good for providing caring services. However, we found the arrangements in respect of identifying carers needed improvement.

These arrangements had significantly improved when we undertook a follow up desk based review on 31 July 2018.

Involvement in decisions about care and treatment

At our last inspection in June 2017 we found the practice had identified less than 1% of their patients as carers.

At this review we received evidence to show they now have 205 patients on their carers register, which is 2% of their total patient list. The practice has also signed up for an enhanced service being run locally for carers to be offered a specialised carers' health check service in the practice.