

# Dr Myhill and Partners

## Quality Report

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Date of inspection visit: 9 October 2017  
Date of publication: 06/11/2017

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 responsive to people's needs?

**Requires improvement**



# Summary of findings

## Contents

### Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	5

### Detailed findings from this inspection

Our inspection team	6
Background to Dr Myhill and Partners	6
Why we carried out this inspection	6
How we carried out this inspection	6

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Myhill & Partners on 8 December 2016. The overall rating for the practice was good with the practice rated as requires improvement for being responsive.

From the inspection on 8 December 2016, the practice were told they should:

- Continue to review and monitor processes for the Quality and Outcomes Framework (QOF) and continue to audit areas of high exception reporting.
- Ensure continued work to improve national GP patient survey results.

The full comprehensive report on the inspection carried out in December 2016 can be found by selecting the 'all reports' link for Dr Myhill & Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection carried out on 9 October 2017 to confirm that the practice had carried out the recommended areas where they should make improvements that we identified during our previous inspection on 8 December 2016. This report covers our findings in relation to those improvements made since our last inspection.

Overall the practice is still rated as good, with a rating of requires improvement for being responsive.

Our key findings were as follows:

- Data from the latest national GP patient survey published in July 2017 showed that patients rated the practice below local and national averages for some aspects of care. There was some improvement in satisfaction scores from the previous survey published in July 2016. Satisfaction for telephone access to the practice had decreased.
- The practice had begun the installation of a new telephone system and the availability of appointments was being routinely reviewed to improve access to the surgery.
- The practice planned to undertake its own survey to monitor patients' satisfaction with the support of the patient participation group between January and March 2018, upon completion of the installation of the new telephone system.
- The practice had improved digital information and invested in new technologies to relieve the burden on the telephone system.

Additionally where we previously told the practice they should make improvements our key findings were as follows:

# Summary of findings

- The practice had updated their protocols for exception reporting against QOF. (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 are unable to attend a review meeting or certain medicines cannot be prescribed because of side effects).
- The new protocol ensured that patients were telephoned by a nurse upon their third recall before being exception reported. SMS text message reminders were also used to recall patients as an alternative to letters.

Most recent QOF data (2016-2017) had not been published at the time of our inspection and the practice was unable to provide unverified data to support improvements.

The areas where the provider should make improvements are as follows:

- Continue with efforts to review and monitor processes for QOF; auditing areas of high exception reporting.
- Continue to monitor and ensure improvement to national GP patient survey results; in particular those relating to access to services.

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

Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

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

The practice is rated as requires improvement for providing responsive services.

- The practice was in the process of installing a new telephone system to improve access to the surgery.
- Appointments availability was routinely reviewed and patients were encouraged to book online. Unverified data provided by the practice demonstrated that access to same day appointments was higher than other practices within the locality.
- Data from the latest National GP Patient Survey published in July 2017 showed there had been minimal changes to patients' satisfaction with how they could access care and treatment. In particular patient satisfaction with telephone access and convenience of appointments had decreased.

**Requires improvement**



# Summary of findings

## The six population groups and what we found

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

### Older people

Following our comprehensive inspection on 8 December 2016 we rated the practice as good for the population group of older people. We did not review any evidence during our focused inspection to alter this rating.

Good



### People with long term conditions

Following our comprehensive inspection on 8 December 2016 we rated the practice as good for the population group of people with long-term conditions. We did not review any evidence during our focused inspection to alter this rating.

Good



### Families, children and young people

Following our comprehensive inspection on 8 December 2016 we rated the practice as good for the population group of families, children and young people. We did not review any evidence during our focused inspection to alter this rating.

Good



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

Following our comprehensive inspection on 8 December 2016 we rated the practice as good for the population group of working age people (including those recently retired and students). We did not review any evidence during our focused inspection to alter this rating.

Good



### People whose circumstances may make them vulnerable

Following our comprehensive inspection on 8 December 2016 we rated the practice as good for the population group of people whose circumstances may make them vulnerable. We did not review any evidence during our focused inspection to alter this rating.

Good



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

Following our comprehensive inspection on 8 December 2016 we rated the practice as good for the population group of people experiencing poor mental health (including people with dementia). We did not review any evidence during our focused inspection to alter this rating.

Good



# Dr Myhill and Partners

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

The focused follow up inspection was undertaken by a CQC Inspector.

## Background to Dr Myhill and Partners

Dr Myhill and Partners is also known as Rothwell Medical Centre and, with the Desborough Surgery, forms the Rothwell & Desborough Health Care Group. These two practices are registered as separate locations with the CQC although patients are able to access services at either site. We only inspected the Rothwell Medical Centre during our inspection.

Dr Myhill and Partners provides primary medical services from a modern, purpose built, two-storey building to approximately 20,500 patients in Rothwell and Desborough and surrounding areas in Northamptonshire.

Dr Myhill and Partners provides services under a General Medical Services (GMS) contract, a nationally agreed contract with NHS England.

All staff may work at either of the locations (Rothwell or Desborough) and in total there are eleven GP partners (female and male) and one salaried GP, four independent nurse prescribers, four practice nurses, four health care assistants and a pharmacist. Support to the partners and clinical team is provided by a practice manager, an operations manager and a team of administration, secretarial and reception staff.

The practice population broadly follows the England national demographic. There is a slightly higher than

average number of patients aged 65 years and above. The practice has approximately 20% of patients over 65 years of age, compared to the CCG and England average of 17%. The area is recorded as being of relatively low deprivation.

The practice is open between 8am and 6.30pm from Monday to Friday inclusive. Extended opening hours are offered on alternate Mondays and Thursdays 6:30pm until 8pm and Saturdays 8am until 10:30am.

When the practice is closed out of hours services are provided by IC24 via the NHS 111 telephone service. Information about the out of hours services is available on posters and leaflets in the practice waiting area, on their website and on telephone answering service.

## Why we carried out this inspection

We undertook a comprehensive inspection of Dr Myhill & Partners on 8 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report from the inspection on December 2016 can be found by selecting the 'all reports' link for Dr Myhill & Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a focused follow up inspection of Dr Myhill & Partners on 9 October 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care.

## How we carried out this inspection

We carried out an announced focused follow up inspection of Dr Myhill & Partners on 9 October 2017.

# Detailed findings

During our inspection we:

- Spoke with the practice manager.
- Reviewed protocols that had been established following our previous inspection to manage QOF performance.

- Reviewed improvements made to improve telephone access.

Please note that when referring to information throughout this report, this relates to the most recent information available to the CQC at that time

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

At our previous inspection on 8 December 2016, we rated the practice as requires improvement for providing responsive services.

We found data from the national GP patient survey published in July 2016 showed that patients rated the practice below local and national averages for a number of areas including access to the practice.

Survey results indicated that patients found it difficult to get through to the practice by phone.

Whilst some improvements had been made when we undertook a follow up inspection on 9 October 2017 patients continued to highlight issues with access to the service.

### Access to the service

Results from the national GP patient survey published in July 2016 showed that patients' satisfaction with how they could access care and treatment was lower than local CCG and national averages, for example;

- 66% of patients were satisfied with the practice's opening hours compared to the local CCG and national average of 79%.
- 37% of patients said they could get through easily to the surgery by phone compared to the local CCG average of 70% and the national average of 73%.
- 93% of patients said the last appointment they booked was convenient, compared to the local CCG and the national average of 92%.
- 58% of patients described their experience of making an appointment as good, compared to the local CCG and the national average of 73%.

The most recent results from the national GP patient survey were published on 7 July 2017. 232 survey forms were distributed and 113 were returned. This represented less than 1% of the practice's patient list (a response rate of 49%). The results showed improvement in patient satisfaction in some areas although others remained the same or fell further. For example,

- 66% of patients were satisfied with the practice's opening hours compared to the local CCG average of 75% and national average of 76%.

- 32% of patients said they could get through easily to the surgery by phone compared to the local CCG average of 67% and the national average of 71%.
- 82% of patients said the last appointment they booked was convenient, compared to the local CCG and the national average of 81%.
- 60% of patients described their experience of making an appointment as good, compared to the local CCG average of 70% and the national average of 73%.

The practice informed us that in response to the survey results and to improve access to care and treatment they had begun the installation of a new telephone system in September 2017 (when their previous contract expired). We were informed that the practice had experienced significant ongoing problems with their telephone system both prior to and since our previous inspection. We were told of additional improvement works planned for the telephone lines to increase access further, including the integration of the telephone system for both practice sites and the ability to increase the number of staff answering the phones at peak times through call diversion to staff based away from reception.

The practice informed us that they had actively advertised and encouraged patients to utilise online services for appointment booking and repeat prescription ordering to reduce the burdens on the telephone lines. We were also advised that notifications were placed on the website when the telephone systems were down to alert patients to the problem. Efforts had been made to improve the information available on the practice website; reducing the need for some patients to call the practice; for example information on other services that patients would otherwise be signposted to. The practice had invested in SMS text message software that enabled patients to cancel appointments via text message rather than phoning the practice.

The practice had previously utilised the patient participation group to undertake an internal patient survey between January and March 2016. We were told that the practice planned to undertake a similar survey between January and March 2018 to gauge the impact of the new system which they planned to be fully operational by December 2017.

The practice had sought patient feedback by utilising the NHS Friends and Family test. (The NHS Friends and Family test (FFT) is an opportunity for patients to provide feedback



# Are services responsive to people's needs?

(for example, to feedback?)

on the services that provide their care and treatment). Results from August to September 2017 showed that 86% (31 of the 36 responses received) of patients who had responded were either 'extremely likely' or 'likely' to recommend the practice. This was a marked improvement on previous performance, for example for the period January to November 2016, 40% said they would recommend the practice (10 of the 25 responses received).

We saw evidence of audits on appointments which demonstrated that the practice was making continued efforts to ensure patient access to appointments was good. We saw evidence from audits that the practice provision of same day appointments for its patients was considerably higher than other local practices (this data was unverified). In addition the practice regularly reviewed DNA (did not attend) data to continuously reduce the number of wasted appointments.