

# Thatcham Health Centre




## Quality Report

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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 caring?	Good	
Are services responsive to people's needs?	Good	

# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out a desktop inspection of Thatcham Health Centre on 10 October 2016. We requested information from the practice to be sent to us so we could undertake a review of evidence offsite. This was following an announced comprehensive inspection in February 2016 in which the practice was rated as good for providing safe, effective, caring and well-led services and requires improvement for providing responsive services. This is because we identified concerns with the continuity of care as well as telephone accessibility for patients. We issued a requirement notice and rated the practice as requires improvement in the responsive domain. The practice sent us an action plan stating what they were going to do to make improvements. At this inspection we found:

- Patient access had improved through the introduction of a new telephone system.
- A new appointment system was introduced to help improve continuity of care.

During the previous inspection, we also reported on areas where improvements should be considered. At this inspection we found that the practice had also acted on these findings.

The practice had updated their carers identification protocol. This laid out what information was available within the practice to encourage carers to register and also what steps practice staff could take in order to refer them onto the carers register.

The areas where the provider should make improvement are:

- Ensuring all patients who are carers are encouraged to register as such. Thus enabling the practice to offer the additional support available for this group of patients.
- Continue to make improvements to telephone access to patients who need to book appointments.
- Continue to review appointment systems to respond to patient concerns about continuity of care.

This report only covers our findings in relation to these requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Thatcham Health Centre on our website [www.cqc.org.uk](http://www.cqc.org.uk)

**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 caring?**

This practice is rated as good for providing caring services.

In February 2016 it was identified that the practice should ensure all patients who are carers were encouraged to register as such. At the time of the previous inspection the practice had identified 109 carers on their patient list which was 0.6% of the patient listing.

In October 2016 we received evidence that the number of patients registered as carers had increased to 177 which was 0.9% of the patient listing.

Good



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

This practice is rated as good for providing responsive services.

In February 2016 feedback from patients who took part in the national patient survey reported that access to a named GP and continuity of care was not always available. Feedback also indicated that patients did not always find it easy to get through to the practice by phone.

In October 2016 we received evidence that practice had improved patient access to a named GP and continuity of care by revising their appointment system. They also had also introduced a new telephone system and had given telephone training to additional staff to help with demand during peak times.

Good



# Thatcham Health Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk based inspection was completed by a CQC Assistant Inspector.

## Background to Thatcham Health Centre

Thatcham Health Centre occupies a purpose built premises of two storeys. It was first opened in the early 1970's and has been subject to two building extensions since. There is a pharmacy located in the same building and the Citizens Advice Bureau occupies an office within the centre. The practice is located on a main bus route. Car parking is available in a public car park next to the practice. The practice provides disabled parking spaces. All consulting and treatment rooms are located on the ground floor.

Approximately 18,500 patients are registered with the practice making it the largest practice in the Newbury and District Clinical Commissioning Group (CCG). (A CCG is a group of general practices that work together to plan and design local health services in England. They do this by 'commissioning' or buying health and care services). The age profile of the registered population is similar to the average profile for GP practices in England. However, there are slightly higher numbers of those aged under ten and in the 40 to 44 years old age groups. There is minimal incidence of income deprivation among the registered population and the practice recognizes the locations in the area where income deprivation is an issue. Services are

delivered via a General Medical Services (GMS) contract. (A GMS contract is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract).

There are 11 GPs working at the practice. Because some of the GPs work part time, the total whole time number of GPs is just over eight. Seven of the GPs are partners (two male and five female), there are two salaried GPs and two locum GPs. The practice has been advertising for another GP since February 2015 without success.

The practice had experienced a year when three partners were absent either due to sickness or maternity leave and recruiting appropriate levels of GP cover had proven difficult. There are 12 practice nurses. Five of the nurses have an additional qualification enabling them to prescribe a specific range of medicines. The nursing team is completed by three health care assistants and a phlebotomist. The practice manager is supported by a team of three senior staff, three medical secretaries, 11 receptionists and eight administration staff.

The practice has opted out of providing out of hours services to their patients. Out of hours services are provided by Westcall. The out of hours service is accessed by calling 111. There are arrangements in place for services to be provided when the surgery is closed and these are displayed at the practice and in the practice information leaflet.

All services are provided from: Thatcham Health Centre, Bath Road, Thatcham, Berkshire, RG18 3HD.

The practice is a training practice offering three placements for qualified doctors seeking to become GPs.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8am to 12pm every morning

# Detailed findings

and 2.30pm to 5.30pm daily. Extended surgery hours are offered between Monday and Thursday up to 7pm. The practice is also open on 23 Saturday mornings each year between 8am and 12pm.

## Why we carried out this inspection

We undertook a desk based inspection of Thatcham Health Centre on 10 October 2016. This inspection was carried out to check that improvements had been made to meet the legal requirements, following our comprehensive inspection on 9 February 2016 where we found the practice in breach of Regulation 17 HSCA (RA) Regulations 2014 good governance.

We inspected this practice against two of the five questions we ask providers; is this service caring and is this service responsive? This was because the service was not meeting some of the requirements in relation to this question.

## How we carried out this inspection

Before carrying out the desk based inspection, we reviewed information sent to us by the practice that told us how the breaches identified during the comprehensive inspection on 9 February 2016 had been addressed. For example, photographic and documentary evidence.

## Are services caring?

### Our findings

In February 2016 it was identified that the practice should ensure all patients who are carers were encouraged to register as such. At the time of the previous inspection the practice had identified 109 carers on their patient list which was 0.6% of the patient listing.

#### **Patient and carer support to cope emotionally with care and treatment**

In October 2016 we received evidence that the number of patients registered as carers had increased to 177 which was 0.9% of the patient listing. The practice advised they had achieved this by updating their carers identification protocol. This laid out what information was available

within the practice to encourage carers to register and also what steps practice staff could take in order to refer patients onto the carers register. For example, on the new patient registration forms, they ask the questions “do you look after someone?” and “does someone look after you?”. The practice also advised that anyone collecting a prescription on behalf of someone else may be given a carer’s referral form.

Whilst the figures reflect improvements made, the practice should continue to encourage carers to register to ensure they are given the appropriate care and support.

Shortly after the inspection, the practice informed us that they had implemented further changes in the identification of carers.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

In February 2016 feedback from patients who took part in the national GP patient survey reported that access to a named GP and continuity of care was not always available. Feedback from the survey also indicated that patients did not always find it easy to get through to the practice by phone:

- 39% patients said they could get through easily to the practice by phone compared to the clinical commissioning group (CCG) average of 78% and national average of 73%.
- 44% patients said they always or almost always see or speak to the GP they prefer compared to the CCG average of 69% and the national average of 59%

### Access to the service

In October 2016 we received evidence that the practice had improved patient access to a named GP and continuity of care by revising their appointment system. The practice introduced appointments which were made available a week in advance in addition to same day and routine appointments which were already available six weeks in advance. GPs started to book in follow up appointments at the end of a consultation to ensure continuity of care for patients. GPs would also monitor their appointment schedule more frequently for their patient lists, allowing for some appointments to be brought forward if thought necessary. This had meant that at times GPs would work additional sessions in order to see more patients.

The practice had also introduced a new telephone system. The new system allowed for up to 40 patients to be placed in a queue at one time and would inform each patient where in the queue they were. Options were available for

patients to be put through to the prescriptions team or the medical secretaries. Telephone training had also been given to the administration staff so that they were able to help with patient demand during peak times.

In July 2016 new figures from the national GP patient survey were published. Two hundred and fifty three surveys were distributed and 113 were returned. This represented a response rate of 45% and equated to 0.6% of the practice's patient list:

- 43% patients said they could get through easily to the practice by phone compared to the CCG average of 79% and national average of 73%
- 56% patients said they usually get to see or speak to their preferred GP compared to the CCG average of 69% and national average of 59%

These figures are based on surveys conducted between July 2015 and March 2016 and therefore would not reflect the changes the practice had implemented since their inspection in February 2016.

In September 2016 the practice conducted a General Practice Assessment Questionnaire (GPAQ) to get feedback on the changes they had implemented. They received 368 completed questionnaires which represented 2% of the practice's patient list. This survey demonstrated further improvement. The results showed 50% patients said it was easy to get through to the practice by phone and 53% patients said they always or most always see or speak to the GP they prefer.

Whilst the recent surveys showed some improvement, the figures were still lower than the CCG and national averages. The practice should continue to look at ways to improve patient access.