

Woodlands Surgery

Quality Report

4 Burchester Place,
Banbury,
Oxfordshire,
OX16 3WT

Tel: 01295 368022

Website: www.woodlandssurgery-banbury.co.uk

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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 effective?

Good



Summary of findings

Contents

Summary of this inspection

Overall summary	Page 2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Woodlands Surgery	4
Why we carried out this inspection	4
How we carried out this inspection	4

Overall summary

Letter from the Chief Inspector of General Practice

At our previous comprehensive inspection at Woodlands Surgery in Banbury, Oxfordshire on 16 November 2016 we found a breach of regulation relating to the provision of effective services. The overall rating for the practice was good. Specifically, the practice was rated requires improvement for the provision of effective services and good for the provision of safe, caring, responsive and well-led services. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Woodlands Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 27 July 2017 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 in November 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

We found the practice had made improvements since our last inspection. Using information provided by the practice we found the practice was now meeting the

regulations that had previously been breached. We have amended the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe, effective, caring, responsive and well led services.

Our key findings were as follows:

- Understanding of the Mental Capacity Act 2005 had been addressed. All staff had undertaken training and had then been assessed by the trainer at a future session to evidence understanding.
- All staff had an appraisal within the last 12 months to ensure learning needs were identified.
- The practice had implemented systems to improve the uptake of learning disability health checks. This included more patient engagement and contacting patients to encourage uptake.
- The practice had implemented systems to improve the uptake of bowel and breast screening.
- Patient satisfaction has increased regarding GPs treating patients with care and concern. Satisfaction had increased by 7%, from 74% to 81%, over the last 12 months.

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 effective?

The practice had taken appropriate action and is now rated as good for the provision of effective services.

Our last inspection in November 2016, we identified concerns relating to Mental Capacity Act 2005 training was not provided and staff awareness was not always appropriate to their role, the number of learning disability health checks undertaken was below the national average, the uptake of bowel and breast screening was lower than the local and national averages and not all staff had an appraisal in the previous 12 months.

Using information provided by the practice we found the concerns had been addressed:

- Understanding of the Mental Capacity Act 2005 had been addressed. All staff had undertaken training and had then been assessed by the trainer at a future session to evidence understanding.
- All staff had an appraisal within the last 12 months to ensure learning needs were identified.
- The practice had implemented systems to improve the uptake of learning disability health checks. This included more patient engagement and contacting patients to encourage uptake.
- The practice had implemented systems to improve the uptake of bowel and breast screening.
- Patient satisfaction has increased regarding GPs treating patients with care and concern. Satisfaction had increased by 7%, from 74% to 81%, over the last 12 months.

Good



Woodlands Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

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

Background to Woodlands Surgery

Woodlands Surgery is a GP practice located in Banbury in north Oxfordshire offering general medical services to approximately 7,000 patients in the Banbury area. Woodlands Surgery is one of the practices within Oxfordshire 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.

According to data from the Office for National Statistics, Oxfordshire has minimal economic deprivation. However, the practice provides GP services within the highest area of deprivation within Oxfordshire. The age distribution of the registered patients is largely similar to the national averages, although there is a slightly lower than average number of patients aged between 20 and 29 years of age. Ethnicity based on demographics collected in the 2011 census shows the population of Banbury and the surrounding area is predominantly White British with 5.7% of the population composed of people with an Asian background and 1.4% of the population composed of people with a Black background.

The practice has three GP partners (one male and two female), one long term locum GP, two practice nurses (all female) and one health care assistant (female). The clinical staff are supported by a practice manager, 10 receptionists, administration staff and a receptionist team leader.

Woodlands Surgery is a two storey building with easy access for disabled patients. The entrance has wide doors, with a bell for those requiring assistance and all consultation and treatment rooms are accessible. The reception area is clearly signed and is within the waiting area. There are toilet facilities available including disabled access with wide doorways.

The opening hours at Woodlands are:

- Mondays to Friday between 8am and 6.30pm.
- Late Monday until 8pm

Woodlands Surgery operates with a General Medical Services contract. They offer enhanced services for childhood immunisations, influenza and pneumococcal immunisations.

The practice has opted out of providing the out-of-hours service. This service is provided by the out-of-hours service accessed via the NHS 111 service. Advice on how to access the out-of-hours service is clearly displayed on the practice website, on both practices door and over the telephone when the surgery is closed.

All services are provided from:

Woodlands Surgery, 4 Burchester Place, Banbury, Oxfordshire, OX16 3WT

Detailed findings

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 16 November 2016 and we published a report setting out our judgements. These judgements identified a breach of regulations. We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

We undertook a follow up desk-based focused inspection on 27 July 2017 to follow up and assess whether the necessary changes had been made, following our inspection in November 2016. We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection. We followed up to make sure the necessary changes had been made. We found the practice was meeting all the requirements of the regulations that had previously been breached.

This report should be read in conjunction with the full inspection report.

How we carried out this inspection

We carried out a desk-based focused inspection of Woodlands Surgery on 27 July 2017. This involved reviewing evidence provided by the practice and a range of information we hold about the practice.

- We reviewed the previous Care Quality Commission (CQC) inspection report and the action plan submitted by the practice outlining how they would make the necessary improvements to comply with the regulation.
- We also reviewed information provided by the practice, including evidence of the new arrangements to increase staff awareness of the Mental Capacity Act 2005, the systems to ensure appraisals are completed in a timely manner, encouraging uptake of learning disability health checks and how the practice have ensured patient outcomes are reviewed to encourage uptake of health reviews.

All were relevant to demonstrate the practice had addressed the breach of regulation identified at the inspection in November 2016.

Are services effective?

(for example, treatment is effective)

Our findings

When we inspected Woodlands Surgery in November 2016, we identified concerns relating to

Mental Capacity Act 2005 training was not provided and staff awareness was not always appropriate to their role, the number of learning disability health checks undertaken was below the national average, the uptake of bowel screening was lower than the local and national averages and not all staff had an appraisal in the previous 12 months.

We reviewed information provided by the practice and found the practice had made improvements to address the concerns previously identified.

Management, monitoring and improving outcomes for people

During the July 2017 inspection, we saw that:

- All staff had completed Mental Capacity Act training and showed a greater understanding of the issues regarding mental capacity.
- All staff had an appraisal within the last 12 months, which included the development of a personal development plan for the following year.
- Various actions had been undertaken to improve low uptake of learning disability health checks. An improved recall system had been implemented in which a designated member of staff telephoned all patients with a learning disability to offer a health review if they have not responded to letters being sent.
- The practice had identified a champion for Learning disabilities, Autism, Dementia and Mental Health who was scheduled to undertake training in: 'Delivering a Learning Disability Health and Wellbeing Review'.
- The practice included a recognised health check form for the patient and/or carer to part complete, in advance

of the consultation, which ensures that a more thorough and detailed consultation can take place in the 30 minute appointment, and ensure that all relevant questions are covered.

- To sustain improvements the practice had expressed an interest in the Oxfordshire Clinical Commissioning Group Local Incentive scheme to enable 'Improved access to primary healthcare and improved health outcomes for people with Learning Disabilities; Autism; Dementia; and Mental Health.
- The practice had increased the uptake of bowel screening from 48% to 52% following increased promotion by clinicians during consultations, the introduction of information leaflets in the surgery waiting area and the advertising of the benefits of bowel screening via the waiting area television.
- We saw the practice had reviewed a study showing that bowel cancer screening uptake can be increased by 7% by sending practice endorsed invitation letters. Following this review we saw the practice had implemented personalised invitation letters. To further increase patient participation the practice had arranged for an education visit from The Bowel Cancer Screening Oxfordshire service to help improve the uptake for bowel screening. The practice told us this visit was scheduled for August 2017.
- The practice had worked with the local breast screening programme manager to identify actions for the practice to undertake in the future screening programme.
- Following successful recruitment including the stabilisation of locum GPs the latest GP national survey results for patient satisfaction showed the practice has increased satisfaction regarding GPs treating patients with care and concern from 74% to 81%. This was a 7% improvement.

These actions were now ensuring that requirements relating to effective care were being met.