

Ilford Lane Surgery

Inspection report

First Floor, Loxford Polyclinic 417 Ilford Lane Ilford Essex IG1 2SN Tel: 020 8478 1366 www.ilfordlanesurgery.nhs.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 location

Are services responsive?

Requires improvement

Good

Overall summary

We carried out an announced comprehensive inspection at Ilford Lane Surgery on 11 December 2017. The overall rating for the practice was good, with the exception of key question responsive which was rated requires improvement. The full comprehensive report on the December 2017 inspection can be found by selecting the 'all reports' link for Ilford Lane Surgery on our website at www.cqc.org.uk.

This inspection was a focused follow-up inspection carried out on 17 December 2018 to confirm that the practice had carried out their plan to meet requirements in relation to concerns we identified in our previous inspection on 11 December 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice remains rated as Good, with key question responsive remaining as Requires Improvement.

Our key findings were as follows:

• Staff involved and treated patients with compassion, kindness, dignity and respect.

- The practice had recruited a permanent practice nurse and had increased the number of sessions that the healthcare assistants provide to address patient demand for services at the practice.
- The practice obesity register was up-to-date and we saw evidence the practice reviewed patients in with this condition regularly. In addition, we found patients with asthma all had written care plans on their clinical record.
- There was a focus on continuous improvement at all levels of the organisation to provide quality services for patients.

The areas where the provider should make improvements are:

• Continue to monitor and address concerns highlighted by patients in the National GP Patient survey, with particular attention to scores relating to patient access to services and helpfulness of reception staff.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Population group ratings

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser.

Background to Ilford Lane Surgery

Ilford Lane Surgery is located in a residential and commercial area of the London Borough of Redbridge. The practice is located on the first floor of a purpose built local NHS building, which is home to several other healthcare providers. The immediate roads around the practice are subject to permit-only parking, however parking is available on roads approximately 5-6 minutes' walk from the practice. The practice has bays for parking for disabled patients at the side of the practice. The nearest bus stop is approximately one minute from the practice.

There are approximately 5700 patients registered at the practice. Statistics shows high income deprivation among the registered population. Information published by Public Health England rates the level of deprivation within the practice population group as three on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The registered population is slightly higher than the national average for those aged between 25-39. Patients registered at the practice come from a variety of geographical and ethnic backgrounds including Asian, Western European, Eastern European and Afro Caribbean. Of the practice population, 41% have been identified as having a long-term health condition, compared with the CCG average of 48% and the national average of 54%.

Care and treatment is delivered by the lead GP (male), one regular salaried doctor (female) and one long-term locum doctor (female) who between them provide approximately 19 clinical sessions weekly. There is one Practice Nurse (female) at the surgery who provides three sessions weekly and two healthcare assistants (female) who between them provides seven sessions per week. In addition, the practice employs a clinical pharmacist who provides two sessions per week. Seven administrative/ reception staff work at the practice and are led by a part-time practice manager. The practice is open from the following times:-

• 8am - 6:30pm (Monday, Tuesday, Wednesday, Thursday and Friday)

Extended hours surgery is held on the following days and times:-

- Monday (6:30pm 8:00pm)
- Wednesday (6:30pm 8:00pm)

Clinical sessions are run at the following times:-

•8:30am - 1:00pm; 2:30pm - 7:30pm (Monday)

•8:30am - 1:00pm; 2:00pm - 6:00pm (Tuesday)

- •9:00am 1:00pm; 1:30pm 7:30pm (Wednesday)
- •9:00am 1:00pm; 2:00pm 6:00pm (Thursday)
- •9:00am 3:00pm; 4:00pm 6:00pm (Friday

Patients can book appointments in person, by telephone and online via the practice website.

The practice telephone lines close between 1pm and 2pm daily. Patients requiring a GP appointment outside of practice opening hours are advised to contact the NHS GP out of hours service on telephone number 111.

The practice has a General Medical Services (GMS) contract and conducts the following regulated activities:-

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

Redbridge Clinical Commissioning Group (CCG) is the practice's commissioning body.

Are services responsive to people's needs?

At our previous inspection on 11 December 2017, we rated the practice as requires improvement for providing responsive services as the practice results from the National GP Patient survey showed that patients felt that it was not always easy to access care and treatment at the practice.

These arrangements had not sufficiently improved when we undertook a follow up inspection on 17 December 2018. The practice is remains rated as requires improvement for providing responsive services.

Timely access to the service

The practice was open from 8am to 6:30pm Mondays to Friday. Extended hours appointments on Monday and Wednesday evening between 6:30pm and 8:00pm. Appointment slots were available throughout the practice opening hours. The out of hours service are provided by an alternative provider and the details of the 'out of hours' service were on a recorded message accessed by calling the practice when closed. Details of the out of hours provider could also be found on the practice website.

Patients were able to access care and treatment from the practice within an acceptable timescale for their needs.

- Waiting times, delays and cancellations were minimal and managed appropriately.
- Patients with the most urgent needs had their care and treatment prioritised. Emergency appointment slots were available daily. Same day appointments were available for older people and young children if requested.
- Reminders for patients with upcoming appointments were sent via text message.
- The practice conducted telephone and e-consultations daily.
- Home visits are available to patients who are unable to come to the surgery.

Results from the National GP Patient Survey published July 2018 showed mixed patient satisfaction with how they could access care and treatment at the practice in comparison to local and national averages. For example:-

- 44% of patients were satisfied with the practice's appointment times availability compared to the local clinical commissioning group (CCG) of 58% and the national average of 66%.
- 30% of patients said they could get through easily to the practice by phone compared to the CCG average of 52% and the national average of 70%. This figure had risen from the 2017 survey results.
- 50% of patients said they were satisfied with the type of appointment they were offered in comparison to the CCG average of 66% and the national average of 74%.
- 42% of patients waited 15 minutes or less after their last appointment time to be seen in comparison to the CCG average of 56% and the national average of 69%.
- 62% of patients describe their overall experience of the practice as good in comparison to the CCG average of 74% and the national average of 84%.

We spoke with the practice regarding the mixed scores recorded from the National GP Patient Survey. The practice was aware of the scores and spoke with us regarding processes they had put in place to help combat the lower survey result scores following our last inspection. For example, the introduction of a new reception rota has meant that there are more staff available to answer the telephone during peak morning periods and there has been an increase in the number of on-the-day morning appointments. The practice has been promoting online patient access to appointments. We saw evidence of this on the day of inspection via notices displayed in the patient waiting area of the practice. In addition, the practice recently commenced e-consultation which the practice was promoting within the practice and on its website. The practice told us that work was continuing to improve general patient satisfaction at the practice.

The practice had also undertaken an in-house survey which was run over six months to assess patient satisfaction. The survey contained six questions based around the themes of gaining access to services and access to clinical staff at the practice. The practice received 306 completed surveys, with many respondents expressing satisfaction with the access and services provided by the practice.