

Holmhurst Medical Centre

Inspection report

12 Thornton Side
Watercolour
Redhill
Surrey
RH1 2NP

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www.holmhurstmedicalcentre.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 location

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Holmhurst Medical Centre on 13 November 2019 as part of our inspection programme.

We had previously carried out an announced comprehensive inspection at Holmhurst Medical Centre in October 2016 and a follow up inspection in October 2017. The practice was last rated as Good overall and Good in all domains. All of the practices' previous reports can be found by selecting the 'all reports' link for Holmhurst Medical Centre on our website www.cqc.org.uk

We carried out an inspection of this service following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a change to the quality of care provided since the last inspection. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions:

- Is it Safe
- Is it Effective
- Is it Caring
- Is it Responsive
- Is it Well led

We have rated this practice as requires improvement overall with safe and well led being requires improvement and effective, caring and responsive being good. All of the population groups have been rated as good.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We rated the practice **requires improvement** for providing safe and well led care because:

- Some of the systems and processes in place to keep patients safe required improvement. For example: not all Patient Group Directives had been signed by all of the nurses or had an authorising signature, the practice was not monitoring the 'two week wait' referrals and so had no method of ensuring that referrals had been completed or tracking of the outcomes.

- The way the practice was led and managed promoted the delivery of high-quality, person-centre care. However, the practice did not have a written strategy on how it was planning to achieve their priorities. There was a limited virtual Patient Participation Group and the practice had not considered other ways for patients to advise the practice on the patient perspective and provide insight into the responsiveness and quality of services. The practice had not reviewed or investigated why three of the patient survey results were lower than the national and clinical commissioning group average and so were unable to evidence if appropriate action had taken place to improve. The practice did not have a systematic programme of clinical and internal audit, that enabled it to demonstrate continuous improvement.

We rated the practice **good** for providing effective, caring and responsive care because:

- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs.
- Patients could access care and treatment in a timely way.
- There was a clear leadership structure and staff felt supported by management.
- Staff worked well together as a team and all felt supported to carry out their roles. There was a strong team ethos and culture of working together for a common aim.

The areas where the provider must make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

The areas where the provider should make improvements are:

Overall summary

- Review and continue to monitor cervical smear screening to meet the Public Health England screening rate target.
- Review and improve child immunisation rates to meet World Health Organisation (WHO) targets.
- Continue to review staff immunisation status and record centrally.
- Ensure that written risk assessments are completed if staff are allowed to start work before the practices own DBS check has been completed.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

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

Background to Holmhurst Medical Centre

Holmhurst Medical Centre is a GP practice based in Redhill in Surrey. The practice provides GP services to 9,800 patients. The practice has a higher proportion of patients under the age of 18 and a lower proportion of patients over the age of 65 when compared with both the CCG and national averages. In addition the practice had a higher proportion of patients in paid work or education and a larger proportion of patients with a long standing health condition. Based on data available from Public Health England, the levels of deprivation in the area served by the practice showed the practice is located in a less deprived area than national averages, ranked at nine out of 10, with 10 being the least deprived. (Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial).

The practice holds a General Medical Service contract and consists of three partners (male and female) and two salaried GPs (male and female). All partner GPs have lead roles. The practice is also a training practice for doctors. Training practices help qualified doctors, known as registrars, complete the final stages of their GP training. The GPs are supported by a lead nurse, two practice nurses, a HCA, a phlebotomist, a patient services manager, a business and practice management and a range of administrative roles.

The practice provides a range of services to patients including infant and adult immunisations, wound dressing and removal of stitches and smoking cessation support.

There are clinics to monitor blood pressure, asthma, diabetes, chronic heart disease and chronic obstructive airways disease.

Services are provided from one location:

Holmhurst Medical Centre, 12 Thornton Side, Redhill, Surrey, RH1 2NP.

Holmhurst Medical Centre is open 8.30am to 6.30pm Monday to Friday.

The practice offers extended hours appointments on Wednesday evening until 7.30pm and Friday morning from 7.30am.

In addition to pre-bookable appointments that could be booked up to two weeks in advance, urgent appointments are also available for people that needed them. Pre-bookable minor illness clinics were available with the nurse as were 'sit and wait' clinics with the duty doctor.

The practice is part of a hub of GP practices which provided extended access appointments for patients during the week until 8pm and at weekends. Patients are able to access Out of Hours services through NHS 111.

Patients registered with the practice are also able to access Livi – which is a GP accessible by video on a mobile phone or tablet. The GP can offer medical advice for symptoms that do not require a physical examination. Livi is available Monday to Friday 7am -10pm and at weekends 8am – 4pm

For information about practice services, opening times and appointments please visit their website at www.holmhurstmedicalcentre.co.uk

The practice is registered to provide the following regulated activities:

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

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met...</p> <p>There were no systems or processes that enabled the registered person to seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services. In particular:</p> <ul style="list-style-type: none">• Although there was a virtual PPG group this had limited function. The practice had had not considered other ways for patients to advise the practice on the patient perspective and provide insight into the responsiveness and quality of services.• The practice had not reviewed or investigated why three of the patient survey results were much lower than the national and Clinical Commissioning Group average and therefore the practice was unable to evidence if appropriate action had taken place to improve. <p>There were limited systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none">• The practice did not have a written strategy and so was unable to monitor progress against their priorities <p>There were no systems or processes that enabled the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:</p> <ul style="list-style-type: none">• The practice did not have a systematic programme of clinical and internal audit, that enabled it to demonstrate continuous improvement.

This section is primarily information for the provider

Requirement notices

Regulated activity

Diagnostic and screening procedures
Family planning services
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

The management of medicines did not always keep patients safe. In particular: -

- Staff did not always have the appropriate authorisations to administer medicines.

There was additional evidence that safe care and treatment was not being provided. In particular:

- The practice did not have a failsafe system for monitoring the 'Two Week Wait' referral.