

The Thorndike Surgery

Quality Report

The Thorndike Centre Longley Road
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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 safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Requires improvement	
Are services well-led?	Good	

Key findings

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Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at The Thorndike Surgery on 27 and 28 June 2017. The overall rating for the practice was requires improvement. The full comprehensive report on the June 2017 inspection can be found by selecting the 'all reports' link for The Thorndike Surgery on our website at www.cqc.org.uk.

After the inspection in June 2017 the practice wrote to us with an action plan outlining how they would make the necessary improvements to comply with the regulations.

This inspection was an announced focussed inspection carried out on 6 March 2018 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 on 27 and 28 June 2017. This report covers findings in relation to those requirements.

This practice is now rated as Good overall.

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Requires improvement

Are services well-led? – Good

As part of our inspection process we also look at the quality of care for specific patient population groups. The patient population groups are rated as:

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 key findings were as follows:

- The practice followed national guidance on the management of medicines and infection prevention and control.
- Improvements to risk management had been made with health and safety risks now being assessed and well managed.

Summary of findings

- Incoming records that required the attention of clinical staff were now being processed in a timely manner.
- The way the practice referred patients to other services had improved.
- Results from the national GP patient survey published in July 2017 demonstrated improvements in patient satisfaction scores on consultations with GPs and nurses as well as on their involvement in planning and making decisions about their care.
- Results from the national GP patient survey published in July 2017 also demonstrated a decline in all but one of the patient satisfaction scores with how they could access care and treatment at this practice.
- The availability of the different types of appointments offered by the practice had improved. However, further improvement in the availability of routine appointments was still required.
- Improvements to governance arrangements at the practice had taken place.
- Plans to address the safety issues associated with the shortage of clinical staff had been enhanced and implemented resulting in improvements.

- The practice was able to demonstrate that learning from complaints received was taking place with planned improvements being implemented more fully.

The areas where the provider **must** make improvements are:

- Continue to implement plans to improve patient satisfaction scores.
- Continue to implement plans to improve patient access to routine appointments.

The areas where the provider **should** make improvements are:

- Continue to work with the contracted external company to manage and reduce the risks associated with legionella. (Legionella a germ found in the environment which can contaminate water systems in buildings).
- Continue to manage all incoming records in a timely manner.

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 safe?

The practice is rated as good for providing caring services.

- The practice was able to demonstrate that they were following national guidance on infection prevention and control.
- Improvements had been made to medicines management and vaccines were being stored at the recommended temperature.
- Improvements to risk management had been made and health and safety risks were now being assessed and well managed.
- Clinical equipment contained in GP's home visit bags had been calibrated and was safe to use.
- The practice had employed an external company to help reduce risks from legionella (a germ found in the environment which can contaminate water systems in buildings).

Good



Are services effective?

The practice is rated as good for providing effective services.

- Records showed that the practice was up to date with carrying out staff appraisals.
- The practice had made improvements in the timely processing of incoming records that required the attention of clinical staff.
- Improvements to the way the practice referred patients to other services had taken place.

Good



Are services caring?

The practice is rated as good for providing caring services.

- The practice had continued to implement their action plan to improve patient satisfaction scores on consultations with GPs and nurses as well as on their involvement in planning and making decisions about their care and treatment. Results from the national GP patient survey published in July 2017 demonstrated improvements in almost all of these scores for this practice.
- Where the latest national GP patient survey results were below average the practice had revised and implemented an action plan to address the findings and improve patient satisfaction.

Good



Are services responsive to people's needs?

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

Requires improvement



Summary of findings

- Patients were able to book longer appointments if they were required to meet their needs.
- Telephone consultations and home visits were now regularly available for patients from all population groups who were not able to visit the practice.
- There were on the day appointments available and urgent access appointments were available for children and those with serious medical conditions.
- Improvements had been made in the availability of services provided by the practice. However, result from the national GP patient survey published in July 2017 demonstrated a decline in all but one of the patient satisfaction scores with how they could access care and treatment at this practice.
- The availability of the different types of appointments offered by the practice had improved. However, further improvement in the availability of routine appointments was still required.

Are services well-led?

The practice is rated as good for providing well-led services.

- Improvements to governance arrangements at the practice had taken place.
- The practice had revised their system that helped ensure all governance documents were kept up to date.
- Plans to address the safety issues associated with the shortage of clinical staff had been enhanced and implemented resulting in improvements.
- There had been improvements to the arrangements for identifying, recording and managing risks, issues and implementing mitigating actions.
- The practice was able to demonstrate that learning from complaints received was taking place with planned improvements being fully implemented.

Good



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

The practice is rated as good for the care of older people. The provider is rated as good for safe, effective, caring as well as well-led services, and requires improvement for providing responsive services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



People with long term conditions

The practice is rated as good for the care of people with long-term conditions. The provider is rated as good for safe, effective, caring as well as well-led services, and requires improvement for providing responsive services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people. The provider is rated as good for safe, effective, caring as well as well-led services, and requires improvement for providing responsive services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



Working age people (including those recently retired and students)

The practice is rated as good for the care of working age people (including those recently retired and students). The provider is rated as good for safe, effective, caring as well as well-led services, and requires improvement for providing responsive services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable. The provider is rated as good for safe, effective, caring as well as well-led services, and requires improvement for providing responsive services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia). The provider

Good



Summary of findings

is rated as good for safe, effective, caring as well as well-led services, and requires improvement for providing responsive services. The resulting overall rating applies to everyone using the practice, including this patient population group.

The Thorndike Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

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

Background to The Thorndike Surgery

- The registered provider is Thorndike Partnership.
- The Thorndike Surgery is located at The Thorndike Centre, Longley Road, Rochester, Kent, ME1 2TH. The practice has a general medical services contract with NHS England for delivering primary care services to the local community. The practice website address is www.thorndike.nhs.uk.
- As part of our inspection we visited The Thorndike Surgery, The Thorndike Centre, Longley Road, Rochester, Kent, ME1 2TH only, where the provider delivers registered activities.
- The Thorndike Surgery has a registered patient population of approximately 14,700 patients. The practice is located in an area with an average deprivation score.
- The practice does not currently teach medical students but is training GP trainees.

Why we carried out this inspection

We undertook a comprehensive inspection of The Thorndike Surgery on 27 and 28 June 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires

improvement. The full comprehensive report following the inspection on June 2017 can be found by selecting the 'all reports' link for The Thorndike Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of The Thorndike Surgery on 6 March 2018. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations, such as the local clinical commissioning group, to share what they knew.

We carried out an announced visit on 6 March 2018.

During our visit we:

- Spoke with a range of staff (one GP partners, one practice manager and two practice nurses) and spoke with five patients who used the service.
- Observed how patients were being cared for in the reception area.
- Reviewed a sample of the personal care and treatment records of patients.
- Looked at information the practice used to deliver care and treatment plans.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?

Detailed findings

- Is it well-led?

We also looked at how well services were provided for specific groups of people and what good care looked like for them. The population groups are:

- older people
- people with long-term conditions
- families, children and young people
- working age people (including those recently retired and students)

- people whose circumstances may make them vulnerable
- people experiencing poor mental health (including people with dementia).

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 27 and 28 June 2017, we rated the practice as requires improvement for providing safe services.

- The practice was unable to demonstrate they always followed national guidance on infection prevention and control.
- The arrangements for managing medicines in the practice did not always keep patients safe.
- Risks to patients, staff and visitors were not always assessed and managed in an effective and timely manner.

The practice demonstrated they had taken action to address these issues when we undertook a follow up inspection on 6 March 2018. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

- Staff told us that there was no local infection prevention team for the practice to liaise with in order to keep up to date with best practice. Instead, the lead member of staff for infection control had received advanced training in the prevention and control of infection in December 2017.
- An infection control audit had been carried out in February 2018. Records showed that the practice had developed an action plan to address any improvements identified as a result. For example, infection control training was being added to the induction training given to all clinical staff when they commenced employment with the practice.
- The practice had revised the system that managed the storage of vaccines. Responsibility for monitoring and recording the temperature of medicine refrigerators was rostered to individual staff members. Records showed that vaccines stored in the practice's medicine refrigerators were being stored at the recommended temperature.

Monitoring risks to patients

- The practice had revised the action plan that had been developed to address issues identified by their health and safety compliance audit. Records showed that the plan contained time frames for action points as well as monitoring of the practice's progress in addressing the identified issues.
- We looked at two GP's home visit bags and found that all of the clinical equipment contained within the bags was up to date with calibration.
- Staff told us that the practice had employed an external company to carry out all actions required to address the recommendations contained within the legionella risk assessment dated December 2016. (Legionella a germ found in the environment which can contaminate water systems in buildings). Records showed that the practice had a contract with an external company to carry out these actions. For example, the sending of water samples for testing to establish that they were free from legionella. Records showed that water temperatures from some hot or cold outlets in the practice were outside of limits recommended by legionella management guidance. For example, records showed the temperature of cold water from some taps in the practice was above the maximum of 20 degrees centigrade. Records also showed that the temperature of hot water from some taps in the practice was regularly not reaching the minimum temperature of 50 degrees centigrade. Staff told us the results may have been due to some taps in the practice being fitted with devices controlling or limiting the temperature of water delivered from them. These had been fitted to reduce the risk of scalding. After the inspection the practice sent us evidence to show they were working with the external company to establish why water temperatures from some hot and cold outlets were outside of recommended limits.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 27 and 28 June 2017, we rated the practice as requires improvement for providing effective services.

- The practice was unable to demonstrate they had an effective system that managed test results and other incoming correspondence in a timely manner.
- The practice was unable to demonstrate they had a reliable system that followed up on patients who were referred to other services.

The practice demonstrated they had taken action to address these issues when we undertook a follow up inspection on 6 March 2018. The practice is now rated as good for providing effective services.

Effective staffing

- Staff told us that the practice was up to date with carrying out staff appraisals. Records confirmed this.

Coordinating patient care and information sharing

The information needed to plan and deliver care and treatment was available to relevant staff through the practice's patient record system and their intranet system.

- This included care and risk assessments, care plans, medical records as well as investigations and test results.

- The practice had made improvements in the timely processing of incoming records that required the attention of clinical staff. For example, test results and other incoming correspondence. Staff told us that the practice was currently employing a junior doctor to review all incoming records before they were allocated to other relevant staff for action.
- On the day of our inspection we saw that there were 137 items of incoming records that were awaiting action by a clinician or filing into the relevant patient's records. All of these incoming records had been received by the practice within the last two days. We also saw that there were nine blood test results awaiting review by a clinician. The oldest of these was received by the practice on 27 February 2018. Although this result had been waiting a week to be reviewed by a clinician we saw that this was for a patient with a minor condition that did not require any urgent action.
- Records showed that there had been no significant events at the practice relating to the lack of timely processing of incoming records since our last inspection.
- The practice had made improvements to the way they referred patients to other services. For example, patients who were referred urgently to other services under the two week wait system were contacted by staff to help ensure they had received an appointment.

Are services caring?

Our findings

At our previous inspection on 27 and 28 June 2017, we rated the practice as requires improvement for providing caring services.

- Patients said they were treated with compassion, dignity and respect. However, national GP patient survey results were poor for some satisfaction scores on consultations with GPs and nurses as well as for involvement in planning and making decisions about their care and treatment when seeing nurses.

The practice demonstrated they had taken action to address these issues when we undertook a follow up inspection on 6 March 2018. The practice is now rated as good for providing caring services.

Kindness, dignity, respect and compassion

We spoke with five patients during the inspection. All five patients said they were satisfied with the care they received and thought staff were approachable, committed and caring. Most of the patients we spoke with indicated that they felt the practice offered a friendly service and staff were helpful and caring.

The practice had continued to implement their action plan to improve patient satisfaction scores on consultations with GPs and nurses. Results from the national GP patient survey published in July 2017 demonstrated improvements in all but one of these scores for this practice. For example:

- 86% of respondents said the GP was good at listening to them compared to the clinical commissioning group (CCG) average of 83% and national average of 89%. This was an improvement over the result of 84% published at the time of our last inspection.
- 82% of patients said the nurse was good at listening to them compared with the CCG average of 90% and the national average of 91%. This was an improvement over the result of 77% published at the time of our last inspection.
- 85% of respondents said the GP gave them enough time (CCG average 81%, national average 86%).
- 81% of respondents said the nurse gave them enough time (CCG average 92%, national average 92%). This was an improvement over the result of 75% published at the time of our last inspection.

- 96% of respondents said they had confidence and trust in the last GP they saw (CCG average 93%, national average 95%). This was an improvement over the result of 86% published at the time of our last inspection.
- 90% of patients said they had confidence and trust in the last nurse they saw compared with the CCG average of 97% and the national average of 97%. This was an improvement over the result of 87% published at the time of our last inspection.
- 88% of patients said the last GP they spoke with was good at treating them with care and concern compared to the CCG average of 79% and the national average of 86%. This was an improvement over the result of 74% published at the time of our last inspection.
- 84% of patients said the last nurse they spoke to was good at treating them with care and concern compared to the CCG average of 90% and the national average of 91%. This was an improvement over the result of 78% published at the time of our last inspection.
- 66% of respondents said they found the receptionists at the practice helpful (CCG average 83%, national average 87%). This was a decline over the result of 78% published at the time of our last inspection.

Care planning and involvement in decisions about care and treatment

The practice had continued to implement their action plan to improve patient satisfaction scores on their involvement in planning and making decisions about their care and treatment. Results from the national GP patient survey published in July 2017 demonstrated improvements in all of these scores for this practice. For example:

- 87% of respondents said the last GP they saw was good at explaining tests and treatments compared to the CCG average of 80% and national average of 86%. This was an improvement over the result of 79% published at the time of our last inspection.
- 84% of respondents said the last nurse they saw or spoke with was good at explaining tests and treatment (CCG average 89%, national average 90%). This was an improvement over the results of 70% published at the time of our last inspection.
- 81% of respondents said the last GP they saw was good at involving them in decisions about their care (CCG average 75%, national average 82%). This was an improvement over the result of 75% published at the time of our last inspection.

Are services caring?

- 75% of respondents said the last nurse they saw was good at involving them in decisions about their care (CCG average 85%, national average 85%). This was an improvement over the result of 65% published at the time of our last inspection.

Where the latest national GP patient survey results were below average the practice had revised and implemented an action plan to address the findings and improve patient satisfaction. For example, ongoing individual and group training was planned to help improve patient satisfaction with the helpfulness of reception staff.

Patient and carer support to cope emotionally with care and treatment

The practice supported patients who were also carers. The practice's computer system alerted GPs if a patient was also a carer. The practice had identified 152 patients on the practice list who were carers (1% of the practice list). The practice had a system that formally identified patients who were also carers and written information was available to direct carers to the various avenues of support available to them.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 27 and 28 June 2017, we rated the practice as requires improvement for providing responsive services.

- There was limited access to routine appointments for patients, which was ongoing. Patients we spoke with said they were not always able to book a routine appointment that suited their needs. Limited on the day appointments, home visits and telephone consultations were available but varied according to the prevailing staffing level each day.

The practice demonstrated they had taken action to address these issues when we undertook a follow up inspection on 6 March 2018. However, further improvements were still required. The practice remains rated as requires improvement for providing responsive services.

Responding to and meeting people's needs

The practice had revised service plans to take into account the needs of different patient population groups. For example;

- Patients were able to book longer appointments if they were required to meet their needs. For example, patients with a learning disability or patients with multiple conditions.
- Telephone consultations and home visits were now regularly available for patients from all population groups who were not able to visit the practice. The practice had made arrangements with another provider (Medway Doctors On Call Care) to carry out up to four home visits daily which increased the availability of this service to patients who needed it.
- There were on the day appointments available and urgent access appointments were available for children and those with serious medical conditions. Staff understood their responsibilities to recognise those in need of urgent medical attention. For example, patients with a sudden deterioration in health such as those with long-term conditions. Clinicians knew how to identify and manage patients with severe infections. For example, sepsis.

Access to the service

The Thorndike Surgery was open Monday to Friday 8.30am to 6.30pm. The reception desk was closed between 12.30pm and 1.30pm Monday, Tuesday, Wednesday and Friday. The reception desk was also closed between 12pm to 2pm Thursday. Telephone lines and the practice building remained open when the reception desk was closed during the day.

Primary medical services were available to patients via an appointments system. There was a range of clinics for all age groups as well as the availability of specialist nursing treatment and support. There were arrangements with other providers (Medway Doctors On Call Care) to deliver services to patients outside of the practice's working hours.

The practice had continued to implement their action plan to improve patient satisfaction scores with how they could access care and treatment. Results from the national GP patient survey published in July 2017 demonstrated a decline in all but one of these scores for this practice. For example:

- 56% of respondents were satisfied with the practice's opening hours compared to the local clinical commissioning group (CCG) average of 67% and national average of 76%. This was a decline over the result of 65% published at the time of our last inspection.
- 26% of respondents said they could get through easily to the practice by telephone compared to the local CCG average of 59% and national average of 71%. This was a decline over the result of 35% published at the time of our last inspection.
- 55% of respondents said the last time they wanted to see or speak with someone the last time they tried they were able to get an appointment compared to the local CCG average of 67% and national average of 76%. This was a decline over the result of 59% published at the time of our last inspection.
- 58% of respondents said their last appointment was convenient compared with the CCG average of 75% and the national average of 81%. This was a decline over the result of 86% published at the time of our last inspection.
- 39% of respondents described their experience of making an appointment as good compared with the CCG average of 63% and the national average of 73%. This was a decline over the result of 44% published at the time of our last inspection.

Are services responsive to people's needs?

(for example, to feedback?)

- 38% of patients said they don't normally have to wait too long to be seen compared with the CCG average of 53% and the national average of 58%. This was an improvement over the result of 34% published at the time of our last inspection.

Where the latest national GP patient survey results were below average the practice had revised and implemented an action plan to address the findings and improve patient satisfaction. For example, the practice planned to visit similar sized practices nearby to establish new ideas for managing and allocating staff time in order to improve response time in answering incoming telephone calls.

We spoke with five patients during the inspection. All five patients stated they found it difficult to book a routine appointment in advance. They said that routine appointments were not available for between two and four weeks. However, this was an improvement over the five or six weeks patients told us they had to wait at the time of our last inspection. Patients also said that if they attended the practice or telephoned the practice first thing in the morning they were sometimes able to book an appointment on the day and they were always able to get an emergency appointment on the day.

The practice no longer offered extended hours appointments and had closed their branch surgery. This had increased the availability of services at The Thorndike Surgery.

The provider had joined with three other services in the area to support the delivery of minor illness clinic run by the local CCG. The Thorndike Surgery had been allocated 40% of the appointments at the minor illness clinic which they were able to make available to their patients whom met the criteria to be seen by this service.

The practice had been successful in their application to the local CCG to informally manage their list of patients. This

meant that the practice was temporarily not registering new patients. The number of patients had fallen from approximately 16,000 to approximately 14,600. This in turn had reduced demands on the practice albeit slightly.

Since our last inspection the practice was employing one less salaried GP and one less Advanced Nurse Practitioner. However, staff told us that they were employing additional locum GPs directly and via an agency as well as training one of their healthcare assistants to be a practice nurse and one of their phlebotomists to be a healthcare assistant. Staff told us that, as a result of these staff changes, the availability of routine appointments with GPs had not diminished and the availability of routine appointments with nurses and healthcare assistants had increased.

One the day of our inspection we established that the availability of the different types of appointments offered by the practice was as follows;

- The next available routine appointment with a GP was 13 April 2018.
- The next available routine appointment with a nurse was 26 March 2018.
- The next available on the day appointment with a GP was 7 March 2018.
- The next available online appointment with a GP was 7 March 2018.
- The next available emergency appointment with a GP was 6 March 2018.
- The next on the day appointment with staff at the minor illness clinic was 8 March 2018.

Staff told us that patients were still being directed to local walk in centres when all the on the day appointments had been taken. However, staff told us this was no longer taking place regularly on the daily basis that was happening at the time of our last inspection.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At our previous inspection on 27 and 28 June 2017, we rated the practice as requires improvement for providing well-led services.

- Governance arrangements were not always effectively implemented.
- The practice was unable to demonstrate they had an effective system that managed risks. For example, health and safety risks, the potential risk of legionella in the building's water system and risks associated with the lack of an effective system that managed test results and other incoming correspondence.
- The practice was able to demonstrate that learning from incidents, accidents and significant events as well as complaints was taking place. However, improvements were not always fully implemented.

The practice demonstrated they had addressed these issues when we undertook a follow up inspection on 6 March 2018. The practice is now rated as good for providing well-led services.

Governance arrangements

Improvements to governance arrangements at the practice had taken place.

- The practice had revised their system that helped ensure all governance documents were kept up to date. We looked at five such policies and guidance documents and found that all were dated and contain a planned review date.
- A comprehensive understanding of the performance of the practice was maintained. Plans to address the safety

issues associated with the shortage of clinical staff had been enhanced and implemented resulting in improvements. For example, the practice no longer offered extended hours appointments and had closed their branch surgery. They had been allocated 40% of appointments for their patients at a minor illness clinic run by the local clinical commissioning group (CCG) and had been successful in their application to formally manage their list of patients. These activities together with employment of locum GPs as well as developing existing members of staff had led to an improvement in availability of services provided by the practice.

- There had been improvements to the arrangements for identifying, recording and managing risks, issues and implementing mitigating actions. The practice was able to demonstrate they had an effective system for the management of medicines as well as infection prevention and control. The practice had assessed and managed in an effective and timely manner all identified risks to patients, staff and visitors. For example, health and safety risks, the potential risk of legionella in the building's water system and risks associated with the lack of an effective system that managed test results and other incoming correspondence.

Continuous improvement

The practice was able to demonstrate that learning from complaints received was taking place with planned improvements being implemented more fully. For example, improvements as a result of complaints relating to patients experiencing difficulties in obtaining access to services.