

The Charlbury Medical Centre

Quality Report

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Website: www.charlburymedicalcentre.co.uk/

Date of inspection visit: We did not visit the surgery as part of this review because they were able to demonstrate that they were meeting the standards without the need for a visit.

Date of publication: 30/05/2017

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

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Overall summary

Letter from the Chief Inspector of General Practice

Our previous comprehensive inspection at The Charlbury Medical Centre on 24 August 2016 found breaches of regulations relating to staffing. The overall rating for the practice was good, but the practice was rated requires improvement in the effective domain. The full comprehensive report from the August 2016 inspection can be found by selecting the 'all reports' link for The Charlbury Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused desktop inspection (we have not visited the practice but requested information to be sent to us) carried out on12 April 2017. The inspection was conducted to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulations that we identified in our previous inspection. This report covers our findings in relation to those requirements and improvements made since our last inspection.

We found the practice had made improvements since our last inspection. The information requested in April 2017 identified that the practice was meeting the regulation 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. In addition the practice made improvements to its services where we suggested this could improve services for patients.

Our key findings were as follows:

- A programme of appraisal had been followed and staff received appraisals to ensure their development and learning needs were met. This provided staff with the opportunity to enhance their learning and development.
- In addition to the regulatory breach, actions were taken where we suggested the provider should consider our findings. For example:
- Hearing loops have been installed in the reception area and the dispensary to aid patients with impaired hearing.
- Printers that contain prescriptions now have tray locks to prevent unauthorised access
- In response to patient feedback, evening appointments on a rota basis with the other practices were made available to patients.
- New temperature recording equipment for fridges were purchased to ensure they were effectively monitored. This ensured the storage of medicines in the fridges was safe.
- A process for disseminating medicine safety alerts to staff was introduced, with records available in a folder should staff need to access them for information.

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.

When we inspected in August 2016 we found the practice did not provide staff with annual appraisals to provide opportunities for evaluation, improvement and development.

Using information provided by the practice we found the concerns had been addressed. The practice is now rated good for providing effective services

- The practice informed us that since August 2016 the practice provided all staff with appraisals.
- We saw two records from appraisals completed in 2017.

Good





The Charlbury Medical Centre

Detailed findings

Background to The Charlbury Medical Centre

The Charlbury Medical Centre provides GP services to 5,300 patients in a rural area of the Cotswolds, centred on the small market town of Charlbury. The practice serves an

area with an overall low level of deprivation, although there are pockets of rural poverty, with related issues of geographical isolation, including ease of access to medical care. Ethnicity based on demographics collected in the 2011 census shows the population of the surrounding area

is predominantly white British.

The practice has three GP partners, two female and one male, and one female salaried GP, equivalent to 3.5 whole time GPs. There are three practice nurses, and two healthcare assistants. The practice works closely with the local district nursing team, which is based on site, to provide shared patient care and avoid hospital visits for services such as phlebotomy, dressing changes and minor urgent care. The surgery building was built in the late 1990s.

There is an onsite dispensary which can provide pharmaceutical services to patients who live more than one mile (1.6km) from their nearest pharmacy premises.

Two dispensers currently provide the services to approximately one third of the practice's patients. The practice provides a delivery service for dispensed medicines to be collected by patients from shops in the outlying villages when appropriate.

The practice is fully open from 8am to 6.30pm Monday to Friday, with the nursing team offering appointments from 7.30am four mornings a week. The out of hours service is

provided by Oxford Health and is accessed by calling NHS 111. Advice on how to access the out of hours service is contained in the practice leaflet, on the patient website and on a recorded message when the practice is closed. Services are delivered from:

The Charlbury Medical Centre

Enstone Road

Charlbury

OX7 3PQ

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 24 August 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 carried out a follow up focussed desktop inspection in April 2017 to assess whether the necessary changes had been made, following our inspection in August 2016. We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection. We found the practice was meeting the requirements of the regulations that had previously been breached.

This inspection was planned to check whether the provider is meeting the legal requirements and regulations

Detailed findings

associated with the Health and Social Care Act 2008, (Regulated Activities) Regulations 2014, to look at the overall quality of the service, review the breaches identified and update the ratings provided under the Care Act 2014.

How we carried out this inspection

We carried out a desk-based focused inspection of The Charlbury Medical Centre in April 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 that areas we suggested improvements should be considered had led to action.

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



Are services effective?

(for example, treatment is effective)

Our findings

When we inspected the practice in August 2016, we identified concerns relating to support staff via a system of appraisal.

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

Effective staffing

The practice informed us that since August 2016 the practice provided all staff with appraisals. We saw two records from appraisals completed in 2017 which showed that staff had received a review of their performance and identified areas of development and training. For example, one member of staff stated they needed more training in developing the knowledge of the patient record system and the appraisal document showed they were able to identify the necessary training themselves. The action taken by the provider had ensured that they were meeting the requirements of the regulation previously breached.