

Westwood Road Health Centre

Quality Report

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Berkshire
RG31 5PR

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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 caring?

Good 

Are services well-led?

Good 

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

Letter from the Chief Inspector of General Practice

At our previous comprehensive inspection at Westwood Road Health Centre on 16 December 2016 we found breaches of regulation relating to the safe care and treatment and good governance. The overall rating for the practice was requires improvement, specifically we found the practice to require improvement for the provision of safe, caring and well-led services. It was good for providing, effective, and responsive services. Consequently we rated all population groups as requires improvement. The previous inspection reports can be found by selecting the 'all reports' link for Westwood Road Health Centre on our website at www.cqc.org.uk.

This inspection was an announced inspection carried out on 1 August 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 on 16 December 2016. This report covers our findings in relation to those requirements and improvements made since our last inspection.

We found the practice had made the required improvements since our last inspection and was 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. All six population groups have also been re-rated following these improvements and are also rated as good. Overall the practice is rated as good.

Our key findings were as follows:

- Infection control processes had been reviewed and improved since the last inspection.
- Prescription form security had been improved to ensure prescriptions could be tracked and monitored if they were lost or misused.
- Patient safety alerts were received, recorded and any action required was taken where necessary.
- A review of risk assessments had taken place including risks related to legionella, fire and patient transportation.
- Confidentiality at reception had been reviewed and improvements made to ensure sensitive information was not compromised.
- Patient feedback on the national GP survey had improved significantly since the last inspection.

Summary of findings

- The practice had undertaken system reviews in areas where Care Quality Commission (CQC) identified problems in the last inspection and where staff and leaders had identified potential improvements to services themselves.
- Record keeping had been reviewed and improved to assist in the day to day management of the practice.

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 had taken appropriate action and is now rated good for the provision of safe services.

- Infection control processes had been reviewed and improved since the last inspection. This included staff training and risk assessments for specific areas of concern.
- Prescription form security had been improved to ensure prescriptions could be tracked and traced if they were lost or misused.
- Patient safety alerts were received, recorded and any action required was taken where necessary.
- Legionella risk assessments were in place for all premises.
- Fire drills had been undertaken at all sites.

Good



Are services caring?

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

- Confidentiality at reception had been reviewed and improvements made to ensure sensitive information was not compromised.
- Patient feedback on the national GP survey had improved significantly since 2016, reflected in the publication of the 2017 GP patient survey.
- Means of identifying and supporting carers had improved.

Good



Are services well-led?

The practice had taken appropriate action and is now rated good for the provision of well-led services.

- The practice had undertaken system reviews in areas where CQC identified problems in the last inspection and where staff and leaders had identified potential improvements to services themselves.
- There was an improved system for identifying risks and acting on them to reduce or mitigate risks to patients.
- Record keeping had been reviewed and improved to assist in the day to day management of the practice.

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 provider had resolved the concerns for provision of safe, caring and well led services identified at our inspection in December 2016 which applied to everyone using this practice, including this population group. This population group rating has been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for provision of safe, caring and well led services identified at our inspection in December 2016 which applied to everyone using this practice, including this population group. This population group rating has been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for provision of safe, caring and well led services identified at our inspection in December 2016 which applied to everyone using this practice, including this population group. This population group rating has been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for provision of safe, caring and well led services identified at our inspection in December 2016 which applied to everyone using this practice, including this population group. This population group rating has been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for provision of safe, caring and well led services identified at our inspection in December 2016 which applied to everyone using this practice, including this population group. This population group rating has been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for provision of safe, caring and well led services identified at our inspection in December 2016 which applied to everyone using this practice, including this population group. This population group rating has been updated to reflect this.

Good



Summary of findings

What people who use the service say

We received 24 comment cards which were filled in prior to the inspection by patients. They were all highly positive about the services received. There was positive feedback specifically about the caring nature of all staff and their approach to providing care and treatment and access to appointments

Results from the national GP patient survey 2017 showed there was a significant improvement in patient feedback from the 2016 survey. For example:

- 85% of patients said the GP was good at listening to them compared to the clinical commissioning group (CCG) average of 86% and the national average of 89%. (Previously 77%)
- 85% of patients said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 82% and national average of 85%. (Previously 76%)
- 84% of patients said they found the receptionists at the practice helpful compared to the CCG average of 84% and the national average of 87%. (Previously 75%)
- 71% of respondents are satisfied with the surgery's opening hours compared to the local average of 77% and national average of 76% (previously 64%)

Westwood Road Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

a CQC lead inspector.

Background to Westwood Road Health Centre

Westwood Road Health Centre is located in Tilehurst, Reading. There was a new individual provider, Dr Caverna Tiwari, at Westwood Road Health Centre who had taken over the contract in December 2016, prior to our last comprehensive inspection.. There are two branch sites called Whitley Wood Lane Surgery and Overdown Road Surgery, both are located in Reading in Berkshire. The practice provides services via a Personal Medical Services (PMS) contract (PMS contracts are a contract between NHS England and general practices for delivering medical services). The main practice is based in converted premises and there is parking available. The practice is part of NHS South Reading Clinical Commissioning Group.

The practice has approximately 5,500 registered patients. The practice has patients from all age groups with a slightly higher proportion of patients aged over 55 compared to other age ranges. The area in which the practice is located is placed in the fourth least deprived rating. In general, people living in more deprived areas tend to have a greater need for health services. According to the Office for National Statistics the practice catchment area has a high proportion of people from a White British background.

There is one female GP partner, one male salaried GP, and a female locum GP who works at the practice regularly. Other regular locum GPs supported the practice when needed. The practice employs one advanced nurse practitioner, one practice nurse, one health care assistant, and two phlebotomists. The practice manager is supported by a team of administrative and reception staff.

The main practice and branch practices are open at the following times:

- Westwood Road Health Centre is open between 7.30am and 6.30pm Monday to Wednesday. It is open until 8pm on Thursday and until 5pm on Friday.
- Whitley Wood Lane Surgery is open between 8am and 12.30pm then 2pm and 6pm on Monday, Tuesday, and Thursday and open until 6.30pm on Friday. It is open between 8am and 12.30 pm on Wednesday.
- Overdown Road Surgery is open between 8am and 12.30pm on Tuesday and Thursday.

Phone lines are open between 8am and 6.30pm. When the practice is closed patients are referred to the Out of Hours Service via NHS 111 service.

Services are provided from the following locations:

Westwood Road Health Centre (main practice)

66 Westwood Road

Tilehurst

Reading

Berkshire

RG31 5PR

Whitley Wood Lane Surgery (branch site)

Detailed findings

96 Whitley Wood Lane

Whitley

Reading

Berkshire

RG2 8PP

Overdown Road Surgery (branch site)

6 The Colonnade

Overdown Road

Tilehurst

Reading

Berkshire

RG31 6PR

We visited Westwood Road Health Centre as part of this inspection. The service was previously inspected by CQC in December 2016. We did not visit the branch sites as part of the inspection. You can see our previous inspections by visiting our website.

Why we carried out this inspection

We carried out a previous 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 December 2016 and we published a report setting out our judgements. These judgements identified two breaches of regulation. 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 desktop focussed follow up inspection on 1 August 2017 to follow up and assess whether the necessary changes had been made, following our inspection in December 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 the regulations that had previously been breached.

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

Prior to the inspection we contacted Westwood Road Health Centre and requested information related to the previous breaches of regulation. We carried out an announced visit on 1 August 2017. This was to enable CQC to review evidence of the improvements made. We also spent time reviewing information that we hold about this practice. During the visit we:

- Spoke to a GP, the practice manager and a member of the support team.
- We looked at documentation related to patient care and the management of the practice.
- We made observations of the areas where patients received care and treatment within the practice.

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

- Is it safe?
- Is it caring?
- Is it well-led?

This report should be read in conjunction with the previous inspection report of CQC visit on 16 December 2016.

Are services safe?

Our findings

When we inspected the practice in December 2016 we found that not all processes to address these risks were implemented well enough to ensure patients were kept safe. For example, in relation to patient safety alerts, tracking of blank prescriptions, infection control, legionella, servicing of equipment, provision of patient transport, and gas safety checks.

Overview of safety systems and processes

The practice undertook entire system reviews of infection control, prescription security and training to ensure that these systems operated effectively. The practice had mitigated the risks we identified at the last inspection. For example:

- A local infection control lead from the clinical commissioning group had been requested to visit by the practice and review infection control training and undertake a thorough audit of infection control. The audit showed an improvement in total compliance from 86% in 2016 to 92% in 2017. The practice also undertook a risk assessment on staff who used sharps during patient care and treatment. This focussed on health care assistants and phlebotomists due to a finding at the last inspection where staff were not always aware of

which sharps box to dispose of needles and labelling of samples was not always appropriate. The risk assessment led to further training and an amended protocol for the use of needles.

- We reviewed the system for storing prescription forms. We found the system ensured that blank prescription forms were tracked as they were distributed to various locations in the practice including printers. They were securely stored when the practice was closed.
- Patient safety alerts were received by the practice and acted on. We saw a log of safety alerts which noted actions such as searches on the system for patients potentially at risk in relation to any alerts and stock checks for any highlighted medicines.

Monitoring risks to patients

Risks to patients were fully assessed and managed.

- We saw actions related to risk assessments had been completed in relation to the fire risk assessment for one of the branch sites. There were now fire drills or evacuation testing in place for each site the practice provided.
- There was a legionella risk assessment for each of the practice premises. Gas safety certificates were in place for the relevant sites.

Are services caring?

Our findings

At our previous inspection in December 2017 we found that reasonable measures to ensure patient confidentiality had not always been undertaken. Not all reasonable steps had been taken to identify and support all carers. Data from the 2016 GP patient national survey also showed lower than average ratings in some aspects of the service.

Kindness, dignity, respect and compassion

During this inspection we found that patient confidentiality had been reviewed at reception. All paper notes had been removed from view. A patient information board had been moved to an area out of sight from the public. These actions mitigated the risk that sensitive patient information might be viewed by other patients or the public.

Results from the national GP patient survey 2017 (published in July 2017) showed that patients felt they were treated with compassion, dignity and respect. There was a significant improvement in patient feedback from the 2016 survey (published in July 2016). For example:

- 85% of patients said the GP was good at listening to them compared to the clinical commissioning group (CCG) average of 86% and the national average of 89%. (Previously 77%)

- 85% of patients said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 82% and national average of 85%. (Previously 76%)
- 84% of patients said they found the receptionists at the practice helpful compared to the CCG average of 84% and the national average of 87%. (Previously 75%)

Patient and carer support to cope emotionally with care and treatment

Since December 2016 the practice had used a variety of means to identify a larger number of carers. This included training staff to help them identify carers and promoting the support available for carers. There were 55 carers on the register by August 2017, up from 45 in December. The support provided to this group included annual health checks and referral to a local support group. A carers' champion was also in place at the practice. These measures improved the chances of carers receiving support they may require and the lead GP believed would continue to increase the numbers of carers registered, with the new means identifying them.

Are services well-led?

Good 

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

Our findings

During our inspection in December 2016 although most risks to patients who used services were assessed, there was an ineffective governance framework to support the delivery of good quality care. Comprehensive systems to ensure patient confidentiality were not always implemented by staff. For example, in relation to patient safety alerts, tracking of blank prescriptions, infection control, legionella, gas safety checks, provision of patient transport, and servicing of equipment. There were not appropriate measures to protect patient confidentiality or to identify and support all carers registered at the practice.

Governance arrangements

Since the previous inspection the practice had undertaken comprehensive reviews of the areas where CQC had identified concerns. For example:

- Infection control processes were reviewed and external expertise was enlisted to promote improvements. The practice not only focused on the protocols regarding sharps disposal and sample labels, but looked at staff training across all staff groups.
- The practice had reviewed its record keeping to ensure that staff responsible knew where to find risk assessments and other management documents related to the day to day running of the practice.
- There had been a broader assessment of risk within the practice which led to identification of risks and related action. For example, a risk assessment into a patient transport service had identified that it was potentially too risky to continue in the previous format and so the service was suspended.
- Patient feedback was used as part of the system of governance to identify improvements to the service. For example, additional appointment hours were being provided via a pilot with other GP practices to enhance patient access and this was reflected in improved patient feedback in the national survey from 2016 to 2017. In 2016 64% of patients said they thought opening hours were good compared to 75% in 2017.