

Straight Road Doctors Surgery

Quality Report

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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 caring?

Requires improvement



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Straight Road Surgery on 14 April 2016. The overall rating for the practice was good, however the practice was rated requires improvement for caring. The full comprehensive report on the 14 April 2016 inspection can be found by selecting the 'all reports' link for Straight Road Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 12 April 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 14 April 2016. 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. At our previous inspection on 14 April 2016, we rated the practice as requires improvement for providing caring services as data from the national GP patient survey showed patients rated the practice lower than others for some aspects of care. We also found the practice was not proactive about identifying patients who were also carers. At this inspection we found improvements had been made in identifying patients who were also carers.

However, patients views about some aspects of care, in spite of efforts made to address them, remained relatively low. Consequently, the practice is still rated as requires improvement for providing caring services.

Our key findings were as follows:

- Results of the most recent GP patient survey show patients rated the practice lower than others for some aspects of care.
- The practice had improved its processes for identifying patients who were also carers.

In addition, at the previous inspection we identified a number of areas where improvements should be made. These were as follows:

- The practice should review its procedure for identifying and assessing risks to patients and staff for example fire drills and basic life support training.
- Consider including details of how to access appointments at the local hub service on the practice website.

At this inspection we found improvements had been made.

Summary of findings

- We saw evidence that fire drills were now undertaken every six months. All staff had received basic life support training.
- The availability of services at the local GP hub were advertised at the main entrance to the practice as well as on the practice website. This included opening times, locations and contact details.

However, there were also areas of practice where the provider needs to make improvements.

Importantly, the provider must:

- Continue to seek and act on feedback from patients on the services provided for the purposes of continually evaluating and improving services.

In addition the provider should:

- Continue to review and improve the identification of patients who are also carers to ensure they receive the appropriate level of support.

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 caring?

- Results of the most recent GP patient survey show patients rated the practice lower than others for some aspects of care.
- The practice had improved its processes for identifying patients who were also carers.
- Translation services for patients who did not have English as a first language were clearly advertised.

Requires improvement



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.

Good



- The practice offered proactive, personalised care to meet the needs of the older people in its population.
- The practice was responsive to the needs of older people, and offered home visits and urgent appointments for those with enhanced needs.
- GPs used a risk stratification tool designed to identify patients at highest risk of attending A&E or being admitted to hospital, and also to enable the GPs to have peer to peer discussions regarding patients with similar health concerns
- The practice provided a health check to all registered patients over the age of 75 years as part of the Everyone Counts Health Initiative.
- Nationally reported data showed that outcomes for patients for conditions commonly found in older people were in line with national averages. For instance, patients with hypertension whose blood pressure was well controlled was 84% which was the same as the national average.
- The practice was participating in a CCG pilot scheme in which the practice was aligned to two local nursing homes. The practice had created two extra sessions per week which were exclusively reserved for residents in the nursing homes and this had improved continuity of care for these patients.

People with long term conditions

The practice is rated as good for the care of people with long-term conditions.

Good



- Nursing staff had lead roles in chronic disease management and patients at risk of hospital admission were identified as a priority.
- Outcomes for patients with long term conditions were in line with national averages. For instance, the percentage of patients with diabetes whose blood sugar was well controlled was 83% compared to the national average of 78%. The percentage of patients with chronic obstructive pulmonary disease (COPD) who had a review undertaken including an assessment of breathlessness was 98% compared to the national average of 90%.
- Longer appointments and home visits were available when needed.

Summary of findings

- All these patients had a named GP and a structured annual review to check their health and medicines needs were being met. For those patients with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.

Families, children and young people

The practice is rated as good for the care of families, children and young people.

Good



- There were systems in place to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of A&E attendances. Immunisation rates were relatively high for all standard childhood immunisations.
- Patients told us that children and young people were treated in an age-appropriate way and were recognised as individuals, and we saw evidence to confirm this.
- The practice's uptake for the cervical screening programme was 70%, which was lower than the CCG average of 77% and the national average of 74%. There was a policy to offer telephone reminders for patients who did not attend for their cervical screening test.
- Appointments were available outside of school hours and the premises were suitable for children and babies.
- The practice provided confidential sexual health advice and chlamydia screening to younger people.
- The practice provided child health surveillance and six week check-ups, and offered health education to young parents.

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).

Good



- The needs of the working age population, those recently retired and students had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care.
- The practice was proactive in offering online services as well as a full range of health promotion and screening that reflected the needs for this age group.
- The practice offered a 'Commuter's Clinic' on a Tuesday evening until 8:00pm for working patients who could not attend during normal opening hours.

Summary of findings

- Each GP session included a number of telephone consultation slots for patients who were unable to attend in person or who were unsure if their condition required a visit to the surgery.
- The practice was part of a local co-operative and this meant it could offer appointments until 10:00pm on weekday evenings and between 8:00am and 8:00pm on Saturdays.
- Health checks for patients aged 40 to 74 and cardiovascular risk assessments were undertaken opportunistically and by invitation.

People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

Good



- The practice held a register of patients living in vulnerable circumstances including homeless people, travellers and those with a learning disability.
- The practice had a flexible approach to appointments for patients who were hard to reach for immunisations, annual reviews and long term condition management and would undertake a number of aspects of patient care during any appointment a patient attended.
- The practice offered longer appointments for patients with a learning disability.
- The practice regularly worked with other health care professionals in the case management of vulnerable patients.
- The practice informed vulnerable patients about how to access various support groups and voluntary organisations.
- Staff knew how to recognise signs of abuse in vulnerable adults and children. Staff were aware of their responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.
- Translation services were available for patients who did not have English as a first language but information about this was not readily available to patients.

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).

Good



- 77% of patients diagnosed with dementia had their care reviewed in a face to face meeting in the last 12 months, which is comparable to the national average of 84%

Summary of findings

- The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a comprehensive agreed care plan documented in the record was 90%, the national average was also 90%.
- The practice regularly worked with multi-disciplinary teams in the case management of patients experiencing poor mental health, including those with dementia.
- The practice carried out advance care planning for patients with dementia.
- The practice had told patients experiencing poor mental health about how to access various support groups and voluntary organisations.
- The practice had a system in place to follow up patients who had attended accident and emergency where they may have been experiencing poor mental health.
- Staff had a good understanding of how to support patients with mental health needs and dementia.
- Patients experiencing mental health conditions could book longer appointments.

Straight Road Doctors Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

This desk based review was carried out by a CQC inspector.

Background to Straight Road Doctors Surgery

Straight Road Doctors Surgery provides GP primary care services to approximately 2,600 people living in the Harold Hill neighbourhood of the London Borough of Havering. The practice is in an area that is in the third more deprived decile. The practice's patient age and gender profile is largely in line with national averages, with a slightly higher population of 40 to 50 year olds.

The practice is run by two GP partners, one male and one female, both of whom work part time to provide a combined total of nine sessions per week. The practice provides GP services to two local nursing homes and provides an additional two sessions per week for this. There are two nurse prescribers and one practice nurse, all of whom work part time with a combined Full Time Equivalent of 0.5, a business manager and a practice manager. There are also two receptionists and two administration staff. The Practice is registered with CQC as a partnership.

The practice is open between 8.30am and 1:00pm Monday to Friday and 4:30 and 6:30pm Monday to Wednesday and on Friday. The practice is closed from 1:00pm on Thursday afternoons. Appointments are from 9.00am to 11.00am

Monday to Friday and 5:00pm to 6:30pm Monday to Wednesday and on Friday. Extended surgery hours for pre-bookable appointments are available between 6:30pm and 8:00pm on Tuesdays.

Appointments can be booked up to two weeks in advance, and urgent appointments which can be booked the same day are available for people who need them. Patients could also book appointments 24 hours or 48 hours in advance.

Practice patients are directed to contact the local out of hours provider when the surgery is closed.

The practice operates under a General Medical Services (GMS) contract, and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract). These are: Childhood Vaccination and Immunisation Scheme, Extended Hours Access, Facilitating Timely Diagnosis and Support for People with Dementia, Influenza and Pneumococcal Immunisations, Minor Surgery, Patient Participation, Rotavirus and Shingles Immunisation, Unplanned Admissions and Improving patient Access Online. The practice was previously inspected in September 2013 under the previous methodology and was judged to be compliant.

The practice is registered to carry out the regulated activities of Diagnostic and screening procedures, Maternity and midwifery services, Surgical procedures and Treatment of disease, disorder or injury.

Detailed findings

Why we carried out this inspection

We undertook a desk-based focused inspection of Straight Road Surgery on 12 April 2017. 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

We carried out a desk-based focused inspection of Straight Road Surgery on 12 April 2017. This involved reviewing evidence that:

- Improvements in patient's views about various aspects of care and treatment had been made.
- Processes to improve the identification of patients who were also carers had been made.

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 caring?

Our findings

At our previous inspection on 14 April 2016, we rated the practice as requires improvement for providing caring services as the practice's results from the GP patient survey showed a large proportion of respondents were dissatisfied with various aspects of care. These included consultations with GPs and nurses and their involvement in planning and making decisions about their care and treatment. Also the practice had not adequately prioritised the identification of patients who were also carers. It had only identified 10 patients (0.4% of its practice list) as carers.

At this inspection we found the practice had improved its processes for identifying patients who were also carers and increased the number of patients on their carer's register. The practice's GP patient survey results (published in July 2016) showed some improvement since the previous inspection. However the results remained below average for some aspects of care.

Kindness, dignity, respect and compassion

At the last inspection we found the practice was below average for its satisfaction scores on consultations with GPs and nurses. At this inspection we found the practice's results had generally improved since the previous GP patient survey, however most of the results remained below the national average. For example:

- 70% of patients said the GP was good at listening to them compared to the clinical commissioning group (CCG) average of 83% and the national average of 89%. (61% previously).
- 70% of patients said the GP gave them enough time compared to the CCG average of 81% and the national average of 87%. (66% previously).
- 96% of patients said they had confidence and trust in the last GP they saw compared to the CCG average of 98% and the national average of 97%. (80% previously).
- 62% of patients said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 78% and the national average of 85%. (60% previously).

- 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%. (81% previously).
- 84% of patients said they found the receptionists at the practice helpful compared to the CCG average of 86% and the national average of 87%. (85% previously).

We raised this with the practice who were aware of these results. The survey results had been discussed at a practice meeting and with the Patient Participation Group (PPG) and the practice had carried out its own survey in 2016 (as detailed in the previous inspection report), the results of which were more positive than those of the GP patient survey. Following that, the practice had identified its priorities for improvement and an action plan had been put in place. The action points included starting a Patient Reference Group (PRG) consisting of a range of patient demographics who could be consulted on a regular basis about their experiences of using the practice. This group would be in addition to the existing PPG. It was hoped that having such a group of patients to refer to quickly would support a faster and more efficient method of feedback collection so that any issues could be addressed sooner.

Care planning and involvement in decisions about care and treatment

At the previous inspection we found results from the national GP patient survey showed patients were not positive about their involvement in planning and making decisions about their care and treatment. At this inspection we found whilst there had been some improvement, the results remained largely below average. For example:

- 67% of patients said the last GP they saw was good at explaining tests and treatments compared to the CCG average of 79% and the national average of 86%. (63% previously).
- 65% of patients said the last GP they saw was good at involving them in decisions about their care compared to the CCG average of 73% and the national average of 82%. (58% previously)

Are services caring?

- 81% of patients said the last nurse they saw was good at involving them in decisions about their care compared to the CCG average of 84% and the national average of 85%. (84% previously).

The practice told us they were aware of these results and had discussed this feedback in clinical meetings. We were told steps would continue to be taken to address the concerns highlighted. For example we were told the practice had designed its own survey for patients to give their views about the care and treatment they received.

The practice provided facilities to help patients be more involved in decisions about their care:

- Translation services were available for patients who did not have English as a first language. At the last

inspection we did not see notices informing patients this service was available. On this inspection we were provided with evidence showing a notice had been placed on the notice board in reception.

Patient and carer support to cope emotionally with care and treatment

At the previous inspection we found the practice had only identified 10 patients (0.4%) of its list as carers. For this inspection we were provided with a list showing 25 patients had been identified as carers (0.9%). We saw evidence that a notice had been put on display in the waiting area inviting patients who were carers to identify themselves. Written information was available to direct carers to the various avenues of support available to them.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures 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>The registered person did not do all that was reasonably practicable to ensure effective systems and processes were in place, specifically by failing to:</p> <ul style="list-style-type: none">Effectively act on feedback from patients on the services provided for the purposes of continually evaluating and improving services. <p>This was in breach of regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>