

Colliers Wood Surgery

Quality Report

58 High Street, Merton, London, SW19 2BY

Tel: 02085442311 Date of inspection visit: 30 May 2017

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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?	Good	
Are services well-led?	Good	

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Colliers Wood Surgery on 24 November 2016. The overall rating for the practice was Requires Improvement as:

- The procedures for managing uncollected prescriptions did not ensure safe care and treatment of service users.
- The procedures for managing blank prescriptions did not keep them safe and secure.
- The registered person did not ensure the premises were safe to use for their intended purpose by having an up to date fire risk assessment carried out.
- Data from the GP Patient survey and patient comments showed service users had difficulty accessing appointments and were not satisfied with practice opening times.
- Patient comments showed female service users had difficulty accessing appointments with a female GP.

We also asked the practice to:

• Review how the chaperone system is advertised to patients.

- Implement, monitor and review systems to ensure basic life support training is carried out at the required intervals for all staff.
- Review processes and procedures to improve uptake in the cervical screening programme.
- Review how patients with caring responsibilities are identified and recorded on the clinical system to ensure information, advice and support is made available to them.
- Continue to engage with patients through the development of the practice patient participation group (PPG).

The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Colliers Wood Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 30 May 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 24 November 2016. This report covers our findings in relation to those requirements and also any additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The practice reviewed its policy and procedures for managing uncollected prescriptions and made changes including weekly checks by dedicated members of staff for uncollected prescriptions.
- The practice had reviewed the systems for recording and issuing blank prescriptions and blank prescriptions were removed from printers and stored overnight in a lockable cupboard.
- The practice had carried out a fire risk assessment.
- The practice had improved access to appointments by providing 34 new GP appointments and eight nurse appointments and extended opening hours to 8.00pm three days per week.
- The practice had a female GP providing 26 appointments per week. These appointments were advertised in patient areas and on the practice website.

The practice also demonstrated they had:

- Reviewed how the chaperone system is advertised to patients and had included posters in clinical rooms and all patient areas.
- The practice had put in place measures to ensure basic life support training is carried out at the required intervals for all staff through a training database and calendar system.
- Reviewed processes and procedures to improve uptake in the cervical screening programme, including engaging with a local cancer research facilitator and

- providing advertising materials and information from a local cancer charity. The practice also trained two staff to become cancer champions, encouraging patients in all aspects of cancer screening including cervical cancer. However the practice were not able to demonstrate the impact this had on uptake for the cervical screening programme.
- Reviewed how patients with caring responsibilities were identified by improving advertising in patient areas, ensuring carers were recorded on the computer system and providing a carers pack with information and signposting carers to further support. However the practice were not able to demonstrate an increase in numbers of carers as a result.
- Continued to engage patients through the practice patient participation group (PPG) and had agreed terms of reference for the group. We saw evidence that the group were meeting on a quarterly basis.

The areas where the provider should make improvement

- Review processes and procedures to improve uptake in the cervical screening programme.
- Review how patients with caring responsibilities are identified and recorded on the clinical system to ensure information, advice and support is made available to them.

Professor Steve Field CBE FRCP FFPH FRCGP Chief Inspector of General Practice

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

At our previous inspection on 24 November 2016, we rated the practice as requires improvement for providing safe services as:

- The procedures for managing uncollected prescriptions did not ensure safe care and treatment of service users.
- The procedures for managing blank prescriptions did not keep them safe and secure.
- The registered person did not ensure the premises were safe to use for their intended purpose by having an up to date fire risk assessment carried out.

When we undertook a follow up inspection on 30 May 2017 we found these arrangements had improved. The practice is now rated as good for providing safe services.

Are services effective?

Are services caring?

Are services responsive to people's needs?

At our previous inspection on 24 November 2016, we rated the practice as requires improvement for providing responsive services as:

- Data from the national GP Patient survey and patient comments showed service users had difficulty accessing appointments and were not satisfied with practice opening times
- Patient comments showed female service users had difficulty accessing appointments with a female GP.

When we undertook a follow up inspection on 30 May 2017 we found these arrangements had improved. The practice is now rated as good for providing safe services.

Are services well-led?

Good



Good

Good

Good

The six population groups and what we found

We always inspect the quality of care for these six population groups.

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



Colliers Wood Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Lead Inspector carried out this desk based review.

Background to Colliers Wood Surgery

Colliers Wood Surgery provides primary medical services in Merton to approximately 10,000 patients and is one of 24 member practices in the NHS Merton Clinical Commissioning Group (CCG). The practice operates under a Personal Medical Services (PMS) contract and provides a number of local and national enhanced services (enhanced services require an increased level of service provision above that which is normally required under the core GP contract).

The practice population is in the fifth less deprived decile with income deprivation affecting children and adults higher than national averages.

The practice operates from two sites; the main site, Colliers Wood Surgery, is located at 58 High Street, Colliers Wood, SW19 2BY and the branch site, Lavender Fields Surgery, is located at 182 Western Road, Mitcham, Surrey, CR4 3EB.

The Colliers Wood Surgery site is a converted retail and residential property over three floors. The site comprises consulting rooms, treatment room, waiting area and reception on the ground floor, with consultation rooms, waiting area and practice management facilities on the first floor and practice management facilities on the second floor. All floors were accessible by lift or stairs. Accessible facilities and baby change facilities were available with breast feeding areas available.

The Lavender Fields site is a converted residential ground floor premises, comprising consultation rooms, patient waiting area, reception and practice management facilities. There are disabled access facilities with baby change facilities installed and step free access throughout.

The practice clinical team is made up of two full time male GP partners, two full time male regular locum GPs, one part time female regular Locum GP and sessions provided by locum GPs equivalent to 1.5 whole time equivalent GPs. The practice employs one full time female practice nurse and one part time female healthcare assistant. The practice offers 48 GP sessions per week across both sites. The non-clinical team consists of two managers, four administrative staff and eight reception staff.

The practice main site opens between 8.00am and 6.30pm Monday to Friday. Telephone lines are operational between the hours of 8.00am and 6.30pm Monday to Friday. Appointments are available between 9.00am and 12.00am and between 3.00pm and 6.30pm Monday to Friday. Extended hours appointments are available between 6.30pm and 8.00pm on a Monday, Wednesday and Thursday.

The practice branch site opens between 8.00am and 6.30pm on a Monday, Tuesday and Thursday and between 8.00am and 1.00pm on a Friday. The branch site is closed on a Wednesday. Telephone lines are operational between these same times. Appointments are available between 9.00am and 12.00am and between 3.00pm and 6.30pm on a Monday, Tuesday and Thursday and between 9.00am and 1.00pm on a Friday.

Detailed findings

The provider has opted out of providing out-of-hours (OOH) services to their own patients between 6.30pm and 8.00am when the practice directs patients to seek assistance from the locally agreed out of hours provider through the NHS 111 service.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of maternity and midwifery services, diagnostic and screening procedures and treatment of disease, disorder or injury.

Why we carried out this inspection

We undertook a comprehensive inspection of Colliers Wood Surgery on 24 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement in the safe domain. The full comprehensive report following the inspection on 24 November 2016 can be found by selecting the 'all reports' link for Colliers Wood Surgery on our website at www.cqc.org.uk.

We undertook a follow up inspection of Colliers Wood Surgery in the form of a desk based review on 30 May 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 Colliers Wood Surgery on 30 May 2017. This involved reviewing the action plan the practice submitted following our November 2016 inspection including evidence provided that the practice had:

- Reviewed procedures for the safe and secure management of prescriptions, including blank prescriptions and uncollected prescriptions.
- Ensured an up to date fire risk assessment was carried out and that actions identified were addressed.
- Reviewed and improved patient access to appointments to ensure the needs of service users are met.
- Reviewed how the chaperone system was advertised to patients.
- Implemented systems to ensure basic life support training was carried out at the required intervals for all staff.



Are services safe?

Our findings

At our previous inspection on 24 November 2016, we rated the practice as requires improvement for providing safe services as:

- The procedures for managing uncollected prescriptions did not ensure safe care and treatment of service users.
- The procedures for managing blank prescriptions did not keep them safe and secure.
- The registered person did not ensure the premises were safe to use for their intended purpose by having an up to date fire risk assessment carried out.

These arrangements had improved when we undertook a follow up inspection on 30 May 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

• The practice reviewed its policy and made improvements in the way uncollected prescriptions were managed. The practice trained two members of staff who were responsible for carrying out weekly checks on prescriptions yet to be collected. Any uncollected prescriptions were flagged to the relevant GP for follow up with the patient.

- The practice had reviewed the systems for recording and issuing blank prescriptions. The practice had a dedicated member of staff responsible for ensuring prescription security. On delivery, blank prescriptions were logged and securely stored in a locked cabinet. Prescription use was monitored through record keeping of prescriptions issued. Blank prescriptions were also removed from printers and stored overnight in the locked cabinet.
- The practice had carried out a fire risk assessment following our November 2016 inspection and had effectively managed and mitigated identified risks. For example the practice had identified low level risks including paperwork not stored in filing cabinets and disused computer equipment awaiting collection and had resolved them by ensuring paperwork was correctly stored and computer equipment removed. Medium level risks including risks with electrical equipment had been resolved by removing or replacing items such as heaters in non-clinical areas and extension leads that were too short for their purpose replaced with longer leads.



Are services effective?

(for example, treatment is effective)

Our findings



Are services caring?

Our findings



Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 24 November 2016, we rated the practice as requires improvement for providing responsive services as:

- Data from the GP Patient survey and patient comments showed service users had difficulty accessing appointments and were not satisfied with practice opening times.
- Patient comments showed female service users had difficulty accessing appointments with a female GP.

These arrangements had improved when we undertook a follow up inspection on 30 May 2017. The practice is now rated as good for providing responsive services.

Access to the service

The practice reviewed arrangements for providing extended hours services and offered extended hours appointments from 6.30pm until 8.00pm on a Monday, Wednesday and Thursday from their main practice site.

The practice had also implemented four additional GP clinics and two nurse clinics, providing 34 additional GP and eight nurse appointments per week.

We saw evidence Notices have been put up in all Patient waiting areas, Practice News Letters and Practice web-site informing Patients of these additional appointments

The practice reviewed patient access to a female GP and had improved and signposted patients to information about the 26 appointments available per week. Appointments provided included a mixture of face to face and telephone consultations. We saw evidence of posters and leaflets in waiting areas as well as additional information on the practice website and in discussion with the patient participation group. The practice were also recruiting two new female GPs.

Are services well-led?

Good



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

Our findings