

Eastwick Park Medical Practice

Quality Report

Eastwick Park Avenue
Bookham
Leatherhead
Surrey
KT23 3ND
Tel: 01372 452081
Website: www.eastwickpark.co.uk

Date of inspection visit: 13 December 2016
Date of publication: 31/01/2017

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 safe?

Good



Summary of findings

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3
The six population groups and what we found	4

Detailed findings from this inspection

Our inspection team	8
Background to Eastwick Park Medical Practice	8
Why we carried out this inspection	8
How we carried out this inspection	8
Detailed findings	10

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Eastwick Park Medical Practice on 10 September 2015. The practice was rated as Good for providing caring and responsive services. However, Requires Improvement for safe, effective and well-led services. Following the comprehensive inspection, the practice wrote to us to tell us what they would do to meet the legal requirements in relation to the breaches. We undertook an announced focused inspection on 3 May 2016 to check the provider had followed their action plan and to confirm they met the legal requirements. The practice was rated as Good for providing caring, effective, responsive and well-led services. However, remained Requires Improvement for providing safe services. Following the focused inspection, the practice sent to us an action plan detailing what they would do to meet the legal requirements in relation to the following:-

- Mitigating risks associated with infection control by ensuring that privacy curtains within the practice were regularly laundered and that a clear record of this was kept.

We undertook this announced desk based inspection on 13 December 2016 to check that the provider had followed their action plan and to confirm that they now met legal requirements. The provider was now meeting all requirements and is rated as Good for providing safe services.

This report only covers our findings in relation to those requirements.

- The practice had created a clear record outlining the regular laundering of the privacy curtains and in some instances replaced existing fabric curtains with disposable.

This report should be read in conjunction with the previous reports. You can read the reports, by selecting the 'all reports' link on our website at www.cqc.org.uk

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 safe services.

At our previous focused inspection on 3 May 2016, the practice had been rated as Requires Improvement for providing safe services.

- The practice had been unable to demonstrate they were fully compliant with national guidance on infection control by not ensuring that privacy curtains within the practice were regularly laundered and that a record of this was kept.

At our desk based inspection on 13 December 2016, the practice provided records and information to demonstrate that the requirements had been met.

- The practice had created a record outlining the regular laundering of the privacy curtains and in some instances had introduced disposable curtains in replacement of existing fabric curtains.

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 found during our inspection on 10 September 2015. Concerns found were for safety, effective and well-led domains which applied to everyone using this practice, including this population group. The population group ratings have been updated to good to reflect this.

- Nationally reported data showed that outcomes for patients were good for conditions commonly found in older people.
- The practice offered continuity of care with a named GP.
- Elderly patients with complex care needs and those at risk of all had personalised care plans that were shared with local organisations to facilitate the continuity of care.
- The practice was responsive to the needs of older people, and offered home visits and rapid access appointments for those with enhanced needs.
- The practice supported residents within three residential and nursing homes including a home which was located next to the practice. The practice nominated a lead GP for each care home who provided weekly ward rounds within the homes.
- The practice organised a voluntary car service for patients who required transport in order to attend the practice.
- Following the death of a patient the practice sent a condolence card inviting the carer to attend the practice in order that on-going support could be provided.

Good



People with long term conditions

The provider had resolved the concerns found during our inspection on 10 September 2015. Concerns found were for safety, effective and well-led domains which applied to everyone using this practice, including this population group. The population group ratings have been updated to good to reflect this.

- Nursing staff had lead roles in chronic disease management such as diabetes and respiratory conditions and patients at risk of hospital admission were identified as a priority.
- Longer appointments and home visits were available when needed.
- All these patients had a named GP and a structured annual review to check that their health and medicine needs were being met.

Good



Summary of findings

- For those people with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.
- All patients were routinely collected from the waiting room by their GP. GPs told us this provided the GP with the opportunity to begin their assessment of each patient's condition prior to their arrival in the consulting room.

Families, children and young people

The provider had resolved the concerns found during our inspection on 10 September 2015. Concerns found were for safety, effective and well-led domains which applied to everyone using this practice, including this population group. The population group ratings have been updated to good to reflect this.

- The practice offered continuity of care with a named GP.
- 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 and those who were carers.
- Immunisation rates were good 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.
- Appointments were available outside of school hours and the premises were suitable for children and babies.
- We saw good examples of joint working with midwives and health visitors.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns found during our inspection on 10 September 2015. Concerns found were for safety, effective and well-led domains which applied to everyone using this practice, including this population group. The population group ratings have been updated to good to reflect this.

- The practice provided services to meet the needs of the working age population, those recently retired and students.
- The practice had recently increased the availability of urgent and pre-bookable appointments by recruiting an additional GP partner.
- The practice was proactive in offering online services and patients were able to opt to have their prescriptions delivered using the electronic prescription service to a pharmacy of their choice.

Good



Summary of findings

- Installation of an improved telephone system meant that patients were able to cancel appointments using an automated system.
- The practice provided temporary residents status for students returning from university.
- Practice staff carried out NHS health checks for patients between the ages of 40 and 74 years.

People whose circumstances may make them vulnerable

The provider had resolved the concerns found during our inspection on 10 September 2015. Concerns found were for safety, effective and well-led domains which applied to everyone using this practice, including this population group. The population group ratings have been updated to good to reflect this.

- The practice offered continuity of care with a named GP.
- The practice held a register of patients living in vulnerable circumstances including those with a learning disability.
- It offered longer appointments and carried out annual health checks for people with a learning disability.
- Care was provided to patients with a learning disability living within one residential facility and to those living independently who received support from that facility.
- The lead GP partner provided flu vaccination clinics within the facility and worked closely with the staff team to carry out medicine reviews.
- The practice regularly worked with multi-disciplinary teams in the case management of other vulnerable patients.
- Information was provided to support vulnerable patients in accessing support groups and voluntary organisations.
- 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.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns found during our inspection on 10 September 2015. Concerns found were for safety, effective and well-led domains which applied to everyone using this practice, including this population group. The population group ratings have been updated to good to reflect this.

- The practice held a register of patients experiencing poor mental health and offered continuity of care with a named GP.

Good



Summary of findings

- Patients with severe mental health needs were supported by care plans and received annual .
- The practice regularly worked with multi-disciplinary teams in the case management of patients experiencing poor mental health, including those with dementia.
- The practice undertook dementia screening of patients and ensured early referral to memory assessment services.
- The practice held regular meetings with a consultant psychiatrist to review those patients receiving secondary care and those in primary care whose treatment outcomes could be improved by the input of specialist advice.
- The practice provided information to patients experiencing poor mental health about how to access various support groups and voluntary organisations.
- It had a system in place to follow up patients who had been discharged from secondary care where they had been experiencing poor mental health.

Eastwick Park Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Assistant Inspector.

Background to Eastwick Park Medical Practice

Eastwick Park Medical Practice provides general medical services to approximately 7,400 registered patients. The practice delivers services to a higher number of patients who are aged 65 years and over, when compared with the national average. Care is provided to patients living in residential and nursing home facilities and a local hospice. Data available to the Care Quality Commission (CQC) shows the number of registered patients suffering income deprivation is lower than the national average.

Care and treatment is delivered by four GP partners and three salaried GPs. Five of the GPs are female and two are male. The practice employs a team of two practice nurses and two healthcare assistants. GPs and nurses are supported by the practice manager and a team of reception and administration staff.

The practice is a GP training practice and supports undergraduates and new registrar doctors in training. The practice is open from 8.30am to 6.30pm on weekdays.

Services are provided from: Eastwick Park Avenue, Bookham, Leatherhead, Surrey, KT23 3ND.

The practice has opted out of providing out of hours services to its own patients and uses the services of a local out of hours service.

Why we carried out this inspection

We undertook an announced desk based inspection of Eastwick Park Medical Practice on 13 December 2016. This inspection was carried out to check that improvements had been made to meet the legal requirements planned by the practice, following our focused inspection on 3 May 2016, which saw the practice rated as Requires Improvement for providing safe services. A previous comprehensive inspection had also taken place on 10 September 2015.

We inspected this practice against one of the five questions we ask about services; is the service safe. This is because the service was not meeting some of the legal requirements in relation to this question.

We carried out a desk based inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Detailed findings

How we carried out this inspection

We reviewed information sent to us by the practice that told us how the breaches identified during the focused

inspection had been addressed. We spoke with the practice manager and reviewed information, scanned records and pictorial evidence sent by the practice. This included a clear record of curtain laundering and pictorial evidence of disposable curtains in place and receipt of order.

Are services safe?

Our findings

Cleanliness and infection control

During our inspection on 3 May 2016, the practice had failed to adequately mitigate the risks associated with infection control, although the practice had told us they had introduced regular laundering of privacy curtains in treatment rooms there was no clear record of this and staff could not recall when it had been done.

At this inspection we found that the practice had revised infection control systems and had a clear record showing that privacy curtains had been washed or laundered within an appropriate six-month period. The practice had also trialled the use of disposable curtains in the minor ops room. As a result, the practice had placed an order for further disposable curtains to replace fabric curtains used in one of the treatment rooms and in a consulting room, and were in the process of changing these over. The next change and laundering was due to take place in May 2017.