

Denham Medical Centre

Inspection report

Queen Mothers Drive
Denham Garden Village
Uxbridge
Buckinghamshire
UB9 5GA
Tel: 01895 832012
Website: www.denhammedicalcentre.co.uk

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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 location	Requires improvement	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Requires improvement	
Are services well-led?	Requires improvement	

Overall summary

We carried out an announced comprehensive inspection at Denham Medical Centre in Buckinghamshire on 2 April 2018 as part of our inspection programme.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as requires improvement overall and requires improvement for all population groups.

We rated the practice as **good** for providing safe services because:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- The practice had appropriate systems in place for the safe management of medicines.

We rated the practice as **good** for providing effective services because:

- With the exception of patients with learning disabilities, outcomes of care and treatment was monitored. The management of urgent test results was robust and the practice was proactive in ensuring patients received the urgent care and treatment as quickly as possible.
- The practice could show that staff had the skills, knowledge and experience to carry out their roles.

We rated the practice as **good** for providing caring services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs including the provision of services for people with caring responsibilities.

We rated the practice as **requires improvement** for providing responsive services because:

- Complaints were not handled in accordance with regulations. We found systems and processes for managing complaints were in place however, these were not used effectively.
- Patients said they had timely access to services, the appointment system was easy to use and the information technology available supported their access to services.

We rated the practice as **requires improvement** for providing well-led services because:

- The arrangements for governance were not operated effectively. It was unclear which governance arrangements, strategies or plans had been reviewed.
- Staff morale and feedback was mixed.
- There was limited engagement with patients. For example, there had not been a recent patient survey and there was no active Patient Participation Group (PPG) in place.

The areas where the provider **must** make improvements are:

- Ensure there is an effective system for identifying, receiving, recording, handling and responding to complaints by patients and other persons in relation to the carrying on of the regulated activity.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care. (Please see the specific details on action required at the end of this report).

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Requires improvement
People with long-term conditions	Requires improvement
Families, children and young people	Requires improvement
Working age people (including those recently retired and students)	Requires improvement
People whose circumstances may make them vulnerable	Requires improvement
People experiencing poor mental health (including people with dementia)	Requires improvement

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist advisor and a nurse specialist advisor.

Background to Denham Medical Centre

Denham Medical Centre is a two site GP practice located in Denham, Buckinghamshire and Iver Heath, Buckinghamshire and is one of the practices within Buckinghamshire Clinical Commissioning Group (CCG).

Services are provided from two locations:

- Denham Medical Centre, Queen Mothers Drive, Denham Garden Village, Buckinghamshire UB9 5GA
- Aysgarth Medical Centre, Church Road, Iver Heath, Buckinghamshire SL0 0RW

The practice website is: www.denhammedicalcentre.co.uk

During our inspection we visited both Denham Medical Centre (main practice) and Aysgarth Medical Centre (branch practice).

There are 10 GPs (three GP Partners, one salaried GP, five long term locum GPs and a recently recruited locum GP) at the practice. The all-female nursing team consists of two nurse prescribers, four practice nurses and a health care assistant with a mix of skills and experience.

The practice manager and a team of reception and administrative staff undertake the day to day management and running of the practice. At the time of our inspection, the practice was also receiving additional management support from a management consultant.

Following developments in the local area, in the last six years, the number of registered patients has increased by 26%, from 8,000 to 10,108. The practice population has a proportion of patients in a local care home (approximately 30 registered patients).

According to national data there is minimal deprivation in Buckinghamshire, specifically Denham, Iver and the surrounding areas have high levels of affluence and low levels of deprivation. The practice population has a higher proportion of patients aged 50 and over when compared to the national average.

The practice has opening hours between 8.30am and 1.30pm and 4.30pm and 6.30pm. Between 8am and 8.30am and 1.30pm and 4.30pm a GP remains on site and calls are diverted to a call deputising service. Furthermore, Denham Medical Centre closes at 1.30pm every Thursday and Aysgarth Medical Centre closes at 1.30pm every Wednesday and Friday. Extended hours appointments were available at one of the locations between 6.30pm and 8pm every Tuesday evening. Patients at the practice could access improved access appointments at primary care access hubs across south Buckinghamshire. These improved access appointments

were booked via the patient's registered practice and offered a variety of appointments including up until 8pm Monday to Friday, selected hours on Saturdays and 9am until 1pm on Sunday and Bank Holidays.

Out of hours care is accessed by contacting NHS 111.

The practice is registered by the Care Quality Commission (CQC) to carry out the following regulated activities:
Maternity and midwifery services, Family planning,
Treatment of disease, disorder or injury, Surgical
procedures and Diagnostic and screening procedures.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation	
Diagnostic and screening procedures	Regulation 16 HSCA (RA) Regulations 2014 Receiving and	
Family planning services	acting on complaints	
Maternity and midwifery services	The registered person had failed to establish and operate effectively an accessible system for identifying, receiving recording, handling and responding to complaints by service users and other persons in relation to the carrying on of the regulated activity.	
Surgical procedures		
Treatment of disease, disorder or injury		
	In particular:	
	Complaints were not investigated and proportionate and necessary action was not taken in response to the failures identified by the complaint or investigation. This included verbal complaints.	
	Staff were unclear in their role in receiving, handling and managing complaints.	
	Written records of complaints received and how they were dealt with were not always made and records which were available lacked the information required to confirm complaints had been dealt with appropriately.	
	This was in breach of Regulation 16(1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.	

Regu	lated	activity
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Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This section is primarily information for the provider

Requirement notices

Systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided were not always operated consistently.

In particular:

The correspondence for administering medicines via PSD's did not align to national guidance.

There was an unclear plan to manage the health outcomes for patients with a learning disability.

There was limited evidence in how the practice assessed and monitored patient feedback.

Staff were unclear they understood their roles, responsibilities and accountabilities in managing and recording complaints.

There was an inconsistent version control and review process for practice policies and procedures.

This was in breach of Regulation 17(1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.