

# Rowlands Gill Medical Centre

## Quality Report

The Medical Centre  
The Grove  
Rowlands Gill  
Tyne and Wear  
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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 responsive to people's needs?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced inspection of this practice on 8 September 2015, which resulted in the practice being rated as good overall but as requiring improvement for the responsive domain. This was because:

- Patient satisfaction results in relation to accessing services at the practice were lower than local clinical commissioning group (CCG) and national averages, particularly in relation to satisfaction with opening hours and ease of being able to get through to the surgery by phone.

In September 2016 we commenced a focussed inspection where we asked the practice to send us information to evidence that they had responded to the issues previously identified and improved access to services. This report only covers our findings in relation to this

requirement. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Rowlands Gill medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Our key findings were as follows:

- Current National GP Patients Survey results (July 2016) indicated that some areas of patient satisfaction relating to access to appointments had improved.
- The practice had carried out their own surveys to canvas patient opinion in relation to access and had taken appropriate action in response to the results.
- The practice had taken a number of steps to improve appointment availability and their telephone system.

**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 responsive to people's needs?**

The practice is rated as good for providing responsive services.

- The provider had taken steps to improve access to appointments and had carried out their own patient surveys to assess effectiveness. This included increasing appointment availability, implementing a new telephone system, upskilling staff and reviewing the way in which they managed and supported patients with long term conditions.

**Good**



# Rowlands Gill Medical Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

A CQC lead inspector.

## Background to Rowlands Gill Medical Centre

Rowlands Gill Medical Group provides care and treatment to approximately 6,662 patients from the Rowlands Gill, High Spen, Chopwell and Winlaton Mill areas of Tyne and Wear. The practice is part of the NHS Newcastle Gateshead Clinical Commissioning Group (CCG) and operates on a General Medical Services (GMS) contract.

The practice provides services from the following address:

The Medical Centre

The Grove

Rowlands Gill

Tyne and Wear, NE39 1PW

The surgery is located in a converted two storey ex-residential property. All reception and consultation rooms are on the ground floor and fully accessible for patients with mobility issues. On-site car parking is available, which includes dedicated disabled car parking spaces.

The surgery is open between 8am and 6pm on a Monday to Friday. Appointments are available as follows:

- Monday - 8.10am to 12 midday and 1.30pm to 5.10pm
- Tuesday – 8.10am to 11.50am and 1.30pm to 5.10pm
- Wednesday – 8.10am to 12 midday and 1.30pm to 4.50pm

- Thursday – 8.10am to 12 midday and 1.30pm to 4.50pm
- Friday – 8.10am to 11.30am and 1.30pm to 5pm.

A duty doctor is available each afternoon until the surgery closes at 6pm. Patients registered with the practice are also able to access pre bookable appointments with a nurse or GP at extended access hub sites located in Blaydon and Gateshead. These appointments are available from 8am to 8pm on a weekday and 9am to 2pm on a weekend at Blaydon and from 4pm to 8pm on a weekday and 8am to 2pm on a weekend at Gateshead.

The service for patients requiring urgent medical attention out-of-hours is provided by the NHS 111 service and Gateshead Community Based Care Ltd. Which is also known locally as GatDoc.

Rowlands Gill Medical Centre offers a range of services and clinic appointments including long term condition reviews, childhood immunisation service, anti-coagulation clinic and antenatal monitoring.

The practice consists of:

- Two GP partners (one male and one female)
- Two salaried GPs (both female)
- Three practice nurses (all female)
- Ten non-clinical members of staff including an acting practice manager, secretary, health care assistant, administration assistants and receptionists.

The area in which the practice is located is in the sixth (out of ten) most deprived decile. In general people living in more deprived areas tend to have greater need for health services.

The average life expectancy for the male practice population is 78 (CCG average 77 and national average 79) and for the female population 84 (CCG average 81 and national average 83).

# Detailed findings

67.7% of the practice population were reported as having a long standing health condition (CCG average 56.9% and national average 54%). Generally a higher percentage can lead to an increased demand for GP services. 60% of the practice population were recorded as being in paid work or full time education (CCG average 60.5% and national average 61.5%). Deprivation levels affecting children were lower than local and national averages. Deprivation levels affecting older people were lower than the local CCG average but higher than the national average.

## Why we carried out this inspection

We undertook a review inspection of Rowlands Gill Medical Centre which commenced in September 2016. We asked the practice to send us evidence to confirm that

improvements to access had been made following our comprehensive inspection on 8 September 2015. The review inspection focused on one of the five questions we ask about services; is the service responsive? This is because patient satisfaction scores in relation to access to the services provided by the practice were lower than local and national averages during the previous inspection.

## How we carried out this inspection

In September 2016 we contacted the registered manager by email and asked them to confirm that they had taken action to improve patient satisfaction in relation to access to services and requested that they supply evidence to that effect.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

When we last inspected the practice, in September 2015, we identified some concerns in relation to access to services provided by the practice. In particular we found that:

- The practice was open from 8am to 6pm and a duty doctor was always available until 6pm to deal with emergencies. However appointment availability was limited on some days. For example, on a Monday appointments ran from 8.10am to 11.35am and then from 2.20pm to 5.10pm.
- The results from the National GP Patient Survey available at the time of the inspection in September 2015 revealed that only 45% of respondents were satisfied with the practice opening hours (CCG average 77% and national average 75%)
- The same survey revealed that 54% of respondents found it easy to get through to the practice by phone (CCG average 75% and national average 71%).
- 55% of respondents stated they would recommend the practice to friends or family members (national average 85%)

During the inspection in September 2015 practice management told us that they had appointed an external consultant to carry out a detailed review of the appointment system to try and address these issues. Initial analysis of the findings had been provided by the consultant and the practice was in the process of considering how they could improve access.

During the inspection we commenced in September 2016 we found that:

- The practice opening hours were still 8am to 6pm. However, appointment availability had been increased to seven hours and 30 minutes on a Monday; seven hours and 20 minutes on a Tuesday; seven hours and 10 minutes on a Wednesday and Thursday; and 6 hours and 50 minutes on a Friday.
- Results from the National GP Patient Survey published in July 2016 showed that 54% of respondents were now satisfied with the practice opening hours (CCG average 81% and national average 76%). An improvement of 9% from the data available during our previous inspection.

- The same survey showed that 49% of respondents found it easy to get through to the surgery by phone (CCG average 79% and national average 73%). A decrease of 5% from the data available during our previous inspection.
- 64% of respondents would recommend the surgery to friends or family members (CCG average 64% and national average 78%). An improvement of 9% from the data available during the previous inspection.

Evidence provided by the practice showed that they had taken steps to try and improve access:

- In November 2015 the practice had upgraded their telephone system to include a call queuing facility and the ability to review call management information and statistics. Analysis of the statistics in February 2016 revealed that the call abandonment rate was approximately 5% with the practice answering 94.8% of the 13,370 calls received between 1 October 2015 and 11 March 2016. Further analysis on 14 March 2016 revealed that none of the 78 calls received that day were lost and that the average time taken to answer a call was 16 seconds.
- In addition the practice now ensured three members of staff were available solely to answer the telephones from 8am to 9am. From 9am these staff members continued to answer the phones but incorporated this with their other duties.
- Pre bookable appointments were now available six weeks in advance to allow patients more flexibility to choose their preferred GP and appointment time. The practice had also reviewed the ratio of their appointment availability to ensure that 60% of appointments were pre bookable and 40% retained for same day requests.
- The practice had sent out their own patient survey to 2400 patients with their flu vaccination invitation letters. Of the 141 patients who responded to the survey, 107 (76%) felt it was either very easy or fairly easy to get through to the surgery by phone. 125 patients (89%) reported that they were either very or fairly satisfied with the practice opening hours. 88 patients (62%) felt that they did not normally have to wait too long for an appointment.
- Data available from the friends and family survey completed by the practice in September 2015 indicated that 83 of the 119 respondents (70%) were either

# Are services responsive to people's needs?

(for example, to feedback?)

extremely likely or likely to recommend the practice to friends and family members. The August 2016 results showed that this had increased to 89% (206 of the 231 respondents).

- A treatment room nurse had joined the practice in January 2016. In addition existing staff were expanding their skills. This would enable the health care assistant to be more involved in the management of long term conditions, care planning and smoking cessation. Another non-clinical member of staff was undertaking training to enable them to provide smoking cessation advice and carry out cardiovascular health checks. It was envisaged that this would free up appointment time with the practice nurses and GPs.

- The practice had commissioned an external provider to manage the recall of patients with long term conditions for review. They had also adopted a comorbidity review system to ensure patients with more than one long term condition were offered one, fully comprehensive annual review. This had not only resulted in more nursing capacity but had also led to an improvement in their Quality and Outcomes Framework (QOF) attainment rate since the previous inspection. The practice used the Quality and Outcomes Framework (QOF) as one method of monitoring effectiveness and had achieved 93.1% of the points available to them for the period 2015/16. This compares to 81.6% for 2013/14 and 83.9% for 2014/15.