Forest Health Group

Inspection report

Ringmead
Birch Hill
Bracknell
RG12 7PG
Tel: 01344421364
www.foresthealthgroup.co.uk

Date of inspection visit: 26 October 2021
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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	Good
Are services safe?	Requires Improvement
Are services effective?	Good
Are services caring?	Good
Are services responsive to people's needs?	Good
Are services well-led?	Good

Overall summary

We carried out an announced focused follow up inspection at Forest Health Group on 26 October 2021 to identify if improvements had been made following our previous inspection in May 2019. The 2019 inspection led to a rating of Requires Improvement and found breaches of regulation. We issued the provider with requirement notices in order for the service to make improvements. This inspection was to provide a new rating to the service and ensure the breaches of regulation had been met.

Ratings:

Safe – Requires Improvement

Effective - Good

Well-led - Good

The full reports for previous inspections can be found by selecting the 'all reports' link for Forest Health Group on our website at www.cqc.org.uk

Throughout the pandemic, CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements

The inspection included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A site visit at the practice.

Our findings

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 Good overall and Requires Improvement for providing safe services.

We found that:

- Safety systems had been improved and processes were operated to protect patients from risks. However, we found paper prescription security was not adequate. Action was taken immediately to begin rectifying this finding. Identified fire risks were still in the process of being mitigated.

Overall summary

- Patients were prescribed medicines safely.
- Patients' needs were assessed and their care planned and delivered in line with national guidance.
- Staff were supported and trained to ensure they could access guidance and had the skills and knowledge required to deliver effective and safe care.
- Patients' rights were protected.
- Patients reported being well supported overall in the feedback we received and reviewed.
- There were systems to consider patients' views in relation to the delivery and design of the service.
- Governance processes were clear and had improved since the previous inspection in May 2019.
- The monitoring of staff training had improved.
- There was a process for staff to receive role specific inductions.

The provider **must**:

- Ensure care and treatment is delivered in a safe way.

In addition, the provider **should**:

- Continue to progress actions plans to ensure wherever possible eligible patients receive cervical screening and patients with learning disabilities receive their annual health checks.

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

Our inspection team

Our inspection team was led by a CQC lead inspector and supported by a second inspector. The team included a GP specialist advisor. The inspectors conducted an onsite visit and both team members undertook virtual reviews of evidence and interviews with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Forest Health Group

Forest Health Group is located in Bracknell and there are three sites which provide regulated activities (one main site and two branches):

Ringmead

Birchmill

Berkshire

RG12 7PG

Skimped Hill Lane,

Bracknell,

Berkshire,

RG12 1LH

Boundary House

Mount Lane
Bracknell
Berkshire
RG12 9PG

We visited the Boundary House during this inspection.

The provider is registered with CQC to deliver the following Regulated Activities:

- Diagnostic and Screening Procedures
- Maternity and Midwifery Services
- Treatment of Disease, Disorder or Injury
- Surgical Procedures
- Family Planning Services

The practice is part of Frimley Clinical Commissioning Group.

There are nine GPs working at the practice. There are also a four practice nurses and two healthcare assistants (HCAs). The clinical team are supported by a management team including a practice manager who had only been in the role for three weeks prior to the inspection (following the resignation of the previous manager in the summer). There are a variety of administration and support staff working across all sites.

The practice has a registered list size of approximately 20,000 patients. There are higher than average number of patients under the age of 18 and fewer patients aged over 65 than the national average. The National General Practice Profile states that 9% of the practice population is from black, mixed or other non-white ethnic groups.

Information published by Public Health England, rates the level of deprivation within the practice population group as nine, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 80 years compared to the national average of 79 years. Female life expectancy is 84 years compared to the national average of 83 years.

The practice does not provide Out of Hours (OOH) GP services when the practice is closed. Patients can access OOH services by contacting the NHS 111 telephone service.

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 Family planning services Maternity and midwifery services Treatment of disease, disorder or injury Surgical procedures	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment **How the regulation was not being met:** The provider was not doing all that was necessary in assessing the risks to the health and safety of service users and doing all that is reasonably practicable to mitigate any such risks. Specifically: • Completing actions from risk assessments • Ensuring changes to paper prescription security are embedded.