

# Dr Tony Nasah

## Quality Report

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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 caring?

Requires improvement



Are services responsive to people's needs?

Good



# Summary of findings

## Contents

### Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	5
Areas for improvement	7

### Detailed findings from this inspection

Our inspection team	8
Background to Dr Tony Nasah	8
Why we carried out this inspection	8
How we carried out this inspection	8

## Overall summary

### Letter from the Chief Inspector of General Practice

On 8 March 2017 we carried out a comprehensive inspection as a follow up to the practice's first inspection on 29 June 2016 where they were placed in special measures. In March 2017 we found the practice had made improvements and had improved from an overall rating of inadequate to requires improvement. The practice was rated as requires improvement in March 2017 for providing caring and responsive services and rated as good for providing safe, effective and well-led services. The full report for the June 2016 and March 2017 inspections can be found by selecting the 'all reports' link for Dr Tony Nasah on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We carried out a focused inspection of the practice on 18 September 2017 to establish whether the improvements towards caring and responsive services had been made. We found the practice had made appropriate improvements for providing responsive services; overall the practice is rated as good with requires improvement for providing caring services.

Our key findings across all areas we inspected were as follows:

- Patients satisfaction data from the national GP patient survey, published in July 2017, had positive and

negative variation. The practice were performing in line with local and national averages for their responsive data however they were performing below local and national averages for some aspects relating to the caring domain.

- The practice had created an action plan to improve their patient satisfaction.
- The practice had conducted internal patient surveys to monitor patient satisfaction. 64 out of 100 survey questionnaires were completed of which all had positive feedback.
- The practice had recruited two GPs and a nurse to increase appointment availability and to allow clinicians more time when discussing patients care.
- Patients we spoke with on the day of the inspection were positive towards their care they received at the surgery.
- Staff understood their roles and responsibilities and how these contributed directly to improving patient experiences of the service and the practice's performance.

Actions the practice SHOULD take to improve:

- Continue to monitor national GP patient survey data and identify where improvements can be made.

# Summary of findings

**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 caring?

The practice is rated as requires improvement for providing caring services.

- Patients reported reduced levels of satisfaction with their GP and nurses in the national GP patient survey results published July 2017, results from the practices internal surveys had shown 100% patient satisfaction with the care they received from the GP and the nurses at the practice.
- Patients said they were treated with compassion, dignity and respect and they were involved in decisions about their care and treatment.
- Two clinicians had conducted external training to improve their communication with patients.

**Requires improvement**



### Are services responsive to people's needs?

The practice is rated as good for providing responsive services.

- Patients reported increased levels of satisfaction with their access to service in the national GP patient survey results published July 2017.
- The practice had analysed internal survey results and attended locality meetings to review methods to improve access to their services.
- Patients we spoke with on the day of the inspection were positive and said they did not find it difficult to book an appointment.
- The practice were continuing to monitor their satisfaction levels and awaiting a new telephone system to help improve the efficiency of the system.

**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 practice is rated as good for the care of older people.

- The provider had resolved the concerns for caring and responsive services identified at our last inspection on 8 March 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### People with long term conditions

The practice is rated as good for the care of people with long term conditions

- The provider had resolved the concerns for caring and responsive services identified at our last inspection on 8 March 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### Families, children and young people

The provider was rated as good for the care of families, children and young people.

- The provider had resolved the concerns for caring and responsive services identified at our last inspection on 8 March 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### Working age people (including those recently retired and students)

The provider was rated as good for the care of working age people.

- The provider had resolved the concerns for caring and responsive services identified at our last inspection on 8 March 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### People whose circumstances may make them vulnerable

The provider was rated as good for the care of people whose circumstances may make them vulnerable.

Good



# Summary of findings

- The provider had resolved the concerns for caring and responsive services identified at our last inspection on 8 March 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

## **People experiencing poor mental health (including people with dementia)**

The provider was rated as good for the care of people experiencing poor mental health (including people with dementia).

- The provider had resolved the concerns for caring and responsive services identified at our last inspection on 8 March 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

**Good**



# Summary of findings

## Areas for improvement

### Action the service **SHOULD** take to improve

- Continue to monitor national GP patient survey data and identify where improvements can be made.

# Dr Tony Nasah

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection was carried out by a CQC Lead Inspector.

## Background to Dr Tony Nasah

Dr Tony Nasah is also known as the south wing of the Dipple Medical Centre. The practice is one of four GP practices located in the building who also share the joint parking facilities. There are approximately 3705 patients registered with the practice.

- The practice operates from one location: Dipple Medical Centre, Basildon, Essex SS13 3HQ.
- Services provided include: a range of clinics for long term conditions, health promotion and screening.
- At the time of inspection, the practice had five GPs which included four regular locums (three male and one female).
- The non-clinical team comprises of a practice manager, reception and administrative staff.
- The practice is open between 8am and 6.30pm Monday to Friday, extended hours surgery operates on Wednesdays until 7.30pm. Appointments are from 8am to 1pm and 4pm to either 5.50pm or 7.30pm depending on the day.
- In addition to pre-bookable appointments that could be booked up to three months in advance, urgent appointments are also available on the day for people that need them.
- On evening, weekends and bank holidays out of hours care is provided by IC24 another healthcare provider. This can be accessed by patients dialling either the surgery or 111.

- The practice has a comprehensive website providing information on opening times, appointments, services, staff and patient group information.

## Why we carried out this inspection

We carried out a comprehensive 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.

## How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice. We carried out an announced visit on 18 September 2017. During our visit we:

- Spoke with a range of staff (practice manager, nursing and reception team) and spoke with patients who used the service.
- Reviewed survey comments where patients and members of the public shared their views and experiences of the service.

To get to the heart of patients' experiences of care and treatment, we have asked the following two questions:

- Is it caring?
- Is it responsive to people's needs?



# Detailed findings

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

# Are services caring?

## Our findings

### What we found at our previous inspection in March 2017

The practice was rated as requires improvement for providing caring services. Patients reported improved levels of satisfaction with their GP in the national GP patient survey published July 2016. However, the practice were performing lower than the local and national averages and there had been a decline in satisfaction with the nursing team.

### What we found at this inspection in September 2017

Results from the national GP patient survey data published in July 2017 had shown a decline in some areas of patient satisfaction. The practice had monitored their results and developed an action plan to improve their patient satisfaction however these changes had not reflected improvement within the July 2017 national survey results.

#### Kindness, dignity, respect and compassion

Results from the national GP patient survey, published July 2017 showed patients levels of satisfaction with the service relating to GP and nursing care had reduced since the July 2016 result. For example:

- There had been a 5% reduction in satisfaction compared with the July 2016 results for patients who said the GP was good at listening to them, the practice achieved 70% in July 2017 which was below the local average of 84% and the national average of 89%.
- There had been a 14% reduction with 62% of patients reporting the GP gave them enough time. This was lower than the local average of 82% and the national average of 86%.
- There had been a 7% reduction with 83% of patients reporting confidence and trust in the last GP they saw. This was lower than the local average of 94% and the national average of 95%.
- 64% of patients said the last GP they spoke to was good at treating them with care and concern. This was below the local average of 80% and the national average of 86% and a 3% reduction from the July 2016 results.

- There had been a 9% reduction in satisfaction levels with 75% of patients reporting the last nurse they spoke to being good at treating them with care and concern which was below the local average of 89% and the national average of 91%.
- There had been a 1% improvement with 81% of patients reporting that they found the receptionists at the practice helpful. This was compared to the local average of 83% and the national average of 87%.

#### Care planning and involvement in decisions about care and treatment

Results from the national GP patient survey, published July 2017 showed a slight decline in satisfaction with the practice nursing team. For example:

- There had been a 6% improvement with 83% of patients reporting the last GP they saw was good at explaining tests and treatments which was comparable with the local average of 88% and the national average of 90%.
- There had been a 5% reduction with 63% of patients reporting the last GP they saw was good at involving them in decisions about their care which was below the local average of 75% and the national average of 82%.
- There had been a reduction in satisfaction levels of 8% with 73% of patients reporting the last nurse they saw was good at involving them in decisions about their care which was comparable with the local average of 82% and the national average of 85%.
- There had been a 3% improvement with 97% of patients reporting they had confidence and trust in the last nurse they saw. This was in line with the local average and national average of 97%.

The practice had reviewed their national GP patient survey data, published in July 2016 and 2017. We found they had:

- Discussed individual concerns at team meetings and created an action plan which targeted each area within the survey that required improvement.
- Monitored their complaints regarding care and treatment from nurses and GPs. They had found the nurse had received no formal complaints and the GPs had received two complaints however these were not related to the care and treatment provided by them.
- Encouraged patients to evaluate the care received by completing internal surveys aligned with the national GP patient survey questions and the friends and family test as a method of monitoring patient satisfaction

## Are services caring?

levels. For example we saw comments in August 2017 results that referred to the care at the service being excellent and all 64 patients that completed the internal survey were satisfied with the care they had received.

- Compared their national GP data to other local GPs to see where they can improve and attended local clinical commissioning group (CCG) meetings to share ideas and learn from other surgeries for example they had advertised their missed appointments to patients in order to reduce the hours of lost clinical time.

The practice had developed an action plan to address the concerns highlighted within the national GP patient survey data. The action plan included:

- Customer relations training for two GPs within the practice, the GPs had also carried out consultation reviews as part of their appraisals. As a result of this training they had changed the way they communicated with patients and asked if patients understood or needed information to be clarified for them.
- Implementation of longer appointment times for patients that required them. The practice had employed

a new practice nurse who conducted full day clinics and had the capacity to add extra clinics during extended hours if needed. Staff were encouraged to update their training to improve explanation and involvement for patients.

- Giving patients choices to involve them in decisions regarding their care, for example patients had a choice of which hospital they would like to be treated at and their choice of treatment.

We observed members of staff were courteous, helpful and treated patients with dignity and respect. We spoke with three patients on the day regarding their care and comments we received were positive about the service experienced. Patients said they felt the practice offered an excellent service, they felt the staff always gave them enough time and were good at listening to their needs.

The internal surveys and comments from the friends and family test results had highly recommended the practice nurse, we spoke with patients who said they had felt involved in their care.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

### What we found at our previous inspection in March 2017

The practice was found to require improvement for providing responsive services. Patients reported improved satisfaction with the GPs at the practice in the national GP patient survey. However, patients still reported difficulties contacting the practice by phone and making appointments.

### What we found at this inspection in September 2017

#### Access to the service

The practice was open between 8am to 6.30pm Monday to Friday except on Wednesday where extended hours surgery operated until 7.30pm. Appointments were from 8am to 1pm and 4pm to either 5.50pm or 7.30pm depending on the day. Pre-bookable appointments could be booked up to three months in advance; urgent appointments were also available for people that needed them. The practice nurse who conducted immunisations and cervical screening worked one full day as well as other clinics when demand was high. The healthcare assistant worked daily Monday to Friday.

Results from the national GP patient survey, published July 2017 reflected that levels of satisfaction with their access to the service had improved and were now in line with than the local and national averages.

- We found an improvement of 15% with 72% of patients very satisfied or fairly satisfied with the practice's opening hours compared to the local average of 71% and the national average of 76%.
- We found a 24% improvement in patient satisfaction with 68% of patients finding it easy to get through to the practice compared with the local average of 66% and the national average was 71%.

The practice said they had improved their patient satisfaction by monitoring patients feedback and acting on their suggestions. As a result the practice had:

- Employed two additional GPs for extra appointment capacity.
- Changed the nurses appointments to accommodate patients needs
- Encouraged their receptionists to answer telephone calls within three rings.
- Monitored non-attended appointments and displayed them within the waiting area to help reduce lost clinical time.

Although they had improved their satisfaction levels they were due to implement a new telephone system in late September 2017 which was previously due to be installed in April 2017. The new telephone system would have additional telephone lines and a system to monitor telephone calls. Once implemented the practice aimed to monitor patient satisfaction via internal surveys.

The practice monitored the friends and family tests results at their monthly team meetings to review comments and discuss any changes that could be made. We reviewed the comment cards from March 2017 to August 2017 and found the practice had positive comments regarding the care, treatment and access provided by the practice. In August 2017 the practice recieved 24 comment cards, 94% of the patients would be extremely likely to recommend the service to family or friends the other 6% said they would be likely to recommend the practice.

In addition to the friends and family survey the practice had conducted internal surveys; reception staff encourage patients to complete forms. The practice had received 64 completed forms, 100% had positive feedback relating to the appointment availability and telephone system. Patients we spoke with on the day said they had no complaints getting an appointment and we observed patients booking an appointment for the next day.