

Holmhurst Medical Centre

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 safe?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Holmhurst Medical Centre on 26 October 2016. The overall rating for the practice was good. The full comprehensive report on the October 2016 inspection can be found by selecting the 'all reports' link for Holmhurst Medical Centre on our website at www.cqc.org.uk. The practice sent to us an action plan detailing what they would do to meet the legal requirements in relation to the following:-

- Ensuring that effective communication took place between staff teams, and ensuring that all staff were involved in the review of issues relating to the quality of service, such as significant events and that meetings are held regularly.

Additionally we found that:

- The practice needed to review national patient survey data in relation to GP and nurse consultations and take action to improve this.
- The practice needed to monitor patient satisfaction in relation to accessing appointments and monitoring the effect of changes made to the appointment system.

- The practice needed to take action to ensure all administrative staff received annual appraisals and up to date training.

This inspection was an announced focused inspection carried out on 6 October 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 26 October 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection..

Overall the practice is now rated as good.

Our key findings were as follows:

- Regular monthly practice meetings were held where significant events were discussed. These were minuted and made available to all staff groups. Other meetings were held by staff groups, for example, nurse and administrative staff, where relevant issues were discussed.
- The practice had undertaken annual appraisals appropriately and evidence was seen that all relevant training was up to date.

Summary of findings

- The practice had mixed reviews for patient satisfaction in relation to GP and nurse consultations. For example, results from the national GP patient survey released in July 2017 showed:

90% of respondents said they had confidence in the last GP they saw or spoke to in comparison to the local clinical commissioning group (CCG) average of 96% and the national average of 95%.

78% of respondents said the last nurse they saw or spoke to was good at explaining tests and treatment in comparison to the CCG and national average of 90%.

- The practice had mixed reviews for patient satisfaction in relation to accessing appointments. For example:

60% of respondents said the last appointment they got was convenient in comparison to the CCG average of 82% and the national average of 81%.

However, the friends and family test data documented from July 2017 to October 2017 showed 907 responses of which 739 (81%) showed that

people were either extremely likely or likely to recommend the practice to their friends and family. This was in comparison to the CCG average of 81% and national average of 77% captured in the national GP patient survey for that question.

The practice had been affected by staffing issues for a period of time that might have impacted in lower satisfaction scores within the two previous national GP patient surveys. The practice has since rectified their staffing problems and this has resulted in improvement in the area captured by the friends and family test.

However, there were also areas of practice where the provider should make improvements.

Importantly, the provider should:

- Continue to monitor patient satisfaction levels in all areas that show low satisfaction in the national GP patient survey and continue to take action to improve these areas.

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?

At our previous inspection on 26 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of significant event management required some improvements.

At this inspection in October 2017 we found that the practice undertaken regular practice meetings where significant events and other events relating to the quality of service were discussed. These meetings were all documented and made available to all staff. Additionally, staff groups within the practice also held regular meetings where these issues were discussed as appropriate.

Good



Holmhurst Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our team consisted of a lead CQC Inspector.

Background to Holmhurst Medical Centre

Holmhurst Medical Centre is a GP practice based in Redhill in Surrey. The practice provides GP services to 9756 patients.

The practice has a higher proportion of patients under the age of 18 and a lower proportion of patients over the age of 65 when compared with both the CCG and national averages. In addition the practice had a higher proportion of patients in paid work or education and a smaller proportion of patients with a long standing health condition. The practice is in the second least deprived decile, with significantly less deprivation than the national average and slightly less deprivation than the CCG average.

The practice holds a Personal Medical Service contract and consists of three partners (male and female) and three salaried GPs (male and female). The GPs are supported by three nurses and a phlebotomist, business and practice management and a range of administrative roles. A wide range of services and clinics are offered by the practice including asthma and diabetes.

The practice is open between 8am and 6.30pm Monday to Friday. Extended hours appointments are available on a Wednesday evening until 7.30pm and a Friday morning between 7.30am and 8.30am. In addition to pre-bookable appointments that could be booked up to two weeks in

advance, urgent appointments are also available for people that needed them. Pre-bookable minor illness clinics were available with the nurse as were 'sit and wait' clinics with the duty doctor.

Services are provided from:

Holmhurst Medical Centre, 12 Thornton Side, Redhill, Surrey, RH1 2NP.

Why we carried out this inspection

We undertook a comprehensive inspection of Holmhurst Medical Centre on 26 October 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall but requires improvement in the safe domain. The full comprehensive report following the inspection on October 2016 can be found by selecting the 'all reports' link for Holmhurst Medical Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Holmhurst Medical Centre on 6 October 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

During our visit we:

- Reviewed the training records of staff.
- Reviewed the appraisal process for staff and viewed staff files.

Detailed findings

- Reviewed their significant events and complaints procedure
- Reviewed minutes of practice and staff group meetings
- Reviewed the information available in relation to patient satisfaction levels.

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 safe?

Our findings

At our previous inspection on 20 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of managing and learning from significant events were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 6 October 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

At the comprehensive inspection on 26 October 2016 we had found that the practice carried out a thorough analysis of the significant events. However, not all staff were involved in discussions about these and meetings of staff groups were not always minuted so the practice was unable to demonstrate that incidents were discussed with the wider team.

At this focused inspection in October 2017 we found the provider had addressed our concerns and we saw evidence where issues were discussed at both practice and staff meetings. All monthly practice meetings were minuted and these were made available to all staff.