

Addison Road Medical Practice **Quality Report**

46 Ravenswood Road London E17 9LY Tel: 020 8430 7171 Website: www.addisonroadmedicalpractice.nhs.uk Date of publication: 30/01/2018

Date of inspection visit: 6 December 2017

Good

Good

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

Are services responsive to people's needs?

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 Addison Road Medical Practice on 3 May 2017. The overall rating for the practice was good, but there was a rating of requires improvement for providing responsive services. The full comprehensive report on the May 2017 inspection can be found by selecting the 'all reports' link for Addison Road Medical Practice on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 5 December 2017 to confirm that the practice had carried out their plan to improve patient satisfaction with access to services, including getting through to the practice by telephone and obtaining an appointment. 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:

• Results from the national GP patient survey showed patients rated the practice below local and national

averages for being able to get through to the practice by telephone and access appointments. The practice carried out their own survey and patients rated these services positively.

- The practice increased the number of weekly GP contacts by 36% by introducing a triage system.
- The practice increased the number of hours that it was open each week.
- The practice was a part of the local HUB, which provided GP and nurse appointments on weekday evenings and on weekends. The practice was also open for appointments on Saturdays between 9am and 2pm.
- A new telephone system was installed, which enabled an increased amount of calls to be answered at any given time and included a queuing system.
- The practice carried out regular audits to ensure the efficiency of the new telephone and appointment systems.
 - Information about services and how to complain was available and the practice regularly held health promotion days. Improvements were made to the quality of care as a result of complaints and concerns.

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:

• Results from the national GP patient survey showed patients rated the practice below local and national averages for being able to get through to the practice by telephone and access appointments. The practice carried out their own survey and patients rated these services positively.

Good

- The practice increased the number of weekly GP contacts by 36% by introducing a triage system.
- A new telephone system was installed, which enabled an increased amount of calls to be answered at any given time and included a queuing system.
- The practice carried out regular audits to ensure the efficiency of the new telephone and appointment systems.

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



Addison Road Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team included a lead CQC inspector and a GP specialist advisor.

Background to Addison Road Medical Practice

Addison Road Medical Practice is located in a purpose built health centre, which it shares with community services such as phlebotomy and nursing services. The practice is a part of Waltham Forest Clinical Commissioning Group (CCG).

There are approximately 14,500 patients registered with the practice, 27% of which are under the age of 18 which is higher than the national average of 21%. The practice has a deprivation score of 32, which is similar to the CCG average of 30 and higher (more deprived) than the national average of 22%. The practice has two residential homes that it provides GP services to.

The practice has one male GP partner, one female salaried GP and six sessional GPs who carry out a total of 50 sessions per week and two female and one male practice nurses including a respiratory nurse specialist who carry out an average of 15 sessions per week. The practice also has a practice based pharmacist, a health care assistant, a practice manager, a deputy practice manager and 17 reception/administration staff members.

The practice operates under a Personal Medical Services (PMS) contract (a locally agreed alternative to the standard GMS contract used when services are agreed locally with a practice which may include additional services beyond the standard contract).

The practice is open Monday to Friday between 8:30am to 6:30pm; the practice is also open on a Saturday between 9am and 1:30pm. Phone lines are answered from 8:30am and appointment times are as follows:

- Monday 8:30am to 12:50pm and 2pm to 7:45pm
- Tuesday 8:30am to 1:20pm and 2pm to 7:45pm
- Wednesday 8:30am to 12:50pm and 2pm to 6:30pm
- Thursday 8:30am to 12:50pm, doors open in the afternoon for appointment bookings and prescription requests and emergency patient appointments.
- Friday 8:30am to 12:50pm and 2pm to 6:50pm
- Saturday 9am to 2pm

The locally agreed out of hours provider covers calls made to the practice whilst the practice is closed including directing patients to services including 111.

Addison Road Medical Practice operates regulated activities from one location and is registered with the Care Quality Commission to provide treatment of disease disorder or injury, surgical procedures, maternity and midwifery services, diagnostic and screening procedures and family planning.

Detailed findings

Why we carried out this inspection

We undertook a follow up focused inspection of Addison Road Medical Practice on 5 December 2017. This service had previously been inspected in May 2017 and the practice was rated as requires improvement for providing responsive services, as arrangements in relation to making improvements in patient satisfaction as identified by the GP patient satisfaction survey was not adequate.

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.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 3 May 2017, we rated the practice as requires improvement for providing responsive services as the arrangements in respect of improving patient satisfaction with services were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 5 December 2017. The practice is now rated as good for providing responsive services.

Responding to and meeting people's needs

The practice organised and delivered services to meet patients' needs. It took account of patient needs and preferences.

- The practice joined a resilience scheme run by a local university to further help them understand the needs of its local population and tailor services in response to those needs.
- The practice improved services where possible in response to unmet needs. For example the practice changed their telephone system to include an increased number of incoming telephone lines with more staff on duty to answers calls during busy periods. There was a call divert and queuing system and there was a process that if a patient had been waiting for their call to be answered for more than two minutes their call would be sent to the administration office for an admin member of staff to answer to keep waiting times to a minimum. This new telephone process was regularly audited to monitor its ongoing efficiency and one of the outcomes was less than 2% of telephone calls were dropped.
- The facilities and premises were appropriate for the services delivered.
- The practice made reasonable adjustments when patients found it hard to access services. For example, the practice increased its opening hours and no longer closed its' doors on a Thursday afternoon. A GP triage system was introduced which enabled an average of 236 (36%) extra patient contacts with a GP per week, the practice audited this process and found that during a two week period where 688 triage appointments were requested, only 9% of these were not given the same day.

• Care and treatment for patients with multiple long-term conditions and patients approaching the end of life was coordinated with other services, and where possible patients were given extended appointments so that all their conditions could be addressed in one appointment to reduce the number of times patients had to attend the practice.

Timely access to the service

Patients were able to access care and treatment from the practice within an acceptable timescale for their needs.

- Patients had timely access to initial assessment, test results, diagnosis and treatment.
- Waiting times, delays and cancellations were minimal and managed appropriately. The practice had recorded that only two patients did not attend their triage appointment since the systems inception.
- Patients with the most urgent needs had their care and treatment prioritised.
- The appointment system was easy to use. We saw evidence that the practice also worked with the patient participation group in the design of the appointment system and develop ways to evaluate its effectiveness.

Results from the July 2017 annual national GP patient survey showed that patients' satisfaction with how they could access care and treatment was comparable to local and national averages. This was supported by observations on the day of inspection and completed comment cards. Three hundred and seventeen surveys were sent out and 119 were returned. This represented about 0.8% of the practice population.

- 65% of patients who responded were satisfied with the practice's opening hours compared with the clinical commissioning group (CCG) average of 74% and the national average of 80%.
- 36% of patients who responded said they could get through easily to the practice by phone; CCG 58%; national average 71%.
- 55% of patients who responded said that the last time they wanted to speak to a GP or nurse they were able to get an appointment; CCG 68%; national average 75%.
- 63% of patients who responded said their last appointment was convenient; CCG 73%; national average 81%.

Are services responsive to people's needs?

(for example, to feedback?)

- 51% of patients who responded described their experience of making an appointment as good; CCG 66%; national average 73%.
- 39% of patients who responded said they don't normally have to wait too long to be seen; CCG 47%; national average 58%.

The practice was aware of their low patient satisfaction scores and explained that the survey results were based on aggregated data from July to September 2016 and January to March 2017, which was before the changes to practice services took place. The practice carried out their own patient survey during August and September 2017 and received 173 responses, which represented 1.2% of the practice population. Results showed that 79% of patients were satisfied with the practices opening hours, 57% of patients stated they found it easy to get through to the practice by telephone and 67% of patients stated they were able to get an appointment when they wanted one. These results were now in line with CCG averages and the practice was planning to repeat the survey in December and told us they expected to see further improvements.

Listening and learning from concerns and complaints

The practice took complaints and concerns seriously and responded to them appropriately to improve the quality of care.

- Information about how to make a complaint or raise concerns was available and it was easy to do. Staff treated patients who made complaints compassionately.
- The complaint policy and procedures were in line with recognised guidance. There were weekly meetings held between the practice manager and deputy practice manager where complaints were reviewed and any trends identified. The practice noted that since the change in telephone system and the introduction of triage, no complaints had been received about appointments or difficulty getting through to the practice by telephone. Thirty complaints were received in the last 12 months; this included verbal complaints, written complaints and comments. We reviewed two complaints and found that they were satisfactorily handled in a timely way.
- The practice learned lessons from individual concerns and complaints and also from analysis of trends. It acted as a result to improve the quality of care. For example, we viewed a complaint from a patient regarding a perceived delay in the prescription process. We saw that the practice contacted the patient with an apology and explained the 48 hour prescription request system. This complaint was discussed at a practice meeting where staff were asked to ensure patients were aware when making a request that there was a 48 hour turnaround.