

Townfield Doctors Surgery

Inspection report

34 College Way
Hayes
UB3 3DZ
Tel: 02085735856

Date of inspection visit: 28 September 2022
Date of publication: 07/12/2022

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?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Requires Improvement	
Are services well-led?	Good	

Overall summary

We carried out an announced comprehensive inspection at Townfield Doctors Surgery on 28 September 2022. Overall, the practice is rated as **Good**.

The key questions are rated as:

Safe - Good

Effective - Good

Caring - Good

Responsive - Requires improvement

Well-led - Good

Following our previous inspection on 19 August 2016, the practice was rated good overall and for all key questions.

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

Why we carried out this inspection

This was a comprehensive inspection. We carried out this inspection in response to concerns we received as part of our regulatory functions. At this inspection we covered all key questions:

- Are services safe?
- Are services effective?
- Are services caring?
- Are services responsive?
- Are services well-led?

How we carried out the inspection

Throughout the pandemic, CQC has continued to regulate and respond to risk. At this inspection, we visited the practice which included:

- Conducting staff interviews.
- 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.

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.

Overall summary

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Our clinical records searches showed that the practice had an effective process for monitoring patients' health in relation to the use of medicines including high risk medicines.
- People were not always able to access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.
- There was evidence of quality improvement activity. Clinical audits were carried out.
- The practice's uptake of the national screening programme for cervical cancer screening and childhood immunisation uptake was below the national average.
- Annual appraisals were carried out in a timely manner.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The Patient Participation Group (PPG) was active.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.

We found a breach of regulations. The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The areas where the provider **should** make improvements are:

- Carry out appropriate health checks during the recruitment process.
- Develop a system to monitor repeat prescription box to ensure requesting and collecting repeat prescriptions process works effectively.
- Maintain records when the prescribing competence of a non-medical prescriber is reviewed and discussed with them.
- Continue to encourage and monitor cervical cancer screening and childhood immunisation uptake rates.
- Take necessary steps to address CQC registration issues.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector and included a GP specialist advisor. They undertook a site visit and spoke with the staff and completed clinical searches and records reviews.

Background to Townfield Doctors Surgery

Townfield Doctors Surgery is located in Hayes, West London at:

34 College Way

Hayes

Middlesex

UB3 3DZ

We visited this location as part of this inspection activity. The practice is located in a purpose-built property. The practice is fully accessible.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, surgical procedures, family planning and treatment of disease, disorder or injury.

The practice is situated within the North West London Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 8,600. This is part of a contract held with NHS England.

The practice is part of the Hillingdon confederation, a wider network of GP practices.

The practice is part of the HH Collaborative Primary Care Network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the fourth lowest decile (four of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic makeup of the practice area is 41% Asian, 38% White, 13% Black, 4% Mixed, and 4% Other.

The majority of patients within the practice are of working age. The working age practice population is higher and the older people practice population is lower than the national average.

There are four GP partners. Two GPs are female and two are male, who work a total of 21 GP clinical sessions per week on average. The practice employs two practice nurses, a locum advanced nurse practitioner (ANP) and a phlebotomist (a person who is trained to take a blood sample from a patient). The practice manager is supported by a team of administrative and reception staff. In addition, two clinical pharmacists (employed by the primary care network) are offering sessions at the practice.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the CCG, where late evening and weekend appointments are available. Out of hours services are provided by the Hillingdon Hospital.

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 Surgical procedures Treatment of disease, disorder or injury Maternity and midwifery services Family planning services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>The provider had not done all that was reasonably practicable to assure systems and processes were established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular, we found:</p> <ul style="list-style-type: none">• People were not always able to access care and treatment in a timely way. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>