

# White House Farm 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 effective?

Good



# Key findings

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## Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at White House Farm Medical Centre on 10 May 2016. The overall rating for the practice was good with requires improvement for being well-led. An announced focused follow up inspection was carried out on 19 January 2017. The overall rating for the practice was good with requires improvement for people experiencing poor mental health (including people living with dementia). The full comprehensive report for the inspection of 10 May 2016 and the focused follow up report of 19 January 2017 can be found by selecting the 'all reports' link for White House Farm Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced desk-based review carried out on 12 March 2018 to review in detail the actions taken by the practice to improve the quality of

care for people experiencing poor mental health (including those living with dementia). This report covers our findings in relation to those areas identified and also additional improvements made since our last inspection.

Overall the practice is rated as good and good for people experiencing poor mental health (including those living with dementia).

Our key findings were as follows:

- The care provided to patients experiencing poor mental health (including those living with dementia) had been reviewed. A recall system had been implemented to ensure patients were offered an annual review of their care and this review was recorded in their medical record.

**Professor Steve Field CBE FRCP FFPH FRCGP**

Chief Inspector of General Practice

# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

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

**Good**



# White House Farm Medical Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

A lead CQC inspector

## Background to White House Farm Medical Centre

White House Farm Medical Centre is located in Armthorpe, Doncaster. The practice provides services for 6262 under the terms of the NHS General Medical Services contract. The practice is located in a purpose built building with patient facilities on the ground floor level. The practice catchment area is classed as within the group of the fifth more deprived areas in England. The age profile of the practice population is similar to other GP practices in the Doncaster Clinical Commissioning Group (CCG) area.

The practice has two GP partners, one male and one female. They are supported by three practice nurses, a healthcare assistant, finance manager, practice manager and a team of reception and administration staff.

The practice is open between 8am and 6pm Monday to Friday. Appointments with GPs, practice nursing staff and the healthcare assistant are available during the practice opening hours. When the practice is closed calls are answered by the out-of-hours service which is accessed via the surgery telephone number or by calling the NHS 111 service.

As part of the Care Quality Commission (Registration) Regulations 2009: Regulation 15, there was no registered manager in post. However, an application to add a new registered manager to the CQC registration had been submitted on 13 March 2018.

## Why we carried out this inspection

We undertook a comprehensive inspection of White House Farm Medical Centre on 10 May 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good with requires improvement for being well-led. The practice received a focused follow up inspection on 19 January 2017 and were rated good with requires improvement for people experiencing poor mental health (including those living with dementia). The full comprehensive report and focused follow up report can be found by selecting the 'all reports' link for White House Farm Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a follow up desk-based review of White House Farm Medical Centre on 12 March 2018. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care for people experiencing poor mental health (including those living with dementia).

# Are services effective?

(for example, treatment is effective)

## Our findings

**At our previous inspection on 19 January 2017, we rated the practice as good for providing effective services, however, it was rated requires improvement for people experiencing poor mental health (including those living with dementia) as the arrangements to review and record the care provided needed improving.**

**These arrangements had improved when we undertook a follow up desk-based review on 12 March 2018. The practice is now rated as good for providing effective services for people experiencing poor mental health (including those living with dementia).**

### **Effective needs assessment, care and treatment**

The practice had implemented a new system to recall patients experiencing poor mental health for an annual review. Tasks had been created in the clinical system to alert a designated member of the administration team that a review was due. The practice had changed the way it invited patients in for this review and had started to offer a specific appointment date and time on the appointment letter rather than a reminder to contact the practice to make their own appointment. In addition, the practice would also review a patient experiencing poor mental health opportunistically, if appropriate, when they attended the practice for another matter.

The annual reviews were carried out by a GP usually face to face using a template devised to capture details of a patient's physical and mental health status. This standard template had been reviewed by the GPs to ensure it captured the information required at an annual review and included things like recording their alcohol consumption and blood pressure monitoring. Completed templates were filed directly into the patient's medical record.

### **Monitoring care and treatment**

There was a lead GP who was monitoring the register of patients experiencing poor mental health on a monthly basis as was the practice manager to ensure all patients who required a review had been sent for at the appropriate time. Practice data confirmed all patients on this register had been monitored in 2017/18.

The most recent Quality Outcome Framework (QOF) results published for 2016/17 showed 95.7% of patients experiencing poor mental health had a comprehensive care plan documented in the previous 12 months (which was 4.3% above the CCG average and 5.4% above the national average). This had significantly improved from 28% in 2015/16. The clinical exception reporting rate in 2016/17 for patients experiencing poor mental health who had a comprehensive care plan documented in the previous 12 months was 11.5% which was 7.6% below the CCG average and 1% below the national average.

The number of patients experiencing poor mental health who had a blood pressure recorded in the previous 12 months was 68.7% which was similar to the 68% recorded in 2015/16.

The number of patients who had a record of alcohol consumption recorded in the preceding 12 months was 95.8% which was higher than 80% recorded in 2015/16.

Of those patients living with dementia 81.5% had received a face to face review in the preceding 12 months which was comparable to the CCG average of 82.8% and national average of 83.7%.

QOF is a system intended to improve the quality of general practice and reward good practice. Exception reporting is the removal of patients from QOF calculations where, for example, the patients decline or do not respond to invitations to attend a review of their condition or when a medicine is not appropriate.