

Circuit Lane Surgery

Quality Report

Circuit Lane Surgery
Circuit Lane Surgery
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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



Are services caring?

Requires improvement



Are services responsive to people's needs?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

On 9 December 2015 during a comprehensive inspection of Circuit Lane Surgery we found concerns related to the following: The practice had not evaluated patient feedback in relation to the care received from clinical staff and patient feedback reported poor access to appointments at the practice. In addition we found the practice was not recording the checks of emergency equipment, had failed to dispose of an out of date controlled medicine and had not made patients aware of the availability of a chaperone service. The report setting out the findings of the inspection was published in January 2016.

Following the inspection the practice sent us an action plan detailing how they would improve on the areas of concern. We carried out an announced focused inspection of Circuit Lane Surgery on 28 July 2016 to ensure the changes the practice told us they would make had been implemented and to apply an updated rating.

We found the practice had made significant improvements since our last inspection on 9 December 2015. We have re-rated the practice overall as good.

Specifically, they had made improvements to the provision of responsive provision of services although they remain rated as requires improvement for provision of caring services. The ratings for the practice have been updated to reflect our findings.

At this inspection we found:

- The controlled medicines found at the previous inspection had been appropriately destroyed. The practice was following their assessment by not holding controlled medicines on the premises.
- The chaperone service was promoted by display of posters in the waiting room and each consulting and treatment room.
- The practice held records of regular checks of the emergency equipment.
- Patient feedback in regard to accessing the practice by telephone had improved. The practice had installed a new telephone system with more incoming lines in April 2016.
- Patient feedback in regard to obtaining an appointment in a timely manner had improved. The practice had introduced a revised appointment system in February and March 2016.

Summary of findings

- Patient feedback in regard to being treated with care and concern had improved.
- The practice had invested in customer care training to support staff in delivery of a compassionate service to patients.

However,

- Patient feedback in relation to continuity of care was not wholly positive.
- Patients continued to report problems with the issue of repeat prescriptions

The areas where the provider must make improvements are:

- Responding to feedback from patients in regard to improving continuity of care and clinicians treating patients with care and concern.

In addition the provider should:

- Ensure repeat prescriptions are produced efficiently and in a timely manner.

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?

The practice remains rated as good for providing safe services. In addition to the areas of good practice evidenced at our previous inspection we found at this inspection:

- The controlled medicines found at the previous inspection had been appropriately destroyed. The practice was following their assessment by not holding controlled medicines on the premises.
- The chaperone service was promoted by display of posters in the waiting room and each consulting and treatment room.
- The practice held records of regular checks of the emergency equipment.

However,

- Patients reported that on occasions repeat prescriptions had to be corrected when collected as some medicines requested had not been included in the prescriptions.

Good



Are services caring?

The practice continues to be rated as requires improvement for providing caring services, as there are further areas where improvements should be made.

Whilst there had been some improvement in the patient satisfaction results from the national patient survey there were some aspects of care where the practice was rated lower than average. For example:

- The majority of patients said they were treated with compassion, dignity and respect. However, not all felt cared for, supported and listened to.
- 74% of patients said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 88% national average of 85%.
- 79% of patients said the last nurse they spoke to was good at treating them with care and concern compared to the CCG average of 90% national average of 90%.
- 76% of patients said they found the receptionists at the practice helpful compared to the CCG average of 86% and the national average of 87%.
- Patients remained concerned about continuity of their care and treatment because there was not a permanent team of GPs in post.

Areas of improvement in patient satisfaction included:

Requires improvement



Summary of findings

- 83% of patients said the last GP they saw was good at explaining tests and treatments compared to the clinical commissioning group (CCG) average of 88% and the national average of 86%. In December 2015 the survey results, available at that time, showed 80% of practice patients responded positively to this question. There had been a 3% improvement.
- 79% of patients said the last GP they saw was good at involving them in decisions about their care compared to the CCG average of 83% and national average of 82%. In December 2015 the survey results, available at that time, showed 71% of practice patients responded positively to this question. There had been an 8% improvement.

We also observed some areas of good practice:

- Information for patients about the services available was easy to understand and accessible.
- We saw staff treated patients with kindness and respect, and maintained patient and information confidentiality.

Are services responsive to people's needs?

The practice is rated as good for providing responsive services.

When we inspected the practice in December 2015 there were concerns reported by patients about accessing the practice by telephone and obtaining appointments.

We found the practice had made improvements to both the telephone and appointment systems since our last inspection.

- Patients reported improved access via telephone. Staff duties had been reorganised to increase the number of staff answering the phone at peak times.
- The number of incoming telephone lines had been increased and call handling data showed that over 70% of incoming calls were answered promptly (within three rings).
- Friends and family test results showed an improvement in the number of patients who would recommend the practice to others. The increase had been from 57% in January to March 2016 to 86% in May to July 2016.
- The appointments system had been reorganised to enable patients to book routine appointments in advance. This had resulted in improved patient feedback in regard to accessing appointments.
- The practice had good facilities and was well equipped to treat patients and meet their needs.
- Patients were able to book appointments online.

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 practice offered proactive, personalised care to meet the needs of the older people in its population.
- It was responsive to the needs of older people, and offered home visits and urgent appointments for those with enhanced needs.
- The practice employed a community nurse for the elderly who undertook care reviews at the patient's home.
- Data showed that outcomes for patients with conditions commonly found in older patients was above CCG and national averages.

Good



People with long term conditions

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

- Nursing staff had lead roles in chronic disease management and patients at risk of hospital admission were identified as a priority.
- The practice achieved all the national targets for care of patients diagnosed with diabetes.
- Longer appointments and home visits were available when needed.
- All these patients had a named GP and were offered a structured annual review to check that their health and medicines needs were being met.
- For those patients with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people.

- There were systems in place to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of A&E attendances.
- Immunisation rates were relatively high for all standard childhood immunisations.

Good



Summary of findings

- The cervical screening rate for the practice was 91% compared to the CCG average of 83% and national average of 82%
- Appointments were available outside of school hours and the premises were suitable for children and babies.

Working age people (including those recently retired and students)

The practice is rated as good for the care of working-age people (including those recently retired and students).

- The needs of the working age population, those recently retired and students had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care.
- The practice was proactive in offering online services as well as a full range of health promotion and screening that reflects the needs for this age group.
- Extended hours clinics were held until 8pm on two evenings each week a Saturday morning clinic was held on alternate weeks.
- Telephone consultations were available.

Good



People whose circumstances may make them vulnerable

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

- The practice held a register of patients living in vulnerable circumstances including carers and those with a learning disability.
- The practice offered longer appointments for patients with a learning disability.
- The practice regularly worked with other health care professionals in the case management of vulnerable patients.
- The practice informed vulnerable patients about how to access various support groups and voluntary organisations.
- Staff knew how to recognise signs of abuse in vulnerable adults and children. Staff were aware of their responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.

Good



People experiencing poor mental health (including people with dementia)

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

Good



Summary of findings

- 100% of people diagnosed with dementia had had their care reviewed in a face to face meeting in the last 12 months.
- The practice achieved 100% of the national targets for care of patients with mental health problems.
- The practice regularly worked with multi-disciplinary teams in the case management of people experiencing poor mental health, including those with dementia.
- It carried out advance care planning for patients with dementia.
- The practice had told patients experiencing poor mental health about how to access various support groups and voluntary organisations.
- It had a system in place to follow up patients who had attended accident and emergency where they may have been experiencing poor mental health.
- Staff had a good understanding of how to support people with mental health needs and dementia.

Summary of findings

Areas for improvement

Action the service **MUST** take to improve

- Responding to feedback from patients in regard to improving continuity of care and clinicians treating patients with care and concern.

Action the service **SHOULD** take to improve

- Ensure repeat prescriptions are produced efficiently and in a timely manner.

Circuit Lane Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

This follow up inspection was undertaken by a CQC lead inspector.

Background to Circuit Lane Surgery

Circuit Lane Surgery is located in the Southcote area of Reading. The premises were purpose built as a medical centre and cover two storeys. All consulting and treatment rooms are on the ground floor. There are approximately 10,300 patients registered with the practice. The age profile of the registered population is similar to the national average with slightly more patients aged between 55 and 69 than average. There are a number of patients experiencing income deprivation.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8.30am to 12pm every morning and 2.30pm to 6pm daily. Extended hours surgeries are offered on Monday and Thursday evenings between 6.30pm and 8pm and on alternate Saturday mornings between 8.30am and 11am.

When the practice is closed, out-of-hours (OOH) GP cover is provided by the Westcall OOH service. Notices on the entrance door, in the patient leaflet and on the practice website clearly inform patients of how to contact the OOH service.

Circuit Lane Surgery continues to experience a period of significant instability which has been evident since early 2015. The partnership that previously held the contract was disbanded in February 2015. NHS England offered an

interim contract to maintain services for the local population. Berkshire Healthcare NHS Foundation Trust took on the temporary contract from February 2015. The permanent contract was put out to tender in early 2016 and Berkshire Healthcare NHS Foundation Trust chose not to submit a tender to continue to manage the service. The Trust has continued to manage and maintain the services until a new provider takes on the service from 1 September 2016. There has been, and continues to be, a high turnover of clinical staff since the previous partnership folded. The team of GPs and practice nurses has increased because the Trust recognised that the practice required additional clinical input.

All services are provided from; Circuit Lane Surgery, 53 Circuit Lane, Southcote, Reading, Berkshire, RG30 3AN.

Why we carried out this inspection

We carried out a comprehensive inspection on 9 December 2015 and published a report setting out our judgements. We undertook a focused follow up inspection on 28 July 2016 to check that the practice had taken the actions they told us they would make to comply with the regulations they were not meeting at the previous inspection.

We have followed up to make sure the necessary changes had been made and found the provider was now meeting the fundamental standards included within this report in regard to provision of responsive services. The provider remained in breach of regulations in respect of provision of caring services. The focused inspection also enabled us to update the ratings for the practice. This report should be read in conjunction with the full inspection report.

Detailed findings

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We carried out an announced visit on 28 July 2016. During our visit we:

- Spoke with one of the GPs and two members of the reception staff.
- Also spoke with seven patients. Three of whom were members of the patient participation group (PPG).
- Observed how patients were being cared for and talked with a carer.
- Reviewed records relevant to the management of the service.

Because this was a focused follow up inspection we looked at two of the five questions we always ask:

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

The practice had been rated as requires improvement at the inspection of December 2015. This rating affected all population groups. Therefore, we also looked at the improvements made in how well services were provided for specific groups of people and what good care looked like for them. The population groups are:

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

Are services safe?

Our findings

When we visited the practice in December 2015 we found that some of the systems to keep patients safe were not being operated consistently. For example, the practice had not been recording checks of emergency equipment, a cupboard contained controlled medicines that should have been securely destroyed and the availability of the chaperone service was not promoted. The practice was, however, rated good for provision of safe services and we have not changed this rating based on our findings in July 2016.

The practice sent us an action plan telling us how they would address these issues. During this inspection we found the actions detailed in the plan had been taken. Our findings were:

Safety systems and processes

- The practice had ensured there were notices in the waiting room and in consulting and treatment rooms advised patients that chaperones were available if required. All staff who acted as chaperones were trained for the role and had received a Disclosure and Barring Service (DBS) check. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).

- The practice had ensured the safe destruction of controlled drugs (medicines that require extra checks and special storage because of their potential misuse) found at the inspection in December 2015. The practice had reviewed the need to hold controlled drugs and decided they were not required. There were no controlled drugs held on the premises.
- The practice had received a number of complaints regarding items being missed from repeat prescriptions. Patients we spoke with told us of similar occurrences. The practice was aware and was monitoring production of repeat prescriptions. Improvement had been made to ensure requests for repeat prescriptions were fulfilled within 48 hours of the request.

Arrangements to deal with emergencies and major incidents

The practice had adequate arrangements in place to respond to emergencies and major incidents.

- Equipment and medicines held for use in an emergency were held at the practice. When we visited the practice in December 2015 the practice did not retain records to confirm that the emergency equipment had been checked. The practice had introduced recording of the checks of the emergency equipment and improvement had therefore, been achieved.

Are services caring?

Our findings

When we inspected the practice in December 2015 we found patient feedback in relation to being treated with care and concern was below average. The practice was running with a team of salaried and locum GPs and there was high turnover amongst the locum GPs. The nursing team was in a state of change with new nurses having recently joined the team.

During this inspection we found that a permanent team of nursing staff was in post. There were three practice nurses (making the equivalent of 2.5 whole time nurses) and two part time health care assistants (HCAs) in post. There was an HCA on duty every day which meant blood tests were available on a daily basis. The GP workforce continued to comprise a mix of salaried and locum GPs. The Trust had not appointed more permanent or contracted staff because they were due to depart the contract on 31 August.

Kindness, dignity, respect and compassion

We observed members of staff were courteous and very helpful to patients and treated them with dignity and respect. The reception team had taken part in three customer care training sessions. One of these had focused on supporting patients with mental health problems. We spoke with two members of the team. They told us they had benefited from the training and from strong support from practice management. They felt better able to deal with patient interactions following their training. They gave us examples of the training helping them gain a better understanding of mental health problems and how they adjusted the way they worked to support patients with these problems.

We spoke with three members of the patient participation group (PPG) and four patients. They told us they generally satisfied with the care provided by the practice and said their dignity and privacy was respected. However, all patients said they found obtaining continuity of care difficult with the constantly changing workforce of locum GPs. They also told us that this could result in them feeling rushed during a consultation because they needed to tell the new locum GP of their past medical history.

Results from the national GP patient survey remained mixed. For example:

- 85% of patients said the GP was good at listening to them compared to the clinical commissioning group (CCG) average of 93% and the national average of 89%.
- 83% of patients said the GP gave them enough time compared to the CCG average of 89% and the national average of 87%.
- 95% of patients said they had confidence and trust in the last GP they saw compared to the CCG average of 97% and the national average of 95%.
- 74% of patients said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 88% national average of 85%.
- 79% of patients said the last nurse they spoke to was good at treating them with care and concern compared to the CCG average of 90% national average of 90%.
- 76% of patients said they found the receptionists at the practice helpful compared to the CCG average of 86% and the national average of 87%.

However, we reviewed the results of the friends and family recommendation test for May to July 2016. This showed that 114 out of 132 patients would recommend the practice to others (86%). Patients who had added comments to their return referred to high standards of care and attention and kindness displayed by all staff. We noted that the national survey had been taken during the period of uncertainty when the contract to provide care from the practice was undergoing the tender process. It had also been taken before the nursing team was at full establishment and the customer care training for staff had been undertaken. The friends and family test results and comments were more recent and followed the implementation of the new appointments system and installation of the new telephone system.

We were made aware that the provider had not been able to appoint a permanent team of staff because they would not have responsibility for the service after 31 August 2016.

Care planning and involvement in decisions about care and treatment

Results from the national GP patient survey showed patients responded positively to questions about their involvement in planning and making decisions about their care and treatment. Results were in line with local and national averages. For example:

- 83% of patients said the last GP they saw was good at explaining tests and treatments compared to the clinical commissioning group (CCG) average of 88% and the

Are services caring?

national average of 86%. In December 2015 the survey results, available at that time, showed 80% of practice patients responded positively to this question. There had been a 3% improvement.

- 79% of patients said the last GP they saw was good at involving them in decisions about their care compared to the CCG average of 83% and national average of 82%.

In December 2015 the survey results, available at that time, showed 71% of practice patients responded positively to this question. There had been an 8% improvement.

- 82% of patients said the last nurse they saw was good at involving them in decisions about their care compared to the CCG and national average of 85%)

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

When we visited Circuit Lane Surgery on 9 December 2015 we found the practice had not responded to patient feedback in regard to accessing the practice by telephone and to the availability of appointments for patients requiring routine advice, care and treatment. We found the practice in breach of the regulation relating to acting upon patient feedback. At that time the practice had commenced changes to the appointment system and planned installation of an upgraded telephone system. However, the changes were very early in their implementation and had not been evaluated. The practice sent us an action plan setting out their evaluation plans. At this inspection we found the practice had taken improvement action in accordance with their plan.

Responding to and meeting people's needs

When we inspected the practice in December 2015 we found the appointment system was not responding to patient's needs. All requests for appointments were placed on a telephone triage list for the GPs to call the patient back and assess the need for the patient to be seen. The appointment system underwent a major reorganisation in January and February 2016. The new system enabled patients to book appointments up to two weeks in advance. It also introduced a wider range of appointment booking opportunities including online booking.

- The practice offered extended hours clinics until 8pm on a Monday and Thursday. In addition a Saturday morning clinic was held on alternate Saturday's between 8.30am and 11am. These clinics were beneficial for working patients who could not attend during normal opening hours.
- There were longer appointments available for patients with a learning disability.
- Home visits were available for older patients and patients who had clinical needs which resulted in difficulty attending the practice.
- Same day appointments were available for children and those patients with medical problems that require same day consultation.

Access to the service

The practice was open between 8am and 6.30pm Monday to Friday. Appointments were from 8am to 11.50am every morning and 3pm to 5.50pm daily. Extended hours appointments were offered until 8pm on a Monday and

Thursday and on alternate Saturday mornings between 8.30am and 11am. In addition to pre-bookable appointments that could be booked up to six weeks in advance, urgent appointments were also available for people that needed them.

The national patient survey results were published in July 2016. However, the results related to a survey period of January to March 2016. This meant the results were taken from a period when the practice was in the process of changing the appointment system and prior to the installation of the new telephone system. The telephone system upgrade did not take place until April 2016. Results from the national GP patient survey consequently were mixed.

- 89% of patients said they were able to get an appointment to see or speak to someone the last time they tried compared to the clinical commissioning group (CCG) average of 87% and national average of 85%.
- 74% were satisfied with the practice's opening hours compared to the CCG average of 75% and the national average of 76%.
- 94% of patients said the last appointment they got was convenient compared to the CCG average of 93% and the national average of 92%.

However,

- 47% said could get through easily to the practice by phone compared to CCG average of 76% and the national average of 73%.
- 61% described their experience of making an appointment as good compared to the CCG average of 75% and the national average of 73%.

These results were from a period before the upgraded telephone system had been installed and reception staff underwent enhanced customer care training.

To obtain more up to date patient feedback we looked at the results of the friends and family test for the months of May, June and July (up to the date of our inspection). These showed a more positive picture of patient satisfaction with the service. There had been a total of 132 patients complete the survey since May 2016. Of these 114 (86%) would recommend the practice to others. This was a significant improvement from the 57% recommendation

Are services responsive to people's needs?

(for example, to feedback?)

rate reported in the last national patient survey. We noted comments from patients relating to an improvement in access and appreciation of the ability to book an appointment in advance, or online.

We also spoke with three members of the patient participation group (PPG). The group was well established. The members of the PPG were well known in the community and were active in seeking views from fellow patients. They told us that they were receiving positive comments from fellow patients about now being able to get through to the practice by telephone and in being able to book routine appointments in advance. They also said that their own experiences in this regard had been positive in recent months. We also spoke with four patients. They told us that access to the practice by telephone had improved and that they had been able to book appointments at a time that suited them.

The upgrade to the telephone system had increased the number of incoming telephone lines from two to four (and at peak times six). This had improved phone access. Staff rosters had been adjusted to ensure four staff were available to answer incoming calls at peak times. The practice was able to review their performance in responding to incoming phone calls. We looked at a sample of the data relating to response times for answering

calls. This showed that approximately 70% of 3700 calls had been answered promptly. Patients had voiced their concerns that a short delay from choosing a call option to receiving a queue position or speaking to a member of staff left them not knowing if they were still connected. Consequently the practice was working with the system supplier to correct an issue with a short delay between the patient choosing the option to book an appointment to hearing that they were in the queue or the call answered.

Listening and learning from concerns and complaints

Prior to carrying out this inspection we reviewed information from the local Healthwatch (Healthwatch is the body that acts as patient champions for all health and social care services). This information related to the practice not responding to patient complaints. We looked at the records of the practice responding to 14 complaints received in January and February 2016. These showed that complaints had been acknowledged promptly. A thorough investigation had taken place and the complainant received an honest and open response in a timely manner. We reviewed two complaints in detail. Both had been thoroughly investigated. When the patient received a reply it was detailed and contained an apology.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>17.—(1) Systems or processes must be established and operated effectively to ensure compliance with the requirements in this Part.</p> <p>(2) Without limiting paragraph (1), such systems or processes must enable the registered person, in particular, to—</p> <p>(a) assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity (including the quality of the experience of service users in receiving those services);</p> <p>(f) evaluate and improve their practice in respect of the processing of the information referred to in sub-paragraphs (a) to (e).</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• Feedback from patients regarding continuity of care was not positive.• Feedback from patients for several aspects of care was below local and national averages.• Whilst progress had been made to improve care the provider had not completed all actions within their improvement plan. <p>This was a breach of regulation 17 (1) & (2), (a) & (f) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – Good Governance.</p>