

# Chobham and West End Medical Practice

## 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 Chobham and West End Medical Practice on 1 December 2015. The overall rating was good. During the inspection we found breaches of legal requirements and the provider was rated as requires improvement under the safe key question. Following this inspection 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 all complaints and safety incidents and their investigation were recorded thoroughly and that learning was shared appropriately to support improvement.
- Ensuring that blank prescription forms were stored securely and tracked.
- Ensuring that clinical waste was stored securely.

The full comprehensive report on the 1 December 2015 inspection outcome can be found by selecting the 'all reports' link for Chobham and West End Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

An announced focused inspection was carried out on 7 February 2017. This inspection was to verify if the practice had carried out their action plan to meet the legal

requirements in relation to the breaches in regulations that we had identified in our previous inspection on 1 December 2015. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

We saw that the practice had made significant improvements since our December 2015 inspection. Overall the practice is rated as good.

Our key findings were as follows:

- There was an open and transparent approach to safety and an effective system in place for reporting, recording and investigating significant events. Learning was shared with appropriate staff to support improvement.
- Blank prescription forms were being tracked and stored securely.
- Clinical waste was stored securely.

At our previous inspection on 1 December 2015, we found that the practice was performing below local and national averages for monitoring and reviewing patients experiencing poor mental health, uptake of flu vaccines and childhood immunisations. We also noted that the practice was not maintaining a complete contemporaneous record for all patients.

# Summary of findings

During our inspection 7 February 2017 we saw;

- The practice was maintaining complete contemporaneous medical records for all patients.
- The practice had a schedule in place to ensure regular reviews and monitoring of patients that were vulnerable or experiencing poor mental health.

The areas where the provider should make improvement are:

- Continue regular review of patient treatment outcomes to ensure increased uptake in childhood immunisations.

**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 is rated as good for providing safe services.

Following our previous inspection in December 2015 the practice had made significant improvements. During our inspection in December 2015 we identified concerns with the security of blank prescription forms, significant events and incidents (recording, investigating and sharing learning) and storage of clinical waste.

At the inspection on 07 February 2017, we found:

- There was an effective system in place for reporting and recording significant events and the investigation and outcomes of investigations.
- We saw a central recording system that was accessible to all staff from their workstations.
- Lessons were shared to make sure action was taken to improve safety in the practice.
- When things went wrong patients received reasonable support, truthful information, and a written apology. They were told about any actions to improve processes to prevent the same thing happening again.
- Blank prescription forms were stored securely and tracked within the practice and across both locations.
- Clinical waste was stored securely, including prior to collection.

**Good**



# Summary of findings

## What people who use the service say

The national GP patient survey results published in July 2016 showed the practice was still performing in line with local and national averages. 220 survey forms were distributed and 126 were returned. This represented approximately 1% of the practice's patient list.

Data from the national patient survey showed that:

- 63% (previously 69%) found it easy to get through to this surgery by phone compared to a CCG average of 67% and a national average of 73%.
- 83% (previously 89%) found the receptionists at this surgery helpful (CCG average 84%, national average 87%).
- 86% (previously 87%) were able to get an appointment to see or speak to someone the last time they tried (CCG average 85%, national average 85%).
- 92% (previously 87%) said the last appointment they got was convenient (CCG average 92%, national average 92%).
- 60% (previously 68%) described their experience of making an appointment as good (CCG average 70%, national average 73%).
- 63% (previously 51%) usually waited 15 minutes or less after their appointment time to be seen (CCG average 65%, national average 65%).

# Chobham and West End Medical Practice

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team consisted of a CQC lead inspector.

16 Windsor Road, Chobham

Woking, Surrey

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## Background to Chobham and West End Medical Practice

The Chobham & West End Medical Centre has a main surgery in Chobham with a branch site in West End, both are purpose built properties. At the time of our inspection there were 11,100 patients on the practice list.

The practice has six GP partners and three salaried GPs (one male and eight female), which is equivalent to nearly 6 whole time GPs. The practice employs a team of one nurse practitioner as a community matron, three nurses, three health care assistants, a practice manager, a deputy practice manager, reception and administration staff. The Chobham surgery is open from 8am to 6.30pm Monday to Friday; West End is open from 8am to 6.30pm Monday, Wednesday and Friday and 8am to 1pm Tuesday and Thursday. Patients requiring a GP outside of normal hours are advised to call the NHS 111 service or 999 for medical emergencies. The practice has a GMS (General Medical Services) contract and offers enhanced services for example; various schemes for immunisation and facilitating timely diagnosis and support for people with dementia.

The service is provided at the following locations:

The Surgery

The practice population has a higher number than average of patients 10 to 14 years and 40 to 59 years, it has a lower number than average of patients 0 to 4 years and 20 to 39 years. It also has a slightly lower than average percentage of patients with long standing health conditions and higher than average number of patients with caring responsibilities.

## Why we carried out this inspection

We undertook a comprehensive inspection of Chobham and West End Medical Practice on 1 December 2015 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report following the inspection on December 2015 can be found by selecting the 'all reports' link for Chobham and West End Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a follow up focused inspection of Chobham and West End Medical Practice on 7 February 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.

# Detailed findings

## How we carried out this inspection

We carried out a focused inspection of Chobham and West End Medical Practice on 7 February 2017. This involved reviewing evidence that:

- Significant events and incidents were all recorded. All significant events and incidents were investigated thoroughly and learning was shared appropriately to support improvement.
- A secure facility for clinical waste storage had been implemented.

- Policies and procedures for tracking and storing blank prescription forms had been updated.

During our visit we:

- Spoke with a range of staff (the practice manager and reception staff).
- Observed how patients were being cared for in the reception area.

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 1 December 2015, we rated the practice as requires improvement for providing safe services as the arrangements in respect of the recording investigating and sharing learning from significant events and incidents, tracking and storage of blank prescription forms and storage of clinical waste required improvement.**

**These arrangements had significantly improved when we undertook a follow up inspection on 7 February 2017. The practice is now rated as good for providing safe services.**

### Safe track record and learning

During our inspection in December 2015 we found that not all significant events or incidents were recorded, and of those that were we found that not all were investigated thoroughly enough or the learning shared sufficiently to support improvement.

At our inspection in February 2017 we found that the system for recording and investigating significant events had been reviewed and improved. We saw that the practice was recording complaints and significant events centrally

which all staff could access from their workstation. We also saw meetings of minutes where significant events had been discussed and learning shared with all appropriate members of staff. For example: following an incident where a document was not seen by the GP when it should have been, a change was made to the scanning protocol to ensure that the GPs saw all appropriate documents.

### Overview of safety systems and process

At our inspection in December 2015 we were told that clinical waste was stored in the corner of consulting rooms in between weekly collections.

During our inspection in February 2017 we saw evidence that a secure locked clinical waste bin had been installed for storage of clinical waste prior to collection.

During our inspection in December 2015 we saw large quantities of blank prescription forms in unlocked consulting rooms with no tracking system in place to monitor them.

When we inspected in February 2017 we saw evidence that the practice had reviewed its policy and protocols for handling blank prescription forms. The practice had a system for tracking blank prescription forms within the practices and between branches.