

# Botley Medical Centre Inspection 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 location	Requires improvement	
Are services safe?	<b>Requires improvement</b>	
Are services effective?	Good	
Are services caring?	<b>Requires improvement</b>	
Are services responsive?	Good	
Are services well-led?	<b>Requires improvement</b>	

# **Overall summary**

We carried out an announced comprehensive inspection at Botley Medical Centre on 26 March and 2 April 2019 as part of our inspection programme. We first inspected this practice under our new methodology in September 2015 and it was rated as requires improvement. Two further inspections were undertaken in May 2016 and February 2017 before the practice achieved a rating of Good.

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

## We have rated this practice as requires improvement overall.

We rated the practice as **requires improvement** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe.
- The practice did not have appropriate systems in place for the safe management of medicines for use in an emergency.
- The practice did not carry out all necessary pre-recruitment checks to ensure staff employed were fit and proper persons.
- The system used to respond to safety alerts was not operated consistently.

We rated the practice as **requires improvement** for providing caring services because:

• Patient feedback from the national survey and other sources was below average and the practice did not have a clear plan to address this feedback.

We rated the practice as **requires improvement** for providing well-led services because:

- The management of records, procedures and policies required for the day-to-day management of the service was disorganised.
- Systems to identify, assess and manage risk were not operated effectively.

• Governance processes in place did not always support the clinical delivery of high quality and sustainable care and treatment.

We found some areas of good practice and rated provision of effective and responsive services as good. For example:

- Appointment systems were flexible and offered a range of appointment options.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- There was an audit programme focused on quality improvement.

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

- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

We also found areas of provision of service where the provider had not breached regulations but required improvement. Therefore, the provider **should**:

- Continue to encourage uptake of cervical screening to achieve the national target of 80%.
- Improve uptake of health checks for patients diagnosed with a learning disability.
- Review performance against national targets for care of patients with long term medical conditions with a view to improve outcomes.
- Develop a strategy to address below average patient feedback about the care received from the practice.

(Please see the specific details on action required at the end of this report).

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

#### Dr Rosie Benneyworth BS BM BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

#### Population group ratings

Older people	Good	
People with long-term conditions	<b>Requires improvement</b>	
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	

#### Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist advisor and two additional CQC inspectors. One of the CQC inspectors visited the branch surgery.

### Background to Botley Medical Centre

Botley Medical Centre provides GP services across two practice sites situated in the Oxford area and is one of the practices within Oxfordshire Clinical Commissioning Group (CCG).

Services are provided from both practice sites:

- Botley Medical Centre, Elms Road, Botley, Oxford. OX2 9JS (main site)
- Kennington Health Centre, Kennington Road, Oxford. OX1 5PY (branch site)

We visited both sites during this inspection.

The practice website is:

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The practice is registered by the Care Quality Commission (CQC) to carry out the following regulated activities: diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

Botley Medical Centre and Kennington Health Centre (the branch practice) merged in April 2017 and provide primary medical services to approximately 16,500 patients in a mainly suburban area. The practice provides medical services to the students at Harcourt Hill campus of Oxford Brookes University. The area has lower deprivation among its population, and a lower ethnic diversity compared to other parts of Oxford City.

There are five GP partners, three salaried GPs and one long term locum GP at the practice. One GP is male and eight female. The clinical team includes an advanced nurse practitioner, two practice nurses, a clinical pharmacist and three health care assistants. The practice manager is supported by a deputy practice manager and a team of administration and reception staff.

The practice is open between 8am and 6.30pm Monday to Friday. Extended hours surgeries are offered on Monday from 7am to 8am for GP telephone and from 7.30am to 8am for nurse appointments, and from 6.30pm to 7.30pm for GP telephone appointments, on Tuesdays from 7.30am to 8am for nurse appointments, and on Thursdays from 7am to 8am for GP appointments and on Thursday between 6.30pm and 8pm for GP telephone appointments. Appointments can be booked up to six weeks in advance and urgent appointments are also available on the day. The practice also provides out of

hours appointments between 6.30pm and 8.30pm Monday to Friday and on Saturday and Sunday, in collaboration with OxFed at locations across the City, appointments are available at Botley on Sundays.

The practice has opted out of providing out of hours services to their patients. There are arrangements in place for services to be provided when the practice is closed and these are displayed at the practice, in the practice information leaflet and on the patient website. Occasionally out of hours services are provided during protected learning time by Primary Medical Limited, who also provide out of hours service after 6:30pm, weekends and bank holidays. This service is accessed by calling NHS 111.

# **Requirement notices**

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is 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	<ul> <li>Regulation 17 HSCA (RA) Regulations 2014 Good governance</li> <li>Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</li> <li>How the regulation was not being met:</li> <li>The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk:</li> <li>Systems in place to manage records relating to management of the practice were disorganised.</li> <li>Systems to respond to safety alerts were inconsistently managed.</li> <li>Systems to manage medicines had not identified shortfalls in the medicines held to deal with a medical emergency.</li> </ul>