

Harewood Medical Practice

Quality Report

42 Richmond Road, Catterick Garrison, North Yorkshire, DL9 3JD

Tel: 01748 833904 Website: www.harewoodmedicalpractice.co.uk Date of inspection visit: 15 August 2017 Date of publication: 06/09/2017

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 well-led?	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 Harewood Medical Practice on 16 May 2017. The overall rating for the practice was good with the well led domain rated as requires improvement. The full comprehensive report on the May 2017 inspection can be found by selecting the 'all reports' link for Harewood Medical Practice on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 15 August 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 16 May 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The practice had taken steps to monitor and oversee that staff received appropriate training and updates as was necessary to enable them to carry out the duties they were employed to perform. They provided evidence of this.
- Annual staff appraisals had been implemented. Staff appraisals for all non-clinical staff and practice nurses had been completed and we saw evidence of this. Appraisals for Advanced Nurse Practitioners and salaried GPs were in the process of being arranged.
- Policies and procedures had been updated and reviewed where necessary. This included the Medication Review Protocol and the Staff Handbook. The practice had not recruited any new staff members since the inspection in May but were clear about the required recruitment checks for new staff.

Professor Steve Field (CBE FRCP FFPH FRCGP)Chief Inspector of General Practice

Summary of findings

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We a	lways inspect	the quality o	t care for these	sıx populatı	ion groups.
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Older people The provider had resolved the concerns for well-led identified at our inspection on 16 May 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
People with long term conditions The provider had resolved the concerns for well-led identified at our inspection on 16 May 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
Families, children and young people The provider had resolved the concerns for well-led identified at our inspection on 16 May 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
Working age people (including those recently retired and students) The provider had resolved the concerns for well-led identified at our inspection on 16 May 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
People whose circumstances may make them vulnerable The provider had resolved the concerns for well-led identified at our inspection on 16 May 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
People experiencing poor mental health (including people with dementia) The provider had resolved the concerns for well-led identified at our inspection on 16 May 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good



Harewood Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Inspector carried out this focused desk based review.

Background to Harewood Medical Practice

Harewood Medical Practice, 42 Richmond Road, Catterick Garrison, North Yorkshire, DL9 3JD is a purpose built GP premises based in Catterick Garrison. The practice also provides a minor injury unit which is open to registered and non-registered patients. It has a Personal Medical Services (PMS) contract. The practice is situated in a building leased from NHS properties and consequently shares the premises with various community services provided by the NHS Trust, including the Out of Hours service. The building has undergone an extensive refurbishment programme.

The area covered by the practice is Catterick Garrison and the surrounding villages. Catterick is the largest garrison town in Europe and has a growing practice list size, with an anticipated growth of 50% in the next five to ten years. The practice list size is approximately 7200, 10% of the practice population are from the Nepali community. There is a higher number of women aged under 50 and people under 18 registered with the practice compared with local and national averages. There are a lower number of people over the age of 55 registered with the practice. The practice has unusual demographics due to its situation in the garrison and offers various enhanced services because of this such as the military community's enhanced service, the alcohol and substance misuse enhanced service and the violent patients enhanced service. They also offer a Nurse

Practitioner led minor ailments service. The practice provides services to a large proportion of armed forces families and veterans and has a supported living home for homeless veterans in the near vicinity. The practice catchment area is classed as 8 out of 10 in the Indices of Multiple Deprivation (The lower the Indices of Multiple Deprivation (IMD) decile the more deprived an area is).

Car parking facilities are available but transport links are poor for the surrounding villages.

The practice consists of five GP partners (three female and two male) and seven salaried GPs (who are all female and part time). Some of the GPs also work at the other practice. There are three nurse practitioners, two practice nurses and one health care assistant, all of which are female. They have two managing partners and a range of reception and administration staff. The practice currently employs a Consultant Psychologist in a joint funded role with Tees, Esk and Wear Valley NHS Trust; this is a pilot scheme for one year.

The practice is open Monday to Friday from 8am to 6pm and offers extended hours on Thursdays from 6.30pm to 7.30pm. Between 6pm and 6.30pm and from 6.30pm to 8am the service is covered by the out of hours service. The out of hours is accessed through the 111 service and is provided by Harrogate District Hospital Foundation Trust.

Appointments are available from 8am and are available on the day and can be booked up to eight weeks in advance. The minor injuries unit is open from 8am to 6pm Monday to Friday and until 7.30pm on Thursdays.

The practice was inspected in May 2017 and rated as requires improvement in the well led domain. This was in relation to gaps in staff training, appraisals and recruitment procedures.

Detailed findings

Why we carried out this inspection

We undertook a comprehensive inspection of Harewood Medical Practice on 16 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall but requires improvement in the well led domain. The full comprehensive report following the inspection on 16 May 2017 can be found by selecting the 'all reports' link for Harewood Medical Practice on our website at www.cqc.org.uk.

We undertook a follow up desk based focused inspection of Harewood Medical Practice on 15 August 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.

How we carried out this inspection

We carried out a desk-based focused inspection of Harewood Medical Practice on 15 August 2017. This involved reviewing evidence that:

- Staff had now completed training required to enable them to carry out the duties they are employed to perform and the practice now monitored this.
- Annual staff appraisals had been implemented.
- Policies and procedures had been updated.
- The practice were aware of the requirement to perform appropriate recruitment checks, for example with regard to references.

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 well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At our previous inspection on 16 May 2017, we rated the practice as requires improvement for providing well-led services as there was insufficient overarching governance structure. This was with regard to gaps in training requirements, the monitoring of staff training and recruitment checks for new staff. Annual appraisals were not taking place and there was no evidence of regular review or update of policies and procedures.

We found arrangements had significantly improved when we undertook a desk-based focused follow up inspection

of the service on 15 August 2017. The practice is now rated as good for being well-led. We found that the oversight and monitoring of staff training was now good and the management team were aware of which staff had completed relevant training as the documentation was up to date. Although the practice had not needed to recruit staff they provided evidence that their policy was robust and would be followed in the future with regard to recruitment checks such as references. We also saw that annual appraisals had been completed for non-clinical staff and Practice Nurses and appraisals for salaried GPs and Advanced Nurse Practitioners were planned. The practice had updated policies and procedures as necessary.