

Wokingham 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

Good



Are services responsive?

Requires improvement



Overall summary

We carried out an announced focused inspection at Wokingham Medical Centre on 10 July 2018. This inspection was carried out because we found the practice did not respond consistently to patient feedback when we conducted a comprehensive inspection on 1 November 2017. At that time, the practice had not breached regulations and we found the practice good for provision of safe, effective, caring and well led services and was rated good overall.

At this inspection we found:

- The practice had carried out a survey of 270 patients and devised an action plan to respond to the feedback received.
- Patients gave a mixed response to the appointment system particularly in regard to accessing the practice via telephone. The practice was aware of this feedback

- and had made adjustments to the incoming telephone lines. The practice also provided evidence of recruiting additional staff whose duties would include answering incoming telephone calls.
- An additional locum GP had been appointed to commence in August 2018.
- The complaints process was not operated consistently. Some complainants were not receiving a timely acknowledgement or a response to their complaint.

The area where the provider **must** make improvements as they are in breach of regulations is:

• Ensure there is an effective system for identifying, receiving, recording, handling and responding to complaints by patients and other persons in relation to the carrying on of the regulated activity.

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

Population group ratings

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

Our inspection team

Our inspection team was a CQC lead inspector.

Background to Wokingham Medical Centre

Wokingham Medical Centre is located in the town centre of Wokingham and is managed by the partnership of Wokingham Medical Centre which is a division of a larger partnership called Modality. The partnership is in the process of working with another local GP practice.

The practice premises were purpose built and opened in 2014. The new building provides an accessible and modern practice with a broad range of facilities to meet patients' needs. It is open from 8am to 6.30pm and extended hours appointments are available each weekday and on alternate Saturday mornings.

The practice has approximately 240 patients (just over 1% of the registered list) living in local care homes. There is minimal deprivation according to national data. Approximately 23,300 patients are registered with the practice.

Care and treatment is delivered by eight GP partners, one salaried GP and long term locum GPs, with six male and

six female GPs. There are 12 members of nursing staff including practice nurses, nurse practitioners and health care assistants. There is a management team, administration and reception staff.

When the practice is closed there are arrangements in place for patients to contact the local out of hours provider, Westcall.

All services are provided from Wokingham Medical Centre, 23 Rose Street, Wokingham RG40 1XS. More information about the practice can be found on their website at: .

Wokingham Medical Centre is registered with the Care Quality Commission to provide the following regulated activities:

- Treatment of disease, disorder and injury
- Family planning
- Surgical procedures
- · Maternity and midwifery and
- Diagnostic and screening procedures

Are services responsive to people's needs?

We rated the practice, and all of the population groups, as requires improvement.

The practice was rated as requires improvement for providing responsive services because:

• Patients raising a complaint did not always receive acknowledgement or a timely reply to their concerns.

Responding to and meeting people's needs

The practice organised and delivered services to meet patients' needs. It took account of patient needs and preferences.

- The practice understood the needs of its population.
 There was evidence of action taken in response to patient feedback. For example the appointment system was changed to provide book in advance appointments.
 The telephone lines were changed to reduce the number of people in the call queue.
- Telephone consultations were available which supported patients who were unable to attend the practice during normal working hours.
- There was a phased release of appointments that included book on the day and book up to 28 days in advance appointments.
- Extended opening hours were available every weekday and on alternate Saturday mornings.

Older people:

This population group was rated requires improvement for responsive because:

• The practice did not operate an effective and consistent system of dealing with complaints.

However, our findings of some good practice from the last inspection remained relevant. For *ex*ample:

- All patients had a named GP who supported them in whatever setting they lived, whether it was at home or in a care home or supported living scheme.
- The practice was responsive to the needs of older patients, and offered home visits and urgent appointments for those with enhanced needs. The GP and practice nurse also accommodated home visits for those who had difficulties getting to the practice due to limited local public transport availability.

People with long-term conditions:

This population group was rated requires improvement for responsive because:

• The practice did not operate an effective and consistent system of dealing with complaints.

However, our findings of some good practice from the last inspection remained relevant. For example:

- Patients with a long-term condition received an annual review to check their health and medicines needs were being appropriately met. Appointment and consultation times were flexible to meet each patient's specific needs
- The practice held regular meetings with the local district nursing team to discuss and manage the needs of patients with complex medical issues.

Families, children and young people:

This population group was rated requires improvement for responsive because:

• The practice did not operate an effective and consistent system of dealing with complaints.

However, our findings of some good practice from the last inspection remained relevant. For *ex*ample:

- We found there were systems 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 accident and emergency (A&E) attendances. Records we looked at confirmed this.
- All parents or guardians calling with concerns about a child under the age of 18 were offered a same day appointment when necessary.

Working age people (including those recently retired and students):

This population group was rated requires improvement for responsive because:

• The practice did not operate an effective and consistent system of dealing with complaints.

However, our findings of some good practice from the last inspection remained relevant. For *ex*ample:

Are services responsive to people's needs?

- The needs of this population group had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care. For example, extended opening hours and Saturday appointments.
- The practice offered telephone consultations for patients who found it difficult to attend for a face to face appointment.

People whose circumstances make them vulnerable:

This population group was rated requires improvement for responsive because:

• The practice did not operate an effective and consistent system of dealing with complaints.

However, our findings of some good practice from the last inspection remained relevant. For *ex*ample:

- The practice held a register of patients living in vulnerable circumstances including homeless people, travellers and those with a learning disability.
- People in vulnerable circumstances were easily able to register with the practice, including those with no fixed abode.

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

This population group was rated requires improvement for responsive because:

• The practice did not operate an effective and consistent system of dealing with complaints.

However, our findings of some good practice from the last inspection remained relevant. For *example*:

• Staff had a good understanding of how to support patients with mental health needs and those patients living with dementia.

Timely access to care and treatment

Patients were mostly able to access care and treatment from the practice within an acceptable timescale for their needs. During our inspection in November 2017, we found patient feedback from the national patient survey was below average. The practice and Care Quality Commission had also received negative feedback from Wokingham Healthwatch about obtaining appointments. The practice

had made a significant change to the appointment system arising from the negative feedback. However, it was too early to evaluate whether this had resulted in improvement.

At this inspection we found the practice had sought further patient feedback from a survey of 270 patients (1.2% of the registered patient list). Further changes had been made to the telephone call queue system. For example;

- There was a mixed response from the seven patients we spoke with during inspection when asked whether the appointment system was easy to use. All seven reported difficulty getting through to the practice by telephone when wishing to book an appointment.
- The survey conducted by the practice of 270 patients found 82% reported that making an appointment was quite easy or very easy.
- An action plan, next steps, had been developed from the results of the survey. This included updating patients on the outcome and repeating the survey in six months.
- The practice had recruited new reception/admin staff.
 Their role included answering incoming calls during peak periods when the telephone lines were busy.

Since the inspection of November 2017, the practice had enhanced the use of a patient feedback system available on their website. We noted that patients were able to offer both feedback and request a range of services, such as a fitness to work certificate, via this system. We reviewed three examples of the practice responding to feedback from this source. All three examples were of patients requesting prompt feedback to a concern or complaint. In all three cases the practice responded within three working days.

Since the last inspection the practice had disbanded their original patient participation group (PPG). At this inspection we found that a new PPG had been formed and was due to meet for the first time within two months of the inspection. We spoke with a member of the new PPG who informed us that the new group was formed of 15 patients spanning a wide age range that reflected the composition of the practice registered population. We also noted that terms of reference for the new group had been circulated for discussion and adoption at the first meeting.

Listening and learning from concerns and complaints

Are services responsive to people's needs?

The practice took complaints and concerns seriously but did not always respond to them appropriately in a consistent and timely manner.

- Information about how to make a complaint or raise concerns was available at the main reception desk in the form of a one page summary of the complaints process. The complaints procedure was also available on the practice website. Staff treated patients who made complaints compassionately.
- The complaint policy and procedures were in line with recognised guidance. The practice learned lessons from individual concerns and complaints and also from analysis of trends. It acted as a result to improve the quality of care.
- The practice complaints procedure was not operated consistently. A sample of nine complaints showed that complainants did not always receive and acknowledgement or a response in a timely manner.

Please refer to the evidence table for further information.

This section is primarily information for the provider

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	Regulation 16 HSCA (RA) Regulations 2014 Receiving and acting on complaints The registered person had failed to establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by service users and other persons in relation to the carrying on of the regulated activity. In particular:People making a complaint did not always receive an acknowledgement that their complaint had been received.The response time for some complaints exceeded the practice policy deadline and did not comply with NHS constitution guidelines.This was in breach of regulation 16 (2) of the Health and Social