

Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti (Station View Health Centre)

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 responsive to people's needs?

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 Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti on 28 April 2016. The overall rating for the practice was good but the rating for providing a responsive service was requires improvement. The full comprehensive report on the April 2016 inspection can be found by selecting the 'all reports' link for Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 27 April 2017 to confirm that the practice had carried out their plan to improve telephone access to the practice. This report covers our findings in relation to this.

.Overall the practice is still rated as good.

Our key findings were as follows:

- The practice continually monitored the access to appointment availability and telephone access and had introduced different steps to improve these areas. This was still work in progress but improvement had been demonstrated.
- The practice had altered the system for monitoring uncollected prescriptions which included a process for dealing with vulnerable patients having failed to collect their prescriptions.

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 responsive to people's needs?

The practice is rated as good for providing a responsive service.

- The practice continually monitored the access to appointment availability and telephone access and had introduced different steps to improve these areas. This was still work in progress but improvement had been demonstrated.

Good



Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti (Station View Health Centre)

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a CQC Inspector.

Background to Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti (Station View Health Centre)

Station View Health Centre is located near the railway station in Hinckley in north west Leicestershire. The practice is housed in modern purpose built premises. There is an independent pharmacy on site.

The Practice has a General Medical Services (GMS) contract and is a training practice for trainee GPs. It undertakes minor surgery and joint injections.

- The practice has 12700 patients registered with a relatively high proportion of patients over 60.
- Although Hinckley is a lively market town it does have some pockets of deprivation.

- The practice has eight GP partners, and one salaried GP, equivalent to 6 full-time posts. Four of these are male. There are two advanced nurse practitioners and three practice nurses all of whom are female. They are supported by a practice manager and administrative staff and a reception team.
- The practice is open between 8am and 6.30pm Monday to Friday. Appointments are generally available from 8.30am to 11.40am and from 3pm to 5.20pm Monday to Friday. Some of these are telephone appointments.
- Out of hours services are provided by DHU (Derbyshire Health United). Patients are directed to the correct numbers if they phone the surgery when it is closed.

Why we carried out this inspection

We undertook a comprehensive inspection of Station View Health Centre on 28 April 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good but the rating for providing a responsive service was requires improvement. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up announced focused inspection of Drs Rowe, Johnson, Howes, Reid, Spencer, Thuthiyil & Bhatti on 27 April 2017. This inspection was carried out to review in detail actions taken by the practice to improve their responsiveness.

How we carried out this inspection

During our visit we:

- Spoke with a range of staff which included, the practice manager, the patient services manager and reception staff.

- Spoke with patients.
- Observed how patients were being cared for in the reception area.
- Looked at information the practice used to deliver care and treatment plans.

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 responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 28 April 2016, we rated the practice as requires improvement for providing responsive services due to higher than average levels of patient dissatisfaction with access to the practice, specifically telephone access. This had been indicated by the results of the national GP patient survey published in January 2016.

We found that the practice had made significant efforts to improve access to the practice when we undertook a follow up inspection on 27 April 2017. The practice is now rated as good for providing a responsive service.

We contacted the Clinical Commissioning Group (CCG) who confirmed that the practice were engaged in ensuring the needs of its patients were met wherever possible.

The practice had acknowledged there were issues with access to the service and since our inspection in April 2016 we found that the practice had formulated a patient survey to gain patients views on appointment access and satisfaction with the service provided. They intended to carry out a survey once planned changes to the appointment system and telephone access had been implemented to gauge the success.

The practice reviewed their service provision and made changes to staffing to try and provide more appointments and better telephone access. At the time of our inspection in April 2016, the practice had recently introduced a new telephone system which had increased the number of telephone lines. In February 2017, two new members of staff had been employed with a dual administration and reception role which meant there were additional members of staff available to answer the phones at busier times of the day in order to increase telephone access.

With regard to appointment availability, having had staffing issues in 2016, two new Advanced Nurse Practitioners (ANPs) had been recruited by October 2016. Between them they provided 67 appointments on Mondays and between 31 and 39 appointments each day from Tuesday to Friday. In order to improve GP appointment availability, the practice had analysed the number of patients who had failed to attend appointments and found that 50% of patients who had booked an appointment 4 to 5 weeks in

advance did not attend. As a result they changed the system so that pre bookable appointments were only available two weeks in advance. This in turn created more on the day availability for GP appointments.

Further analysis had shown that patients with long term conditions such as diabetes were seeing a GP but then being referred to see the GP in the practice with greater experience of diabetes, effectively wasting one appointment. As a result the practice introduced specific GP specialist clinics for patients with diabetes and musculoskeletal on a monthly basis which receptionists could book patients straight in to.

Results from the most recent national GP patient survey, published in July 2016, showed that patients' satisfaction with how they could access care and treatment had improved in most areas but was still lower when compared with local and national averages. However, the period the survey covered was July 2015 to March 2016 and so would not reflect many of the changes implemented to improve the service provided.

In January 2017, the practice had audited on the day availability following these changes as feedback had indicated patients' perception was that all appointments were taken by 8.30am. The results showed that on average if a patient called by 9.40am they would still be able to make a GP appointment and by 11am they would still be able to book an appointment to see an ANP that day.

We saw that the practice had regularly publicised the changes they had made in response to patient feedback in respect of the appointment system in order to make patients aware of the new systems they had put in place so that they were fully utilised.

Other steps the practice had taken to monitor and improve the system were that they had :

- Monitored telephone access to identify trends or issues.
- Provided training for receptionists to ensure patients were seen by the appropriate clinician.
- Monitored complaints and, on completion of a complaints review in December 2016, found that complaints had reduced overall but specifically complaints about telephone access and appointments had reduced each quarter of the year from eight in the first quarter to none in the final quarter.

Are services responsive to people's needs?

(for example, to feedback?)

- Monitored the monthly NHS Friends and Family Test results. This had shown that the results had improved from being 70% positive in July and August 2016 to being 83% and 82% positive respectively in February and March 2017. Additionally there were a number of positive comments specifically noting improvement in the ability to get through on the phone and making appointments.
- Introduced group information sessions for specific patient groups and their carers. These included events covering back pain, dementia and diabetes. The practice felt this had reduced the need for some appointments as patients had their questions answered during the session, instead of having to make an appointment to do so.
- Recently carried out a small survey over a couple of days relating to access and the results had not yet been analysed. They planned to carry this out on a larger scale later in the year once the new systems were fully embedded.

The practice had further plans going forward to improve accessibility which included being able to book on the day appointments online which would alleviate pressure on the telephone lines. They were also investigating different ways to improve longer term appointment availability.

On the day of our inspection we spoke with 12 patients and asked them about their experience of making appointments. The responses were overwhelmingly positive. Of those patients that had rung to make an appointment, they all told us that getting through on the phone to make an appointment had improved over the last six months. These patients had rung on the day of our inspection and gained an appointment that day. Two patients said they arrived early and queued outside the practice to get an appointment but did this because historically they had not been able to get through on the phone but had not tried to since the changes made to the system for making appointments. A number of patients commented that they would like to be able to see the GP of their choice more easily.