

Ridgeway View Family Practice

Inspection report


Wroughton Health Centre
Barrett Way, Wroughton
Swindon
SN4 9LW
Tel: 01793812221

Date of inspection visit: 25 July 2023
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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 safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Ridgeway View Family Practice on 25 July 2023. Overall, the practice is rated as good.

Safe - good

Effective - good

Caring - good

Responsive - good

Well-led - good

Following our previous inspection on 22 July 2022, the practice was rated requires improvement overall and for the key questions of safe, effective and well led. The key questions of caring and responsive were rated as good at our inspection in December 2021.

The full reports for previous inspections can be found by selecting the 'all reports' link for Ridgeway View Family Practice on our website at www.cqc.org.uk

Why we carried out this inspection

We inspected all key questions.

We carried out this inspection to follow up breaches of regulation from a previous inspection which related to:

- Shortfalls in staffing levels.
- A lack of consistent process for monitoring patients' health in relation to the use of medicines including some high-risk medicines (for example, Azathioprine, Potassium sparing diuretics, Amiodarone and Direct Oral Anticoagulants).
- A lack of audit and management of Medicines and Healthcare products Regulation Agency (MHRA alerts).
- Improvements to task management to ensure diagnosis were not missed.
- A lack of clear systems for overview of the quality of service provided.
- Shortfalls in the management of risk.
- Unsafe storage of oxygen cylinders.
- Shortfalls in assessing and meeting patients' needs in line with current legislation, standards and evidence-based guidance.

At this inspection we found that these areas had been addressed and action had been taken to become compliant with the regulations.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.

Overall summary

- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

Our findings

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 found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- The practice ensured that any maintenance issues they were responsible for were actioned.
- Policies and protocols in the dispensary were clear and followed by dispensary staff.
- 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.
- Patients could access care and treatment in a timely way.
- Complaints were responded to in an open and transparent manner and learning from these was shared with relevant staff.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

Whilst we found no breaches of regulations, the provider **should**:

- Continue to improve monitoring of patients' medicines and reviews, including obtaining recommended blood tests prior to a prescription being issued.
- Consider providing information routinely in accessible formats in the dispensary.
- Continue to promote cervical screening.
- Continue to proactively identify carers.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. A member of the CQC medicines team who undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Ridgeway View Family Practice

Ridgeway View Family Practice is located at:

Wroughton Health Centre

Barrett Way, Wroughton

Swindon

SN4 9LW

The practice has a branch surgery at:

Station House Surgery

Station Road

Chiseldon

Swindon

SN4 0PB

The practice offers dispensary services from its branch site.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the Swindon Integrated Care Board and delivers General Medical Services to a patient population of about 14,200. This is part of a contract held with NHS England.

The practice is part of a wider primary care network (PCN) of GP practices, Brunel Health Group PCN1 is a part of Brunel Health Group, which is a federation of four PCNs working together to share best practice and economies of scale.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the second highest decile (9 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 1.9% Asian, 96% White and 2% Mixed.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of 9 GPs who provide cover at both practices. The practice has a team of 3 nurses who provide nurse led clinics for long-term conditions at both the main and branch locations. There are also 2 health care assistants; 2 paramedics; 1 paramedic practitioner; and a health and wellbeing advisor. There are 3 clinical pharmacist and 1 pharmacy technician and a dispensary manager.

The practice management team consists of a practice manager, assistant practice manager and finance manager.

Clinical staff are supported at the practice by a team of reception and administration staff.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by Brunel Health Group, where late evening and weekend appointments are available. Out of hours services are provided by the NHS 111 service.