

# Townhill Medical Practice

## Quality Report

Townhill Medical Practice

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Caterham

Surrey

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Date of inspection visit: We have not revisited the practice as part of this review because the practice was able to demonstrate that they were meeting the regulations associated with the Health and Social Care Act 2008 without the need for a visit.

Date of publication: 27/06/2017

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 safe?

Good



Are services effective?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

At our previous comprehensive inspection at Townhill Medical Practice in Caterham, Surrey on 24 August 2016 we found two breaches of regulation relating to the provision of safe and effective services. The overall rating for the practice was requires improvement. The concerns which led to these ratings applied to everyone using the practice and we rated all population groups as requires improvement. Specifically, the practice was rated requires improvement for the provision of safe and effective services. The practice was rated good for the provision of caring, responsive and well-led services. The full comprehensive report on the August 2016 inspection can be found by selecting the 'all reports' link for Townhill Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on 20 June 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 in August 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

We found the practice had made improvements since our last inspection. Using information provided by the

practice we found the practice was now meeting the regulations that had previously been breached. We have amended the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe, effective, caring, responsive and well led services. All six population groups have also been re-rated following these improvements and are also rated as good.

Our key findings were as follows:

- The practice was now ensuring all patient records were securely held. Electronic access to patient records was now available for all practice clinicians to use in the school and at the nursing homes which the practice provides GP services for.
- Training arrangements were consistent; there was now a system to identify when staff had training and when it would need to be refreshed. All staff had completed training appropriate to their job role. For example, all GPs had completed the correct level of safeguarding training appropriate to their job role.

# Summary of findings

- The practice was now operating safe systems in relation to health and safety. The practice had established and was now operating an effective system to assess, manage and mitigate the risks identified relating to the storage of liquid nitrogen.
- The practice had revised recruitment policies and processes which reflected national guidance. For example, supporting recruitment documentation which was missing during the August 2016 inspection had now all been recorded and documented correctly including evidence of full employment history for members of staff.
- Blank prescription forms and pads were kept securely and tracked through the practice.
- The practice had reviewed and updated the practice governance framework. This included a review of health and safety arrangements and supporting policies and procedures.
- Following the August 2016 inspection, the practice immediately developed and implemented a system for recording when Deprivation of Liberty Safeguards were in place. The Deprivation of Liberty Safeguards are an amendment to the Mental Capacity Act 2005. The Mental Capacity Act allows restraint and restrictions to be used – but only if they are in a person's best interests.
- Further steps had been taken to monitor patient satisfaction including a survey completed in February 2017. This survey involved the patient participation group (PPG) and specifically reviewed patient satisfaction regarding telephone access to the practice.
- Following a review of the management of diabetes within the practice population, improvements had been made including completed diabetic audits and the appointment of a special diabetes nurse. These actions had strengthened how the practice managed diabetes ensuring these patients received appropriate care and treatment.

**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 safe?

The practice had taken appropriate action and is now rated as good for the provision of safe services.

Our last inspection in August 2016 identified concerns relating to how the practice managed and monitored risks. We saw most risks to patients were assessed and managed, with the exception of recruitment checks, the storage, transport and use of liquid nitrogen and the security of medical records for patients accessing GP services in residential facilities.

We also noted blank prescription forms used within the practice were not tracked in accordance with national guidance.

Using information provided by the practice we found the concerns had been addressed:

- The practice had revised the practice policy for recruitment. We saw this now ensured all recruitment records including employment history were documented and recorded.
- We saw the practice was operating safe systems in relation to health and safety. The practice had established and was now operating an effective system to assess, manage and mitigate the risks identified relating to the storage of liquid nitrogen.
- The practice was ensuring all patient records were securely held. Electronic access to patient records was now available for all practice clinicians to use in the school and at the nursing homes which the practice provides GP services for.
- The practice had introduced a system for tracking and monitoring the use of blank prescription forms and pads. This system was now in line with national guidance.

Good



### Are services effective?

The practice had taken appropriate action and is now rated as good for the provision of effective services.

Our last inspection in August 2016 identified concerns relating to how staff received appropriate training and professional development. The practice could not demonstrate that staff had all the skills, knowledge and experience to deliver effective care and treatment. For example, we noted that not all staff had received training that included safeguarding, fire safety awareness, basic life support and information governance.

Good



# Summary of findings

We also noted although clinical staff demonstrated understanding of consent, they had not received training that included the requirements of the Mental Capacity Act 2005.

Using information provided by the practice we found the concerns had been addressed:

- Training arrangements were consistently managed. These arrangements and staff files including certificates indicated all staff had completed training relevant to their role including safeguarding, fire safety awareness, basic life support and information governance.
- The practice has also engaged closely with the training provider to ensure the practice was supporting staff to acquire new skills and share best practice. This included training on the Mental Capacity Act 2005.

# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The provider had resolved the concerns for safety and effectiveness identified at our inspection on 24 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- The practice was now ensuring all patient records were securely held. Electronic access to patient records was now available for all practice clinicians to use in the nursing homes which the practice provides GP services for. We saw this provided direct, immediate access to the patient's records, keeping them maintained and up to date electronically, thus providing a complete, contemporaneous record.

Good



### People with long term conditions

The provider had resolved the concerns for safety and effectiveness identified at our inspection on 24 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- Performance for diabetes related indicators was comparable to the clinical commissioning group (CCG) and national averages. Previous concerns (reporting for 2014/15) regarding significantly high levels of exception reporting had been addressed and improved. The practice provided us with information and data for 2015/16 which showed improvement, a reduction from 21% to 17%. Exception reporting is the removal of patients from Quality and Outcomes Framework (QOF) calculations where, for example, the patients are unable to attend a review meeting or certain medicines cannot be prescribed because of side effects.

Good



### Families, children and young people

The provider had resolved the concerns for safety and effectiveness identified at our inspection on 24 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Summary of findings

## **Working age people (including those recently retired and students)**

The provider had resolved the concerns for safety and effectiveness identified at our inspection on 24 August 2016 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 safety and effectiveness identified at our inspection on 24 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- Following the August 2016 inspection, the practice immediately developed and implemented a system for recording when Deprivation of Liberty Safeguards were in place. The Deprivation of Liberty Safeguards are an amendment to the Mental Capacity Act 2005. The Mental Capacity Act allows restraint and restrictions to be used – but only if they are in a person's best interests.

Good



## **People experiencing poor mental health (including people with dementia)**

The provider had resolved the concerns for safety and effectiveness identified at our inspection on 24 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Townhill Medical Practice

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk based review inspection was completed by a CQC Inspector.

## Background to Townhill Medical Practice

Townhill Medical Practice is based in a purpose built property in Caterham. The practice has a General Medical Services (GMS) contract with NHS England. (GMS is one of the three contracting routes that have been available to enable commissioning of primary medical services). The practice is part of NHS East Surrey Clinical Commissioning Group.

At the time of our follow up inspection there were approximately 12,900 patients on the practice list. The practice has a slightly higher than average number of patients from birth to 19 years and also over 85 years, there is a slightly lower than average number of patients aged 20 to 44 years old. The practice has a higher than average number of female patients aged 11 to 18 years which is due to the practice providing care to the pupils of a girl's boarding school. The practice also provides care and treatment to one large residential home, three nursing homes and two specialist neurological rehabilitation residential centres. The practice also has a higher than average number of patients with long standing health conditions. Deprivation amongst children and older people is low when compared to the population nationally.

The practice has two GP partners and eight salaried GPs, three of which will join the partnership in July 2017. The GPs are supported by a nurse practitioner, an urgent care

practitioner, a specialist nurse, three practice nurses, two healthcare assistants, a phlebotomist, a practice manager, an assistant practice manager and a team of clerical and reception staff. Townhill Medical Practice is a training practice so it takes supernumerary registrars who are qualified doctors completing their specialist training as GPs.

The practice is open between 8am and 6.30pm Monday to Friday. Extended hours appointments are offered 6.30pm to 8pm Monday evening, 6.30pm to 7.30pm Wednesday evening and Saturday morning from 8am to 11am. When the practice is closed patients are advised to call NHS 111 where they will be given advice or directed to the most appropriate service for their medical needs.

The service is provided from the following location:

- Townhill Medical Practice, Guards Avenue, Caterham, Surrey CR3 5XL.

## Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 24 August 2016 and we published a report setting out our judgements. These judgements identified two breaches of regulations. We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

We undertook a follow up desk-based focused inspection on 20 June 2017 to follow up and assess whether the necessary changes had been made, following our inspection in August 2016.



## Detailed findings

We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection. We followed up to make sure the necessary changes had been made. We found the practice was meeting all the requirements of the regulations that had previously been breached.

This report should be read in conjunction with the full inspection report.

### How we carried out this inspection

We carried out a desk-based focused inspection of Townhill Medical Practice on 20 June 2017. This involved reviewing evidence provided by the practice and a range of information we hold about the practice.

- We reviewed the previous Care Quality Commission (CQC) inspection report and the action plan submitted by the practice outlining how they would make the necessary improvements to comply with the regulation.
- We also reviewed information provided by the practice, including evidence of the new arrangements to access records within residential facilities, training records, risk assessments, recruitment arrangements and information of improved systems to improve security of blank prescription forms.

All were relevant to demonstrate the practice had addressed the breaches of regulation identified at the inspection in August 2016.

# Are services safe?

## Our findings

When we inspected Townhill Medical Practice in August 2016, we identified concerns relating to how the practice managed and monitored risks. We saw most risks to patients were assessed and managed, with the exception of recruitment checks, the storage, transport and use of liquid nitrogen and the security of medical records for patients living in residential facilities.

We also noted blank prescription forms used within the practice were not tracked in accordance with national guidance.

We reviewed information provided by the practice and found the practice had made improvements to address the concerns previously identified.

### Overview of safety systems and processes

The practice had strengthened and embedded systems, processes and practices in place to keep patients safe, which included:

- The practice had revised the practice policy for recruitment. We saw this now ensured all recruitment records including employment history were documented and recorded. Specifically, to ensure employment history is fully completed, the practice had amended the template used for recruitment and included additional interview questions into the policy. Detailed. With reference to the two files we saw during the August 2016 inspection that were missing recruitment checks, the practice had also updated these files with written evidence of the verbal evidence that was given on the interview day. As part of the policy revision, the practice had also reviewed inspected all staff files to ensure compliance. We can confirm that ironically it was only the two files inspected on the day that were deemed incomplete as all the others were complete.
- The practice held liquid nitrogen on site; this was used for cryotherapy (treatment using low temperatures). There are two serious risks involved in working with

liquid nitrogen: asphyxiation (asphyxiation is a condition of severely deficient supply of oxygen to the body) and cold burns. There was now a risk assessment to manage the associated risks with the storage, transportation and usage of liquid nitrogen. The practice submitted substantial evidence as to how these risks were now monitoring. We found the risks were now well assessed and well managed. The practice had completed a liquid nitrogen risk assessment in October 2016 which reflected updated national guidance on its use. Furthermore, we saw the practice now recorded the health and safety data sheets for liquid nitrogen.

- The practice was now ensuring all patient records were securely held. Townhill Medical Practice provides GP services to a local boarding school, a residential home, three nursing homes and two specialist neurological rehabilitation residential centres. We saw the practice had successfully completed the change of electronic medical record systems and electronic access to patient records was now available for all practice clinicians to use in the school and at the nursing homes which the practice provides GP services for. Electronic access now provided direct, immediate access to the patient's records, keeping them maintained and up to date electronically, thus providing a complete, contemporaneous record.
- We saw the practice had revised existing arrangements including existing policies for the secure management of blank prescriptions. These arrangements were introduced in October 2016 which included prescription security awareness training with all clinicians which highlighted individual responsibility to lock blank prescription away when they leave a room. To ensure awareness was maintained and the practice worked in accordance with national guidance, the practice had also placed signs as an additional reminder on the doors of the clinical rooms to remind staff to lock prescriptions away safely.

These actions were now ensuring that requirements relating to safe care and treatment were being met.

# Are services effective?

(for example, treatment is effective)

## Our findings

When we inspected Townhill Medical Practice in August 2016, we identified concerns relating to how staff received appropriate training and professional development. The practice could not demonstrate that staff had all the skills, knowledge and experience to deliver effective care and treatment. For example, we noted that not all staff had received training that included safeguarding, fire safety awareness, basic life support and information governance.

We also noted although clinical staff demonstrated understanding of consent, they had not received training that included the requirements of the Mental Capacity Act 2005.

We reviewed information provided by the practice and found the practice had made improvements to address the concerns previously identified.

### Effective staffing

Staff now had the skills, knowledge and experience to deliver effective care and treatment.

- Training arrangements were consistently managed. The practice provided comprehensive evidence including a revised system Townhill Medical Practice used to log training needs. This new system was a training matrix; it

was clear and effectively highlighted future learning for all members of staff. These arrangements and staff files including certificates indicated all staff had completed training relevant to their role including safeguarding, fire safety awareness, basic life support and information governance.

- The practice has also engaged closely with the training provider to ensure the practice was supporting staff acquire new skills and share best practice.

### Consent to care and treatment

The practice had revised the how patients' consent to care and treatment was monitored and recorded.

- If a Deprivation of Liberty Safeguard was in place, the practice now recorded these in the patient's records. The Deprivation of Liberty Safeguards are an amendment to the Mental Capacity Act 2005. The Mental Capacity Act allows restraint and restrictions to be used – but only if they are in a person's best interests.
- Furthermore, the practice had also provided clinical staff with training that included the requirements of the Mental Capacity Act 2005.

These actions were now ensuring that requirements relating to good governance were being met.