

Straight Road Doctors Surgery

Quality Report

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Date of inspection visit: 7 March 2018

Date of publication: 10/04/2018

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 caring?

Good 

Key findings

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Letter from the Chief Inspector of General Practice

We carried out a desk based inspection of Straight Road Doctors Surgery on 12 April 2017. The overall rating for the practice was good with a rating of requires improvement for being caring. The full comprehensive report published in June 2017 can be found by selecting the 'all reports' link for Straight Road Doctors Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused follow up inspection carried out on 7 March 2018 to confirm that the practice had carried out their plan to make improvements on the areas that we identified in our previous inspection on 12 April 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is still rated as good.

Our key findings were as follows:

- Results of the most recent GP patient survey showed improvement in how patients rated the practice in most aspects of care.
- The practice had improved its processes for identifying patients who were carers and had identified 1% of its patient population as such.

However, there were also areas of practice where the provider needs to make improvements.

Importantly, the provider should:

Continue to work on improving patient satisfaction with services provided.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Key findings

Areas for improvement

Action the service **SHOULD** take to improve

Importantly, the provider should:

- Continue to work on improving patient satisfaction with services provided.

Straight Road Doctors Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection team included a Lead CQC Inspector.

Background to Straight Road Doctors Surgery

Straight Road Doctors Surgery provides GP primary care services to approximately 2,400 people living in the Harold Hill neighbourhood of the London Borough of Havering. The practice is in an area that is the third most deprived decile. The practice's age and gender profile is largely in line with national averages, with a slightly higher population of 40 to 50 year olds.

The practice is run by two GP partners, one male and one female, both of whom work part time to provide a combined total of nine sessions per week. The practice provides GP services to two local nursing homes and provides an additional two sessions per week for this. There are two nurse prescribers and one practice nurse, all of whom work part time with a combined full time equivalent of 0.5, a business manager and a practice manager. There are also two receptionists and two administration staff. The practice is registered with the CQC as a partnership.

The practice is open between 8:30am and 1pm and 4:30pm to 6:30pm Monday to Friday. Appointments are from 9am to 11am and 5pm to 6:30pm Monday to Friday. Extended

surgery hours for pre-bookable appointments are available on a Monday between 6:30pm to 8pm. The locally agreed out of hours provider covers calls made to the practice and directs patients when the practice is closed.

The practice operates under a General Medical Services (GMS) contract (a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract), and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract). These are: Childhood Vaccination and Immunisation Scheme, Extended Hours Access, Facilitating Timely Diagnosis and Support for People with Dementia, Influenza and Pneumococcal Immunisations, Minor Surgery, Patient Participation, Rotavirus and Shingles Immunisation and Improving Patient Access Online.

The practice is registered with the Care Quality Commission to carry out the regulated activities of diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury from one location.

Why we carried out this inspection

We undertook a comprehensive inspection of Straight Road Doctors Surgery on 14 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 overall with a rating of requires improvement for being caring. The full

Detailed findings

comprehensive report following the inspection on 14 April 2016 can be found by selecting the 'all reports' link for Straight Road Doctors Surgery on our website at www.cqc.org.uk.

We undertook a follow up desk based inspection of Straight Road Doctors Surgery on 12 April 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. The practice was still rated as requires improvement for

providing caring services. The full comprehensive report following the inspection on 12 April 2017 can be found by selecting the 'all reports' link for Straight Road Doctors Surgery on our website at www.cqc.org.uk.

A focussed follow up inspection of Straight Road Doctors Surgery was completed on 7 March 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.

Are services caring?

Our findings

At our previous inspection on 12 April 2017, we rated the practice as requires improvement for providing caring services as data from the national GP patient survey showed that patients rated the practice below the Clinical Commissioning Group and national averages for several aspects of care and the practice had identified less than 1% of their patient population as a Carer.

These arrangements had significantly improved when we undertook a follow up inspection on 7 March 2018. The practice is now rated as good for providing caring services.

Kindness, respect and compassion

Staff treated patients with kindness, respect and compassion.

- Staff understood patients' personal, cultural, social and religious needs.
- The practice gave patients timely support and information.
- Reception staff knew that if patients wanted to discuss sensitive issues or appeared distressed they could offer them a private area to discuss their needs.

Results from the July 2017 annual national GP patient survey showed patients felt they were mostly treated with compassion, dignity and respect. Three hundred and forty three surveys were sent out and 99 were returned. This represented 4% of the practice population. The practice was similar to the CCG average and sometimes below the national average for its satisfaction scores on consultations with GPs and nurses. For example:

- 82% (70% previously) of patients who responded said the GP was good at listening to them compared with the clinical commissioning group (CCG) average of 85% and the national average of 89%.
- 91% (96% previously) of patients who responded said they had confidence and trust in the last GP they saw; CCG - 94%; national average - 95%.
- 71% (62% previously) of patients who responded said the last GP they spoke to was good at treating them with care and concern; CCG - 81%; national average - 86%.

- 89% (89% previously) of patients who responded said the nurse was good at listening to them; (CCG) - 90%; national average - 91%.
- 79% (84% previously) of patients who responded said the last nurse they spoke to was good at treating them with care and concern; CCG - 89%; national average - 91%.

The practice were aware of their survey results, these had been discussed at practice meetings and with the patient participation group. An audit was carried out which compared the year on year survey results with an action plan of what would be done in order to make improvements. For example all staff members completed customer services training. The practice was also in the process of completing their own patient survey which reflected the same areas that national GP survey focused on.

The practice signed up to a local quality improvement programme which was focussing on how to improve patient experience in the practice.

Involvement in decisions about care and treatment

Staff helped patients be involved in decisions about their care and were aware of the Accessible Information Standard (a requirement to make sure that patients and their carers can access and understand the information they are given):

- Interpretation services were available for patients who did not have English as a first language. We saw notices in the reception areas, including in languages other than English, informing patients this service was available. Patients were also told about multi-lingual staff who might be able to support them.
- Staff communicated with patients in a way that they could understand, for example, communication aids and easy read materials were available.
- Staff helped patients and their carers find further information and access community and advocacy services. They helped them ask questions about their care and treatment.

The practice proactively identified patients who were carers by identifying whether patients were a carer or had a care at the point of registering with the practice, there were posters and information on the carers' notice board in the

Are services caring?

waiting area advising patients to speak to a member of staff if they were a carer and patients were asked whether they had a carer during consultations. The practice also completed an exercise to identify patients who were carers for people who were not registered at the practice. The practice's computer system alerted GPs if a patient was also a carer. The practice had identified 28 patients as carers (1% of the practice list).

- A member of staff acted as a carers' champion to ensure that the various services supporting carers were coordinated and effective; this included inviting them for their annual flu vaccination and ensuring they understood what services were available for them.
- Staff told us that if families had experienced bereavement, their usual GP contacted them. This call was either followed by a patient consultation at a flexible time and location to meet the family's needs and/or by giving them advice on how to find a support service.

Results from the national GP patient survey showed an improvement in patients responding positively to questions about their involvement in planning and making decisions about their care and treatment. Results were mostly in line with local averages and national averages:

- 77% (67% previously) of patients who responded said the last GP they saw was good at explaining tests and treatments compared with the clinical commissioning group (CCG) average of 81% and the national average of 86%.

- 67% (65% previously) of patients who responded said the last GP they saw was good at involving them in decisions about their care; CCG - 77%; national average - 82%.
- 91% (90% previously) of patients who responded said the last nurse they saw was good at explaining tests and treatments; CCG - 89%; national average - 90%.
- 79% (81% previously) of patients who responded said the last nurse they saw was good at involving them in decisions about their care; CCG - 85%; national average - 85%.

The practice leaders wanted to identify whether the less positive results of the GP patient survey related to specific clinicians and so carried a short survey that patients completed immediately following their consultation and asked questions such as were you involved in decisions made about your care? Results from this short survey identified one clinician that scored poorly with patient satisfaction. These results were discussed with the clinician and actions such as the clinician documenting in patient records that treatment was clearly explained and patients were involved in decisions, which acted as a prompt to remind that this needed to take place.

Privacy and dignity

The practice respected patients' privacy and dignity.

- Staff recognised the importance of patients' dignity and respect.
- Conversations with receptionists could not be overheard by patients in the waiting room.