

# Botley Medical Centre

## Inspection report

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Date of inspection visit: 8 December 2021  
Date of publication: 27/01/2022

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

<b>Overall rating for this location</b>	<b>Requires Improvement</b>	
Are services safe?	<b>Good</b>	
Are services effective?	<b>Requires Improvement</b>	
Are services caring?	<b>Good</b>	
Are services responsive to people's needs?	<b>Requires Improvement</b>	
Are services well-led?	<b>Requires Improvement</b>	

# Overall summary

We carried out an announced comprehensive follow up inspection at Botley Medical Centre on 7 and 8 December 2021 to identify if improvements had been made following our previous inspection in April 2021 which led to urgent enforcement action. This inspection was to determine whether the highest risk concerns identified in April 2021 had been acted on and mitigated. We have provided a new rating for the location:

Safe - Good

Effective – Requires Improvement

Caring - Good

Responsive - Requires Improvement

Well-led - Requires Improvement

Following our previous inspection in April 2021, the practice was rated Inadequate overall. Specifically, inadequate for the provision of safe and well led services, and requires improvement for the provision of effective services.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Botley Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This comprehensive inspection was undertaken remotely and onsite. Our key areas of focus were:

- Inspecting all key questions
- Identifying if improvements had been made to services and the quality of clinical care
- Gaining the views of patients and stakeholders
- Gathering and analysing evidence from the provider

## How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice’s patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit
- Requesting patients to send us feedback about their experiences

# Overall summary

## 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 have rated this practice as Requires Improvement overall

We found that:

- There was significant improvement to the monitoring of patient safety, specifically the prescribing of high risk medicines.
- There was improvement in the effectiveness of patient care and treatment, but some care was not meeting required standards in line with national guidance. Specifically updating care plans for patients with mental health conditions and ensuring advanced clinical decisions are reviewed annually.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Patient access to communication channels and care had been identified as an area requiring improvement, but there were sometimes barriers for patients in accessing services when they required.
- There were improved monitoring processes for dealing with daily tasks such as patient correspondence and adjustments were made when workflow increased to reduce backlogs.
- There was limited independent quality improvement on the part of the practice and leaders did not have sufficient audit and monitoring processes to ensure they identified areas for improvement.
- There was a significant improvement in culture reported by staff.

We found one breach of regulation. The provider **must**:

- Ensure adequate governance and monitoring processes are operated to assess, monitor and improve the quality and safety of the services provided.

Following our inspection in April 2021 we placed Botley Medical Centre into special measures. As a result of the improvements made and the findings of this inspection we have decided to remove the practice from special measures.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Our inspection team

Our inspection team was led by a CQC lead inspector, a second CQC inspector and a GP specialist advisor. The team spoke with staff using video conferencing facilities, visited the locations and completed clinical searches and records reviews remotely.

## Background to Botley Medical Centre

Botley Medical Centre is located in Oxford:

Elms Road

Botley

Oxford

OX2 9JS

The practice has a branch surgery at:

Kennington Surgery

200 Kennington Rd

Kennington,

Oxford

OX1 5PY

The provider is registered with CQC to deliver the following Regulated Activities:

- Diagnostic and Screening Procedures
- Maternity and Midwifery Services
- Treatment of Disease, Disorder or Injury
- Surgical Procedures
- Family Planning Services

These are delivered from both sites.

The practice is situated within the Oxfordshire Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of approximately 14,500 patients. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called a primary care network (PCN).

The practice provides medical services to the local community including some students at Harcourt Hill campus of Oxford Brookes University. The area has lower deprivation among its population, and a lower ethnic diversity compared to other parts of Oxford City.

There are three GP partners, and locum GPs working at the practice. The clinical team includes an advanced nurse practitioner, one practice nurse, a clinical pharmacist and two health care assistants. The clinical team are supported by two practice managers and a team of administration and reception staff.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments can be booked on the day only and a duty doctor system is used to assess the urgency of patients' needs.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face, then the patient is offered a choice of either the main GP location or the branch surgery. There are also extended hours appointments available. The practice was supported by an intended healthcare service who provided online consultations to expand patient access to services.

The practice has opted out of providing out of hours services to their patients. There are arrangements in place for services to be provided when the practice is closed and these are displayed at the practice, in the practice information leaflet and on the patient website. Occasionally, out of hours services are provided during protected learning time by another provider who also provides an out of hours service after 6.30pm, weekends and bank holidays. This service is accessed by calling NHS 111.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Family planning services	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Maternity and midwifery services	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Surgical procedures	
Treatment of disease, disorder or injury	

**How the regulation was not being met:**

There were inadequate governance and monitoring processes operated to assess, monitor and improve the quality and safety of the services provided where needed.

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.