

# Summervale Surgery

## 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 safe?

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 Summervale Surgery

on 5 August 2015. Following our comprehensive inspection overall the practice was rated as good with requires improvement for the safe domain. Following the inspection we issued a requirement notice. The notice was issued due to a breach of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, Safe care and treatment. The requirement notice was for the practice to implement the necessary changes to ensure patients who used the service were protected against any risks associated with the safe management of the medicines, including secure and appropriate storage and the safe management of blank prescriptions. The practice were also required to assess the risks associated with using volunteers. A copy of the report detailing our findings can be found at [www.cqc.org.uk](http://www.cqc.org.uk).

Our key findings across all the areas we inspected during this 5th August 2015 inspection were as follows:

- The practice must review the secure storage, prescription security and management of medicines requiring refrigeration contained within GP bags and for those medicines related to remote collection.

- The practice should risk assess the use of volunteers.

We carried out an announced focused inspection at Summervale Surgery on 27 September 2016 to follow up the requirement to assess if the practice had implemented the changes needed to ensure patients who used the service were safe.

Our key findings across all the areas we inspected during this inspection were as follows:

- The practice had implemented changes to improve the management of their medicines and blank prescription paper.
- Risks regarding the use of volunteers for the delivery of prescriptions to local pick up points had been reassessed and documented.

We found that there were some areas relating to the management of prescription paper and the retaining of appropriate information regarding the volunteers had only been implemented for a short period of time.

The areas where the provider should make improvement are:

- The practice should ensure that the new changes to the management of prescription paper and ensuring

# Summary of findings

that appropriate information regarding the volunteers will be monitored and sustained to ensure that these risks to patients are reduced or eliminated.

Following this inspection the practice was rated overall as good and good across all domains.

**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 is rated as good for providing safe services.

- The practice had implemented changes to improve the management of their medicines and blank prescription paper.
- Risks regarding the use of volunteers for the delivery of prescriptions to local pick up points had been reassessed and documented.

We found that there were some areas relating to the management of prescription paper and the retaining of appropriate information regarding the volunteers which had only been implemented for a short period of time prior to this inspection. Therefore the practice should ensure that the new changes are monitored and sustained to identify and minimise any risks to patients.

**Good**



# Summervale Surgery

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our inspection team was led by a CQC Lead Inspector.

## Background to Summervale Surgery

Summervale Surgery is situated in Ilminster, Somerset. The practice had approximately 7257 registered patients from Ilminster, Chard, South Petherton and Hatch Beachamp.

The practice operates from one location:

Summervale Surgery

Canal Way

Ilminster

Somerset

TA19 9FE

The practice is located in purpose built premises (2012) which it shares with another GP service. There is a central patient waiting room with a reception desk with consulting and treatment rooms leading off these areas.

Administration, management and meeting rooms are located on the ground floor and first floor of the building.

The practice is on a general medical service contract with Somerset Clinical Commissioning Group. This is a dispensing practice and patients can collect their prescriptions from the practice directly.

Over 30% of patients registered with the practice were working aged from 15 to 44 years, 28% were aged from 45 to 64 years old. Just above 7.7% of the practice patients were 75-84 years old and 3.5% of patients were over 85

years old. Just above 16% of patients were less than 14 years of age. Information from NHS England showed that just below 57% of the patients had long standing health conditions, which was above the national average of 54%. The percentage of patients who had caring responsibilities was 20.7% which is above the national average of 18.5%. Of the practice patients 56.3% were from the working population or full time students and there were 1.6% as having the status of unemployed which is below the national average of 6.2%. Disability allowance claimants were 32.8% which was above the national average of 50%. Patients living in a nursing or care home were 0.5% of the patients the practice supported, which was similar to the national average of 0.5%.

The practice consisted of six GP partners and one salaried GP. Of these seven GPs there were four male and three female GPs. One GP is a GP with a special interest in Dermatology. Three of the GP partners were trainers for new GPs. There was one female trainee GP at the practice at the time of our inspection. There was a practice nurse lead and four practice nurses, two health care assistants and one trainee health care assistant all of whom provided health screening and treatment five days a week. There were additional clinics implemented when required to meet patient's needs such as the undertaking of influenza vaccinations. There was a team of administration, reception and secretarial staff. The practice had a full time practice manager who was in charge of the day to day management of the service.

Summervale Surgery had core hours of opening from 8.30am to 6.30pm every weekday with extended hours Monday and Tuesday evenings for appointments only. The practice referred patients to another provider NHS 111, then Vocare (from 1 July 2015) for an out of hour's service to deal with any urgent patient needs when the practice was closed. Patients are also directed to the Yeovil Walk-in

# Detailed findings

centre should the need arise. The dispensing pharmacy was open Mondays 9:00 am to 2:00 pm and then 3:00 pm to 7:00 pm and Tuesday to Friday 9:00 am to 2:00 pm and 3:00 pm to 6:30 pm.

## Why we carried out this inspection

We carried out a focused inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

## How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We carried out an announced visit on 27 September. During our visit we:

- Spoke with a range of staff including the practice manager and dispensing staff.
- Reviewed documentation and information available for the management and administration of the service.

# Are services safe?

## Our findings

### Overview of safety systems and processes

At the last comprehensive inspection of Summervale Surgery undertaken on 5 August 2015 we found that not all arrangements for managing medicines were safe.

The concerns identified were:

- Whilst the surgery offered a remote collection service for dispensed medicines including those requiring refrigeration; the practice were unable to provide assurance that the medicines requiring refrigeration were maintained within their recommended temperature range.
- We had found the GPs had an agreed a list of medicines they would have available for home visits and that of one of these medicines had been stored at room temperature which had then had in accordance to the manufacturers instructions would have reduced expiry date. The practice records indicated that this expiry date had not been revised to reflect the change in storage temperature.
- We had found that whilst prescription pads were securely stored when they were received into the practice their use was not monitored once they had been issued from the dispensary.

At this announced focused inspection on 27 September 2016 we reviewed what steps the practice had taken in line with the information they had supplied in their action plan that was submitted following the inspection in August 2015.

We found:

- The practice had carried out and completed a risk assessment process for the delivery and the remote collection for dispensed medicines including those requiring refrigeration. Included in this risk assessment were the initial checks of the refrigeration facilities at the two locations, transport and receipt of patient's prescriptions. The practice had developed and implemented a documented standard operating procedure (SOP) for the dispensing and handover of patient's prescriptions to the volunteer drivers. This had included calling the responsible person at the two locations prior to handover to check the refrigeration

temperatures were at the required temperature. Minor changes to the risk assessment and SOP were necessary to be implemented to include a process of regular audit to ensure that the procedure is follow correctly. We also noted that minor changes to the packaging of the prescription medicines for delivery should be implemented to ensure that the medicines remained tamper proof. Following this inspection we were provided with an updated SOP and risk assessment document that included the necessary information to indicate the appropriate steps were in place.

- We reviewed the system at the practice for the medicines used by GPs to take out on home visits. The practice had reassessed the system and the medicines they used and replaced the medicine which had a short shelf life when not refrigerated, with one that did not require refrigeration. The practice had also implemented a checking system carried out by the dispensing pharmacy staff to ensure that GPs checked in and checked out the 'medicine tins' taken out for home visits, so that the medicines used were monitored. They had also implemented a system to ensure that all medicines kept for home visits were in date, in an appropriate condition, and secure when not in use.
- We looked at the systems for the management of blank prescription forms and pads to ensure that they were securely stored and there were systems in place to monitor their use. We found that blank prescription paper and prescription were logged as they were received into the practice by the dispensing pharmacy staff. There was a limited system of allocation of blank prescription paper, for example, allocation to the dispensing pharmacy area. However, they had not yet implemented a system that was in accordance to the NHS Security of Prescription Forms Guidance (2013). The area where they were stored when not in use was accessible to unauthorised staff. The practice had not implemented a system of logging prescription paper to the areas where it was distributed at the practice, or ensured the security of the areas when an authorised person was not present. During this inspection we were provided with evidence that a new protocol was in place but minor changes were required to ensure full compliance to NHS guidance. This included security measures to be implemented to remove prescription paper from printers in areas that were not attended by

## Are services safe?

authorised persons. Following this inspection a new protocol was developed; practice procedures amended and new recording processes were commenced. However, we have not been able to check these changes have been sustained.

At the last comprehensive inspection of Summervale Surgery on 5 August 2015 we found that the practice could not provide evidence that appropriate information about the volunteers who supported the practice had been taken.

- During the last inspection we had found that the practice had a small number of volunteers who undertook delivering prescriptions to local pick up points (post offices) for patients not able to visit the practice. At the time of this inspection the practice could not provide evidence of risk assessments of this activity for volunteers to carry out this work without sufficient checks in place.

We found at this inspection the practice had implemented a new protocol and risk assessment process for the volunteer drivers who undertook delivering prescriptions to local pick up points. However, they had not ensured that they had retained information such as proof of identity, driving licence and appropriate detail regarding the vehicles that the volunteers used for their service. Following this inspection they informed us that minor changes to the protocol and risk assessment process documents had been implemented and the appropriate information regarding the volunteers was being sought. However, we have not been able to check these changes have been sustained.