

Trescobeas 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 Trescobeas Surgery on 26 May 2016. The practice was rated as requires improvement for safe and good for effective, caring, responsive and well led. Overall the practice was rated as good.

During that inspection we found that the practice was not compliant with the legislation in relation to the secure storage and monitoring of prescriptions.

We also identified that the areas the provider should make improvement were;

- Ensure systems which identify record and support patients who are also carers.
- Ensure equipment, including needles and syringes that were accessible to patients, are stored securely.
- Ensure that staff employed at the practice have the required employment checks.

The report setting out the findings of the inspection was published in August 2016. Following the inspection we asked the practice to provide an action plan detailing how they would improve on the areas of concern.

We carried out a focused inspection of Trescobeas Surgery on 16 November 2016 to ensure the changes the practice told us they would make had been implemented and to apply an updated rating.

We found the practice had made significant improvement since our last inspection on 26 May 2016. Following this focused Inspection we rated the practice as good for providing safe services. The overall rating for the practice remains good. For this reason we have only rated the location for the key question to which this related. This report should be read in conjunction with the full inspection report published August 2016.

At this inspection we found:

- All prescription stationary was managed, monitored and stored securely.
- Equipment, including needles and syringes, were stored securely in areas that were not accessible to patients.
- The practice had completed appropriate employment checks when recruiting new staff.

The provider had also:

Summary of findings

- Accurately identified an increased number of carers and had a dedicated Carers lead. The practice demonstrated that they were continuously actively seeking to identify and support carers.

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?

When we inspected in May 2016 we found the practice was rated as requires improvement for providing safe services.

Following publication of our report in August 2016 of the inspection, the practice told us in their action plan of the changes they would complete and implement.

When we completed the focused inspection 16 November 2016 we saw:

- A more robust system for storage, recording and tracking blank prescription forms. Responsibility for this had been allocated to the reception staff who demonstrated competence in recording the storage and management of blank prescription forms.
- Staff files evidenced appropriate recruitment checks had been undertaken when employing new staff.
- Equipment was stored securely in an area not accessible to patients.

We found the practice had made significant improvement since our last inspection on 26 May 2016. Following this desk based Inspection we rated the practice as good for providing safe services.

Good



Trescobeas Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Assistant Inspector. The team included a CQC Inspector.

Background to Trescobeas Surgery

Trescobeas Surgery was inspected on Wednesday 16 November 2016. This was a focused inspection.

The main practice is situated in Falmouth in Cornwall. There are also branch practices at Mylor and Flushing.

The practice provides a general medical service to 10,000 patients in urban and rural locations covering the whole of Falmouth and east to Penryn and south to Mawnan Smith.

The practices population is in the sixth decile for deprivation; one being the most deprived and ten being the least deprived; when compared to the national average. The practice population ethnic profile is predominantly White British. There is a practice age distribution of male and female patients' broadly equivalent to national average figures. The average male life expectancy for the practice area is 79 years which matched the national average of 79 years; female life expectancy is 84 years which is slightly higher than the national average of 83 years.

There is a team of eight GP partners, four female and four male GPs. Partners hold managerial and financial responsibility for running the business. The team are

supported by a practice manager, a lead nurse, two practice nurses, four healthcare assistant/phlebotomists (a person trained to take blood samples) and additional administration staff.

The practice is a training and teaching practice for GPs in training, and medical students. It currently has two GP registrars working in the practice.

At the Mylor practice, dispensing services are provided to registered patients who lived more than a mile away from a community pharmacy. The dispensary is open during surgery times.

Patients using the practice also have access to community nurses, mental health teams and health visitors and other health care professionals who visit the practice on a regular basis.

The practice is open between 8am until 6.30pm Monday to Friday. Appointments are offered at any time within these hours. Extended hours are offered from 6.30pm to 8pm Monday to Thursday evenings.

Outside of these times patients are requested to telephone the practice, where the calls are transferred to the out of hours service on the NHS 111 number.

The practice has a General Medical Services (GMS) contract with NHS England.

The Trescobeas Surgery provides regulated activities from the main site at Trescobeas Road, Falmouth, Cornwall TR11 2UN and from a branch at Mylor and Flushing.

Why we carried out this inspection

We carried out a comprehensive inspection on 26 May 2016 and published a report setting out our judgements. We

Detailed findings

undertook a focused inspection on 16 November 2016 to check that the practice had taken the actions they told us they would make to comply with the regulations that they were not meeting at the previous inspection.

We found that the necessary changes had been made and the provider was now meeting the fundamental standards included within this report.

The focused inspection also enabled us to update the ratings for the practice.

How we carried out this inspection

We undertook a focused inspection at of Trescobeas Surgery on 16 November 2016.

This was carried out to check that the practice had completed the actions they told us they would take to comply with the regulations we found had been breached during an inspection in May 2016.

To complete this focused inspection we:

- Reviewed the provider's action plan.
- Spoke to the registered Manager and other staff members at the practice
- Reviewed records and observed practical arrangements relevant to the safe storage and monitoring of blank prescriptions.
- Observed practical arrangements for the safe storage of equipment, including needles and syringes.
- Reviewed staff files.
- Reviewed the carers record.

Because this was a focused follow up inspection we looked at one of the five key questions we always ask:

- Is it safe?

Are services safe?

Our findings

When we inspected this location in May 2016 we found the practice did not have suitable systems in place to always provide safe services. For example:

- , Prescription forms were not monitored or stored safely.
- Some equipment, including needles and syringes, were stored in unlocked cupboards that were accessible to patients.
- Recruitment records we looked at did not contain all evidence that appropriate recruitment checks had been undertaken prior to employment.

Following publication of our report in August 2016 of the inspection, the practice told us in their action plan of the changes they would complete and implement.

When we completed the focused inspection 16 November 2016 we saw:

- Evidence of a more robust system for recording and tracking blank prescription forms. For example, responsibility for this had been allocated to the reception staff. We spoke to a member of the reception team who demonstrated competence in recording the

allocation, storage and movement of blank prescription forms. The practice had introduced an electronic prescription service which had reduced the number of blank prescriptions used by the practice; GPs were therefore not carrying blank prescriptions when making home visits.

- Records demonstrating that prescriptions were issued to prescribers each morning; the practice recorded where all prescriptions were located throughout the day. The practice collected all blank prescriptions from allocated printers at the end of each day and placed them in a locked cupboard in an area not accessible to patients. Prescriptions were placed in lockable printers in rooms that prescribing staff were able to lock when they were not present.
- We reviewed two staff files that evidenced appropriate recruitment checks had been undertaken when employing new staff.
- Equipment, including needles were stored securely in an area not accessible to patients.

We found the practice had made significant improvement since our last inspection on 16 May 2016. Following this desk based Inspection we rated the practice as good for providing safe services.