

# The Lime Tree Surgery

#### **Quality Report**

Lime Tree Avenue Findon Valley Worthing **West Sussex** BN14 0DL Tel: 01903 264101 Website: www.limetreesurgery.com

Date of inspection visit: 6 October 2017 Date of publication: 27/11/2017

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 caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

### Summary of findings

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#### Overall summary

### **Letter from the Chief Inspector of General Practice**

We carried out an unannounced focused inspection at The Lime Tree Surgery on 6 October 2017 in response to concerns raised directly with CQC. This related to patient access to services, quality of treatment, appropriate standards of cleanliness and hygiene and confidentiality of patient identifiable information. This report covers our findings in relation to the inspection on 6 October 2017. As a result of this inspection the provider's rating remains unchanged and stays as Good.

Our key findings were as follows:

- The practice had experienced a period of change following a recent merger.
- We found the premises to be clean, tidy and in generally good repair both inside and out.
- Staff demonstrated an understanding of the importance of patient confidentiality.

- We found that the practice had taken positive steps to improve access to appointments and patients and staff told us access to appointments had improved.
- Although lessons were learned from individual concerns and complaints, there was not sufficient communication about complaint outcomes between the practice management team.

However, there was one area of practice where the provider should make improvements.

The provider should:

- Improve communication in relation to complaint outcomes between the practice management team and clinical staff.
- Consider including the nursing team in clinical meetings, significant events meetings and complaints meetings.

#### **Professor Steve Field (CBE FRCP FFPH FRCGP)**

Chief Inspector of General Practice

# Summary of findings

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We always ask the following five questions of services.

#### Are services safe?

At our previous focused inspection on 26 May 2017, we rated the practice as Good for providing safe services. At this unannounced focused inspection this rating remains unchanged.

We received a concern relating to the cleanliness of the Lime Tree Avenue site.

At this inspection we found the premises to be clean and tidy both inside and out.

#### Are services caring?

At our previous comprehensive inspection on 4 February 2016, we rated the practice as Good for providing caring services. At this unannounced focused inspection this rating remains unchanged.

We received a concern relating to patient identifiable information which was left on the reception desk in view of patients and staff entering clinic rooms during patient consultations.

During this inspection, we observed staff at reception to be considerate of patient confidentiality.

#### Are services responsive to people's needs?

At our previous comprehensive inspection on 4 February 2016, we rated the practice as Good for providing responsive services. At this unannounced focused inspection this rating remains unchanged.

We received three concerns relating to access to appointments including difficulty accessing urgent appointments, phone calls from a GP and home visits. We reviewed the complaints received by the practice between May 2017 and the date of our inspection.

At this inspection we found that the practice had taken positive steps to resolve the concerns raised and patients and staff told us access to appointments had improved.

Although lessons were learned from individual concerns and complaints there was not sufficient communication about complaint outcomes between the practice management team.

#### Are services well-led?

At our previous focused inspection on 11 October 2016, we rated the practice as Good for providing well-led services. At this unannounced focused inspection this rating remains unchanged.

We received three concerns about bullying at the practice. We discussed this with the practice management team, the nursing

#### Good



#### Good



Good



# Summary of findings

team and reception and administration staff. We were told that while there had been some issues during the period of change at the practice, these had been resolved and staff told us they were not currently aware of any bullying within the practice.



# The Lime Tree Surgery

**Detailed findings** 

#### Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a practice manager specialist adviser.

# Background to The Lime Tree Surgery

The Lime Tree Surgery is located in the town of Worthing and provides primary medical services to approximately 20,900 patients. The practice also provides care and treatment for the residents of four nearby care homes, which serve individuals with dementia or nursing needs.

There are seven GP partners and five salaried GP (six male, six female). The practice also has one female locum GP. The practice is registered as a GP training practice, supporting medical students and providing training opportunities for doctors seeking to become fully qualified GPs.

There are two nurse practitioners, five practice nurses, two health care assistants and one phlebotomist. GPs and nurses are supported by the practice manager, a patient services manager, and a team of reception and administration staff.

The practice had been going through a period of significant change. Just over two years ago the practice merged with another local practice which increased its number of registered patients by approximately 50 per cent. Data available to CQC shows the practice serves a higher than average number of patients who are aged 65 years and

older when compared to the national average. The number of patients aged 18 years and under is slightly below the national average. The number of registered patients suffering income deprivation is below the national average.

The practice is open from Monday to Friday between 8am and 6.30pm. Extended hours appointments are offered at the Lime Tree Avenue site on Monday to Friday from 7.30am to 8am and on Mondays from 6.30pm to 7.30pm.

Appointments can be booked over the phone, online or in person at the surgery. Patients are provided information on how to access an out of hours service by calling the surgery or viewing the practice website.

The practice has a General Medical Services (GMS) contract with NHS England. (A GMS contract is one between the practice and NHS England where elements of the contract such as opening times are standard). The practice is part of NHS Coastal West Sussex Clinical Commissioning Group.

Services are provided from the following sites:

The Lime Tree Surgery

Lime Tree Avenue

Worthing

West Sussex

BN14 0DL

and

The Lime Tree Surgery

Durrington Health Centre

**Durrington Lane** 

Worthing

West Sussex

BN132RX

### **Detailed findings**

### Why we carried out this inspection

We undertook an unannounced focused inspection of The Lime Tree Surgery on 6 October 2017. The practice first received a comprehensive inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions on 4 February 2016 and was rated Requires Improvement overall. We then conducted two focused inspections on 11 October 2016 and 26 May 2017 after which the practice was rated as Good. This inspection, on 6 October 2017, was carried out in response to concerns raised directly with CQC relating to patient access to services, quality of treatment, appropriate standards of cleanliness and hygiene and confidentiality of patient identifiable information.

### How we carried out this inspection

During our visit we:

- Spoke with a range of staff (practice management team, GPs, nurses and administration staff) and spoke with patients who used the service.
- Observed how patients were being cared for in the reception area.
- Reviewed an anonymised sample of the personal care or treatment records of patients.
- Looked at information the practice used to deliver care and treatment plans.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.



### Are services safe?

### **Our findings**

At our previous focused inspection on 26 May 2017, we rated the practice as Good for providing safe services. At this unannounced focused inspection this rating remains unchanged.

Overview of safety systems and process

We received a concern relating to cleanliness at The Lime Tree Avenue site. This included the general up keep of the outside of the premises and the appearance of some the decoration inside the premises.

During this inspection we found the premises to be clean and tidy both inside and out.



# Are services caring?

### **Our findings**

At our previous comprehensive inspection on 4 February 2016, we rated the practice as Good for providing caring services. At this unannounced focused inspection this rating remains unchanged.

#### Kindness, dignity, respect and compassion

We received a concern relating to patient identifiable information which was left on the reception desk in view of patients and staff entering clinic rooms during patient consultations. The practice had also received a complaint expressing the same concerns.

During this inspection, we observed staff at reception to be considerate of patient confidentiality by asking patients to stand away from the reception desk until they were being helped. Staff we interviewed told us they exercised sensitivity and had awareness of the need for patient confidentiality and privacy. The need for confidentiality and The Data Protection Act had been discussed at the recent staff meeting in response to the complaint received at the practice. Staff we spoke with were aware of their responsibilities in upholding patient confidentiality.



### Are services responsive to people's needs?

(for example, to feedback?)

### **Our findings**

At our previous comprehensive inspection on 4 February 2016, we rated the practice as Good for providing responsive services. At this unannounced focused inspection this rating remains unchanged.

#### Access to the service

We received three concerns relating to access to appointments including difficulty accessing urgent appointments, phone calls from a GP and home visits.

At this inspection the practice told us they had made various changes to access appointments over the previous months. The practice had merged with the Durrington Health Centre site in September 2015 and felt that this change impacted administration staff at the main, Lime Tree Avenue site, as all phone calls were filtered through the main site. This had meant an increase in workload for staff working there. As a result of this the practice had undergone a high staff turnover of reception staff during May 2017. Since then the practice had reviewed the role of the receptionists so that incoming calls were rotated between staff and other work was reallocated. Two new pharmacy technicians were employed and their role also reduced the workload of the reception staff. We received comments from seven reception and administration staff. They told us that while there had been some issues, things had improved and they felt their workload was busy but manageable. Staff also told us they felt well supported by the practice management team.

The practice told us there had been changes to the GPs due to retirement of four partners in the past two years but that

the practice now had a full complement of GPs. This gave patients better access to appointments and home visits. There had also been changes to the nursing team. The lead nurse had recently retired but there was now a new lead nurse in place which meant patients had better access to nurse appointments and annual reviews. We interviewed five patients who told us access to appointments was satisfactory with two patients commenting they could always get urgent and same day appointments when they needed them. Three patients commented that access to appointments had improved in recent months.

#### Listening and learning from concerns and complaints

As well as investigating the concerns raised directly with CQC, we also looked at 19 complaints received by the practice between May 2017 and the date of this inspection (October 2017). The practice reflected this was a high number of complaints to receive and that they hoped to see a reduction in complaints now that the practice had resolved the issues surrounding access to appointments. We found that complaints were satisfactorily handled and dealt with in a timely way, with openness and transparency and in accordance with policy. Although lessons were learned from individual concerns and complaints, there was not sufficient communication about complaint outcomes between the practice management team. The practice held meetings to discuss the outcome of complaints and annual reviews of complaints received by the practice but nurses were not invited to attend. There was guidance on how to make a complaint on the practice website and in the patient handbook.



### Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

# Our findings

At our previous focused inspection on 11 October 2016, we rated the practice as Good for providing well-led services. At this unannounced focused inspection this rating remains unchanged.

#### Leadership and culture

We received three concerns about bullying at the practice. We discussed this with the practice management team, the nursing team and reception and administration staff. We

were told that while there had been some issues during the period of change at the practice, these had been resolved and staff told us they were not currently aware of any bullying within the practice. Staff felt relationships between staff were positive and told us they were supported by the practice management team and the GP partners.

Staff told us the practice held meetings for all staff approximately every six months. The GPs held a weekly clinical meeting as well as regular significant events meetings and complaints meetings; however these were not currently attended by the nursing team.