

Farnham Dene Medical Practice

Quality Report

Farnham Centre for Health
Hale Road
Farnham
Surrey
GU99QS
Tel: 01252 730100
Website: www.farnhamdene.com

Date of inspection visit: 28 June 2016
Date of publication: 13/09/2016

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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Farnham Dene Medical Practice	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced focused inspection of Farnham Dene Medical Practice, Farnham Centre for Health, Farnham, Surrey, GU9 9QS on 28 June 2016. The inspection was undertaken to check that the practice was making improvements following an inspection on 24 September 2015 where we found breaches in regulations relating to safe delivery of services. At the inspection on 24 September 2015, the practice was rated good overall and good for providing effective, caring, responsive and well-led services. The practice was rated as requires improvement for safe.

We found the practice had made improvements since our last inspection on 24 September 2015 and was meeting the regulations that had previously been breached.

Our key findings for this review were as follows:

- The practice had reviewed and implemented changes to the recording of their cleaning schedule for equipment used.
- The practice had ensured all Patient Group Directions (PDGs) had been signed by staff authorised to administer vaccines.

We have amended the rating for this practice to reflect these changes. The practice is now rated as good for the provision of safe, effective, caring, responsive and well-led services. The overall rating for the practice remains good.

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?

At our inspection on 24 September 2015 we found that the practice did not have a cleaning schedule for clinical equipment and therefore had no recorded evidence to demonstrate that equipment had been cleaned. The practice also had unsigned Patient Group Directions (PGDs) which was in breach of national requirements. PGDs are directives agreed by GPs allowing nurses to administer prescription-only medicines, such as vaccines.

The practice had taken steps to improve the safety of the services. In June 2016, we saw that the practice had implemented their action plan to address the areas of concern identified at our inspection in September 2015.

The practice had allocated a staff member to oversee the signing of PGDs by all staff administering vaccines. PGDs were also countersigned by the lead GP. The practice had also created a folder for cleaning checks and had implemented a cleaning schedule for equipment which was colour coded. Each piece of equipment had a sticker on it which corresponded to the colour of the frequency it required cleaning. Staff recorded that cleaning checks had been completed on a daily or weekly basis as per the new schedule.

Good



Farnham Dene Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a CQC Lead Inspector.

Background to Farnham Dene Medical Practice

Farnham Dene Medical Practice offers personal medical services to the population of Farnham. There are approximately 1200 registered patients. Farnham Dene Medical Practice is run by six partner GPs. The practice is also supported by four salaried GPs, two GP Registrars (GPs in training), four practice nurses, one healthcare assistant, a phlebotomist, a team of receptionists, administrative staff, a reception manager, an assistant practice manager and a practice manager. There are three male and nine female GPs. At the time of the inspection in 2015, one of the GPs was leaving the practice as a partner and a salaried GP was being registered as a new partner. We saw evidence to this effect.

The practice runs a number of services for its patients including asthma clinics, child immunisation clinics, diabetes clinics, new patient checks and holiday vaccinations and advice. Services are provided at Farnham Dene Medical Practice, Farnham Centre For Health, Hale Road, Farnham, Surrey, GU9 9QS. Opening hours are Monday to Friday 8am to 6:30pm. The practice has opted out of providing Out of Hours services to their patients. There are arrangements for patients to access care from an Out of Hours provider.

The practice population has a higher number of patients between 14 and 35 - 64 years of age than the national and local CCG average. The practice population also shows a lower number of 15-34 and 70-74 year olds than the national and local CCG average, with a significantly lower proportion of 24-34 year olds. There are a slightly lower number of patients with a long standing health condition and also a lower than average number of patients with caring responsibilities or with a health care problem in daily life. The percentage of registered patients suffering deprivation (affecting both adults and children) is lower than the average for England.

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.

At our inspection on 24 September 2015 we made a requirement for the practice to address shortfalls with:

Detailed findings

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment.

- We found that nurses using Patient Group Directions (PGDs) were not authorised to administer vaccines in line with national requirements due to forms not being signed.

This was in breach of regulation 12 (2) (g) of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014.

Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment

- We found that nurses did not operate a cleaning schedule for equipment used and therefore there was no recorded evidence to demonstrate that equipment was cleaned. Staff would therefore be uncertain as to when equipment was last cleaned.

This was in breach of regulation 15 (1)(a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

How we carried out this inspection

We revisited Farnham Dene Medical Practice to review the areas of concern from our previous inspection in September 2015.

Before visiting we reviewed the action plan submitted by the practice addressing how they intended to make improvements in order to meet the regulations.

During our visit we spoke with the reception manager and one of the GPs. We were unable to speak to nurses due to being in consultation at the time of visit but received follow up information and supplementary evidence at the end of the day.

Are services safe?

Our findings

At our last inspection in September 2015, we were concerned that there was not a cleaning schedule in place for equipment used and therefore the practice was unable to demonstrate how equipment was cleaned. Staff were uncertain when equipment was last cleaned.

At our last inspection we identified that staff were administering vaccines using Patient Group Directions (PGDs) when they had not been authorised to do so. This was not in line with national guidance as these had not been signed by staff members or an authorising manager.

Prior to our inspection in June 2016, we received an action plan from the provider informing us of the actions they had taken to meet the regulations.

At the inspection on 28 June 2016 we saw meeting minutes from a nurses meeting in November 2015 which evidenced that the action plan had been discussed and actions were allocated to certain individuals to oversee changes. The practice had allocated the health care assistant as responsible for monitoring all PGDs to ensure they were

signed and in date. We reviewed 17 PGDs including those that were found to be unsigned at the previous inspection. All PGDs had been signed by all staff who were administering the vaccine and countersigned by the lead GP.

We saw that the practice had now created a cleaning schedule folder. The front sheet contained colour coded categories which represented what tasks and equipment needed cleaning on a daily, weekly, monthly, three and six monthly basis. We observed that equipment in each treatment room had been labelled with a colour coded tag which corresponded to the cleaning schedule. The practice had implemented a spreadsheet to record when the cleaning checks were happening. We saw that a monthly copy of the spreadsheet was in each room for staff to record that daily checks had occurred and a list of what was expected from the daily checks. Daily checks had been completed from the months of February 2016, when the practice initiated this action, to the date of inspection. Cleaning of specialist equipment such as ear syringes was recorded in a separate log book which we also saw evidence of.