

Puddletown Surgery

Quality Report

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Date of inspection visit: 03 May 2016

Date of publication: 31/05/2016

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

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

Detailed findings from this inspection

Background to Puddletown Surgery	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

Overall summary

Letter from the Chief Inspector of General Practice

We carried out a focused inspection of Puddletown Surgery on 3 May 2016 to assess whether the practice had made the improvements in providing safe care and services.

We had previously carried out an announced comprehensive inspection at Puddletown Surgery on 5 August 2015 when we rated the practice as good overall. The practice was rated as requires improvement for providing safe care. This was because medicines kept in the treatment rooms and the practice dispensary were secure but the keys to these areas were not. The Standard operating procedures for the dispensary were not signed by all relevant staff. Also recruitment procedures were incomplete.

We asked the provider to send a report of the changes they would make to comply with the regulations they

were not meeting at that time. The practice was able to demonstrate that they were meeting the standards. The practice is now rated as good for providing safe care. The overall rating remains as good.

This report should be read in conjunction with the full inspection report.

Our key findings across the areas we inspected were as follows:

- Arrangements were in place for the management for security of medicine keys
- The dispensary standard operating procedures were in place and appropriately signed by staff
- Recruitment checks for staff had been appropriately completed and recorded.

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.

There were safe and effective systems in place:

- For the management of security of medicine keys
- For the dispensary standard operating procedures for use by staff
- To ensure the correct recruitment checks for staff had been completed and recorded.

Good



Summary of findings

Puddletown Surgery

Detailed findings

Background to Puddletown Surgery

Puddletown Surgery is a purpose built dispensing GP practice situated in Puddletown, a village close to Dorchester, Dorset. It has been at its present location since 2011.

The practice has an NHS general medical services contract to provide health services to approximately 4,100 patients in Puddletown and the surrounding villages. The practice area is not ethnically diverse; unemployment is low and has no specific areas of deprivation.

The practice has two male GP partners and one female salaried GP who together provide care equivalent to just over 2 full time GPs. The practice is a training practice for doctors training to be GPs. Puddletown Surgery also employs four primary care nurses and a health care assistant as well as dispensary staff. The practice is supported by a team of managerial and administration staff who carry out administration, reception, scanning and secretarial duties.

A range of additional services are offered by the practice such as chiropody, counselling and minor injury advice.

The practice is open from 8.30am to 6.30pm from Monday to Friday and between 8.30am and 11.00am on Saturdays. The practice offers on-line services for patients such as appointment booking and ordering repeat prescriptions. The practice has opted out of providing out-of-hours services to their own patients and refers them to South Western Ambulance Trust via the NHS 111 service.

We previously inspected Puddletown Surgery on 5 August 2015. Following this inspection, the practice was given an overall rating of good. A copy of the report detailing our findings can be found at www.cqc.org.uk

Why we carried out this inspection

We carried out an announced inspection at Puddletown Surgery on 5 August 2015 when we rated the practice as good overall. Specifically, the practice was rated as good for providing responsive services, being well-led, providing effective care for being caring and requires improvement for providing safe care.

As a result of the inspection in August 2015, the provider was found to be in breach of regulations 12 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We found that the practice did not have effective systems in place to monitor medicines. Medicines kept in treatment rooms and the practice dispensary were secure but the keys to these were not. Standard operating procedures for use in the dispensary were not signed by all relevant staff. We also found that appropriate recruitment checks prior to the employment of staff had not consistently been undertaken.

We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time. We have followed up to make sure that the necessary changes have been made and found the provider is now meeting the regulations included within this report. This report should be read in conjunction with the full inspection report.

Detailed findings

How we carried out this inspection

We revisited Puddletown Surgery as part of this inspection. We carried out a focused review based on the evidence observed on inspection and information the practice provided to us prior to inspection.

We visited the practice on 3 May 2016 to check the necessary changes have been made.

Are services safe?

Our findings

Monitoring risks to patients

At the follow up inspection, the practice was able to demonstrate evidence of how they had improved their procedures and were now complying with the regulations.

At our last inspection on 5 August 2015, medicines stored in the treatment rooms, the practice dispensary and medicine refrigerators were stored securely and doors were locked when rooms not in use, however the keys were not kept securely. This meant the practice could not be assured that unauthorised access to medicines was prevented. On 3rd May 2016 we found the practice had reviewed procedures for the storage of keys to medicines and clinical areas. All keys are stored in a lockable location; the location is protected by a key operated lock accessible only to authorised personnel. Staff collected keys at the beginning of their working day and returned them for safe storage at the end of the day.

We found on 5 August 2015 that appropriate recruitment checks in line with the practice's recruitment policy were not consistently undertaken. Three staff started to work at the practice without written evidence of conduct in their previous employment. One also had no proof of identity, a DBS check (or written rationale why a check was not necessary), eligibility to work in the United Kingdom or written employment history. This meant the practice could not be assured that staff employed were appropriate. On

3rd May 2016 we reviewed four recruitment files for staff employed since April 2013, one of whom had been employed since our inspection in August 2015. Appropriate recruitment checks had been undertaken prior to employment in all files. For example, proof of identification, references, qualifications, registration with the appropriate professional body and the appropriate checks through the Disclosure and Barring Service. The practice had set up a checklist to assist with safe recruitment to ensure areas were not missed in the future employment of staff.

Puddletown Surgery is a dispensing practice. On 5th August 2015 we looked at 40 standard operating procedures (SOPs) which were used by the dispensary staff. A SOP includes all the written protocols and procedures in place within a dispensary. Each SOP included a front sheet for staff to sign to confirm they had read and understood its contents but all of these were blank. We were shown a master sheet which covered all the SOPs and had spaces for signatures of seven staff, the dispensary manager and responsible GP. This document was signed by only two staff in March 2015. On 3rd May 2016 we found that a master sheet now detailed which staff should sign the SOPs to indicate they had read and understood the SOP. The master sheet also detailed the contents of the file and provided an appendix of 40 different SOPs. All six dispensary staff had signed the SOPs appropriately. Each SOP was reviewed at least every two years, or more frequently if changes were required, by one of the GP partners.