

Wayside Medical Practice

Inspection report

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Horley
RH6 7AD
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www.waysidesurgery.nhs.uk

Date of inspection visit: 14 January 2020
Date of publication: 29/05/2020

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 location

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Inadequate



Overall summary

We carried out an announced comprehensive inspection at Wayside Medical Practice on 14 January 2020. This was to follow up on breaches of regulation found at our previous inspection 4 December 2018. The details of these can be found by selecting the 'all reports' link for Wayside Medical Practice on our website at www.cqc.org.uk.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as requires improvement overall and requires improvement for all population groups.

We rated the practice as **requires improvement** for providing safe services because:

- There were gaps in the systems and processes to keep people safe and safeguarded from abuse.
- There were gaps in arrangements to assess, monitor and manage risks.
- There were areas of medicines management that were not sufficient.
- The recording and dissemination of learning from significant events was not sufficient.

We rated the practice as **requires improvement** for providing effective services because:

- There was not a comprehensive programme of quality improvement activity.
- There was low uptake of childhood immunisations.
- Some performance results were significantly below national and the CCG average.
- There were gaps in staff training.

We rated the practice as **inadequate** for providing well-led services because:

- Leaders did not demonstrate that they had a credible strategy to develop sustainable care.
- There had not been sufficient improvement since our last inspection to address concerns.
- Systems and processes were not operating as leaders intended.

- Identification, management and mitigation of risk was not sufficient.

We rated the practice as **good** for providing caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Feedback received from patients regarding their care and treatment and access to the service was very positive.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

The areas where the provider **must** make improvements are:

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out their duties

(Please see the specific details on action required at the end of this report).

The areas where the provider should make improvements are:

- Review and improve how the provider seeks and acts on feedback from patients to continually evaluate and improve the service.
- Review and improve how significant events are recorded and the learning identified and shared.
- Review and monitor that all information is recorded correctly in patient group directions.
- Review and improve the information given to patients wanting to complain.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Requires improvement 
People with long-term conditions	Requires improvement 
Families, children and young people	Requires improvement 
Working age people (including those recently retired and students)	Requires improvement 
People whose circumstances may make them vulnerable	Requires improvement 
People experiencing poor mental health (including people with dementia)	Requires improvement 

Our inspection team

Our inspection team consisted of a CQC lead inspector, a GP specialist advisor and a practice manager specialist advisor.

Background to Wayside Medical Practice

Wayside Medical Practice provides general medical services to approximately 5,400 patients. The practice also provides care and treatment for the residents who are registered at the practice and who live in nearby care homes, which serve individuals with a diagnosis of dementia or who have nursing care needs. They also provide GP services to a local medium and low secure hospital for male patients.

Services are provided from Wayside Medical Practice, Kings Road Horley RH6 7AD, which is a purpose-built building co-located with other healthcare organisations. This is a single-handed practice with one full time GP (male) and regular locum GPs who provide additional cover. There is also one advanced nurse practitioner, one practice nurse and one healthcare assistant. GPs and nurses are supported by the practice manager and a team of reception/administration staff.

Data available to the Care Quality Commission (CQC) shows the number of patients from birth to 18 years old served by the practice is slightly below the average for England. The number of patients aged 65 years and over

is above the England average. The percentage of registered patients suffering deprivation (affecting both adults and children) is slightly lower than the average for England.

Wayside Medical Practice is open from Monday to Friday between 8am and 6pm. Appointments can be booked over the telephone, online or in person at the practice. Patients are provided with information on how to access an out of hour's service by calling the practice or viewing their website (waysidesurgery.nhs.uk).

The practice offers a number of services for its patients including; sexual health advice and family planning, chronic disease management, minor surgery, smoking cessation, health checks and travel vaccines and advice.

Wayside Medical Practice is registered with the CQC to provide the regulated activities; Treatment of disease, disorder or injury; Surgical procedures; Diagnostic and screening procedures; Maternity and midwifery services and Family Planning.

For further details please see the practice website: www.waysidesurgery.nhs.uk

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>There was no proper and safe management of medicines. In particular:</p> <ul style="list-style-type: none">• Some emergency medicines and associated consumables, such as sterile needles, were past their expiry date. The system for monitoring stock levels and expiry dates was not operating effectively.• Vaccines were not appropriately stored and monitored in line with PHE guidance.• Monitoring of patients prescribed high risk medicines was not sufficient.• Blank prescription stationary was not stored and monitored in line with NHS guidance. <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <ul style="list-style-type: none">• Not all appropriate risk assessments had been carried out within an appropriate timescale.• Actions identified through risk assessments had not been completed within the specified timescale.• The practice did not demonstrate compliance with COSHH regulations.• Staff undertaking the role of fire marshal had not received appropriate training to carry out the role.• Staff immunisation status was not monitored and maintained in line with current Public Health England guidance.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p>

This section is primarily information for the provider

Requirement notices

Surgical procedures

Treatment of disease, disorder or injury

The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk.

The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to evaluate and improve their practice in respect of the processing of the information obtained throughout the governance process.

The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:

- The practice was unable to demonstrate a programme of clinical audit and quality improvement activity to routinely review the effectiveness and appropriateness of the care provided.

Regulated activity

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing

The service provider had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they were employed to perform. In particular:

The provider failed to evidence that staff were suitably qualified, competent, skilled and experienced persons were deployed to meet the fundamental standards of care and treatment.