

Wye Valley Surgery

Quality Report

Wye Valley Surgery 2 Desborough Avenue High Wycombe Buckinghamshire HP11 2RN

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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	
Are services responsive to people's needs?	Good	

Key findings

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Letter from the Chief Inspector of General Practice

At our previous comprehensive inspection at Wye Valley Surgery in Buckinghamshire on 2 November 2017 we found a breach of regulations relating to the provision of safe services. The overall rating for the practice was requires improvement. Specifically, the practice was rated requires improvement for the provision of safe and responsive services.

The concerns which led to these ratings apply to everyone using the practice, therefore all population groups were also rated requires improvement. The practice was rated good for the provision of effective, caring and well-led services.

The full comprehensive report on the November 2017 inspection can be found by selecting the 'all reports' link for Wye Valley Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 21 March 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulations that we identified in our previous inspection in November 2017.

This report covers our findings in relation to those requirements and improvements made since our last inspection.

We found the practice had made improvements since our last inspection. At our inspection on the 21 March 2018 we found the practice was meeting the regulations that had previously been breached. We have amended the

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

All six population groups have also been re-rated following these improvements and are also rated as good.

Our key findings were as follows:

- Systems had been implemented and embedded which ensured care and treatment was provided in a safe way to patients.
- The practice had established and was now operating safe and effective systems to assess, manage and mitigate the risks identified relating to patient safety, medicine safety and device alerts.
- The practice had continued to review the existing arrangements with regards to the number of patients attending the cervical screening programme. Part of the review included an analysis of potential barriers preventing patients attending the screening programme. We also saw the review led to a five point action plan to increase uptake rates. We were presented data during the March 2018 inspection which indicated the plan had been effective and uptake rates had increased.

Summary of findings

• The practice engaged with patients and monitored the outcomes of patient feedback including patient surveys and took appropriate action to further improve the patient experience. Feedback received during the inspection indicated improving levels of patient satisfaction, specifically regarding access.

Professor Steve Field CBE FRCP FFPH FRCGP Chief Inspector of General Practice

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

We always inspect the quality of care for these six population groups	
Older people The practice had resolved the concerns for safety and responsiveness identified at our inspection in November 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
People with long term conditions The practice had resolved the concerns for safety and responsiveness identified at our inspection in November 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
Families, children and young people The practice had resolved the concerns for safety and responsiveness identified at our inspection in November 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
Working age people (including those recently retired and students) The practice had resolved the concerns for safety and responsiveness identified at our inspection in November 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
People whose circumstances may make them vulnerable The practice had resolved the concerns for safety and responsiveness identified at our inspection in November 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good
People experiencing poor mental health (including people with dementia) The practice had resolved the concerns for safety and responsiveness identified at our inspection in November 2017 which applied to everyone using this practice, including this population	Good

this.

group. The population group ratings have been updated to reflect



Wye Valley Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was completed by a CQC Inspector.

Background to Wye Valley Surgery

Wye Valley Surgery is located in the centre of High Wycombe in Buckinghamshire. The practice is one of the practices within Chiltern Clinical Commissioning Group (CCG) and provides primary medical services to approximately 10,500 registered patients.

Services are provided from:

• Wye Valley Surgery, 2 Desborough Avenue, High Wycombe, Buckinghamshire HP11 2RN.

Online services can be accessed from the practice website:

www.wyevalleysurgery.co.uk

According to data from the Office for National Statistics, Buckinghamshire has high levels of affluence and low levels of deprivation. However, Wye Valley Surgery is located in a pocket of high deprivation and the local area experiences challenges including substance misuse and severe mental health problems. People living in more deprived areas tend to have greater need for health services.

The practice population has a significantly higher proportion of patients aged under 18 when compared to the local CCG and national averages whilst there is a lower proportion of patients aged 65 and over.

There are a high percentage of patients from ethnic minority backgrounds and a large proportion of the patients speak English as a second language. The practice has a transient patient population; patients are often outside of the country for long periods. This has an impact on screening and recall programmes

The practice has the highest proportion of unemployed patients registered in the area, 6.4% of patients are unemployed compared to the CCG average (3%) and national average (4%).

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 2 November 2017 and we published a report setting out our judgements. These judgements identified a breach of regulations. 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 undertook a follow up focused inspection on 21 March 2018 to follow up and assess whether the necessary changes had been made, following our inspection in November 2017. We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection.

We followed up to make sure the necessary changes had been made. We found the practice was meeting all the requirements of the regulations that had previously been breached.

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



Are services safe?

Our findings

At our previous inspection in November 2017, we rated the practice as requires improvement for providing safe services as we identified concerns relating to the management of risks within the practice. For example, there was not a process or system to ensure that appropriate actions were taken in response to all applicable patient safety, medicine safety and device alerts.

These arrangements had improved when we undertook a follow up inspection on 21 March 2018. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

The practice had reviewed existing systems and processes and made several improvements, which included:

· The practice had reviewed and updated the arrangements to record, share and action (where appropriate) medicine and other patient safety alerts. Specifically, the practice had embedded a new process and supporting policies to receive alerts from the Medicines and Healthcare Products Regulatory Agency. The Clinical Pharmacist had been appointed the lead member of staff to manage the new process. Through discussions and a review of correspondence we saw the new updated arrangements had been embedded into the day to day management of the practice. We discussed two recent patient safety alerts which had been received in February 2018 and found the practice had received the alerts, completed the required patient searches, reviewed the required actions and made changes where appropriate. For example, we saw the practice had received an alert in February 2018 regarding a query over a batch of accuhaler. Anaccuhaleris a breath-activated device, similar to an inhaler which releases a dose of medicine when inhaled. We saw the practice had taken action to identify if the practice or any patients used this accuhaler which was subject to the alert and made then recommended amendments.

These actions were now ensuring that requirements relating to safe care and treatment were being met.



Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection in November 2017, we rated the practice as requires improvement for providing responsive services as we identified concerns relating to patient feedback and low levels of satisfaction regarding access.

Although patient feedback regarding access had improved, results from the most recent national GP survey showed satisfaction for accessing appointments was still lower when compared to local and national averages.

These arrangements had improved when we undertook a follow up inspection on 21 March 2018. The practice is now rated as good for providing responsive services.

Timely access to services

The practice had monitored and evaluated patient feedback and demonstrated improvements.

The practice was fully aware of the low levels of patient satisfaction collected via the GP patient survey. We saw the practice continued to be active in reviewing the concerns and we were told of further improvements they had made to improve telephone access, appointment availability and overall patient satisfaction. For example:

• There was a new appointment system (launched in February 2017) which aligned to the requirements of the practice and patient population.

- The practice had reviewed the skill mix and made improvements to increase patient access to appropriate clinicians. For example, pharmacists had been recruited which enabled patients to receive comprehensive medicines advice. Furthermore, a paramedic had been recruited who provided care for patients with minor injuries and also those who needed urgent care and was based at the surgery.
- However, at the November 2017 inspection, the practice had not monitored or evaluated the completed actions.

During the March 2018 inspection, we saw the practice had commenced an in-house survey to collect, monitor and record patient satisfaction. At the time of our inspection, the survey was still live. We saw the 40 responses which had already been received demonstrated improving levels of satisfaction, specifically regarding access.

As part of our inspection and an additional tool to collect patient feedback we asked for Care Quality Commission comment cards to be completed by patients prior to our inspection, we received 22 completed comment cards which were all positive. The practice had encouraged patients and carers to comment specifically on access and appointments. The written feedback collected on the comment cards and the three patients we spoke with during our inspection indicated improving levels of satisfaction. Comments we received described the service as excellent and commented the diverse clinical skill mix resulted in timely access to the correct member of staff.