

# **Newtons Practice**

#### **Quality Report**

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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 well-led?	Good	

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#### Overall summary

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

When we visited Newtons Practice on 30 August 2016 to carry out a comprehensive inspection we rated them as requires improvement overall. We found breaches in the regulations relating to safe and well-led services, and we told the practice they must:

- Ensure that medicines fridges are kept secure at all times.
- Ensure that health care assistants who carry out vaccines and immunisations do so under a clear authorisation which is maintained on record.
- Ensure a record of cleaning clinical areas and equipment is maintained to support infection control audits.
- Ensure that the feedback from patients and other stakeholders is managed and responded to.

We also said the practice should;

- Review and continue to take action to identify carers who are patients at their practice.
- Keep minutes of the regular nurse meetings to assist with future training, development and any quality assurance audits.
- Review the records maintained for staff training to ensure they are up to date.

This inspection was an announced focused inspection carried out on 23 June 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified at our previous inspection. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection. This report should be read in conjunction with the full report of our inspection on 30 August 2016, which can be found on our website at www.cqc.org.uk.

The practice is now rated as good overall and good for the provision of safe and well-led services.

Our key findings were as follows:

- The practice had installed a digital lock to the storeroom where the medicines fridges were kept which was routinely kept locked.
- The practice had patient specific directions (PSDs) to enable the health care assistants to carry out vaccines and immunisations under a clear authorisation. (PSDs are written instructions, from a qualified and registered prescriber for a medicine including the dose, route and frequency or appliance to be supplied or administered to a named patient after the prescriber has assessed the patient on an individual basis.)

- The practice had reviewed their procedures for ensuring clinical areas and equipment was maintained and kept clean. We saw evidence of the cleaning tasks completed.
- The practice had reviewed and drafted a report on feedback received from patients. They had identified areas of action to improve their service and had responded to some patients feedback on the Friends and Family test website.
- The practice had reviewed how they worked to identify and support carers. They had a member of staff who led on this work and a banner and a new carers notice board in the waiting area giving further information for carers. They had identified 128 patients as carers which was approximately 0.9% of their practice list. This was a slight decrease in the number of carers the
- practice had identified at our last inspection. They had developed an action plan, which we saw, identifying further steps they intended to take such as promoting the role of carers at seasonal flu clinics.
- The practice maintained a spreadsheet to record all training attended by staff. This enable the practice to ensure all staff were up to date with their training.

We saw one area where the provider should make improvement:

• The provider should review and continue to take action to identify carers who are patients at their practice.

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

#### The five questions we ask and what we found

We always ask the following five questions of services.

#### Are services safe?

When we visited Newtons Practice on 30 August 2016 to carry out a comprehensive inspection we rated them as requires improvement for the provision of safe services and said they must:

- Ensure that medicines fridges are kept secure at all times.
- Ensure that healthcare assistants who carry out vaccines and immunisations do so under a clear authorisation which is maintained on record.
- Ensure a record of cleaning clinical areas and equipment is maintained to support infection control audits.

On this focused inspection carried out on 23 June 2017 we saw the practice had taken action to address these concerns. Specifically;

- The practice had installed a digital lock to the storeroom where the medicines fridges were kept which was routinely kept locked.
- The practice had a range of patient specific directions (PSDs) in place to enable the health care assistants to carry out vaccines and immunisations under a clear authorisation. (PSDs are written instructions, from a qualified and registered prescriber for a medicine including the dose, route and frequency or appliance to be supplied or administered to a named patient after the prescriber has assessed the patient on an individual basis.)
- The practice had reviewed their procedures for ensuring clinical areas and equipment was maintained and kept clean. We saw evidence the cleaners keeping a record of the cleaning tasks completed.

The practice is now rated as good for the provision of safe services.

#### Are services well-led?

When we visited Newtons Practice on 30 August 2016 to carry out a comprehensive inspection we rated them as requires improvement for the provision of well-led services and said they must:

• Ensure that the feedback from patients and other stakeholders is managed and responded to.

We also said they should;

Good



Good



- The provider should keep minutes of the regular nurse meetings to assist with future training, development and any quality assurance audits.
- The provider should review the records maintained for staff training to ensure they are up to date.

On this focused inspection carried out on 23 June 2017 we saw the practice had taken action to address these concerns. Specifically;

- The practice had reviewed feedback from the Friends and Family test and had identified action they could take in response to some issues raised. They had worked with the patients participation group (PPG) to raise awareness of the Friends and Family test.
- The practice had worked with the PPG to conduct their own survey of patients and had produced a report based on the results. One of the recommendations from the report was that they should take particular effort to get the views of younger patients next time they did a survey.
- We saw evidence in the form of minutes of meetings which showed the practice held monthly nurse meetings and the minutes circulated to nurses unable to attend the meeting.
- The practice maintained a spreadsheet to record all training attended by staff. This enable the practice to ensure all staff were up to date with their training.

The practice is now rated as good for the provision of safe services.

#### The six population groups and what we found

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

Older people The provider had resolved the concerns for safety and well-led identified at our inspection on 30 August 2016 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 provider had resolved the concerns for safety and well-led identified at our inspection on 30 August 2016 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 provider had resolved the concerns for safety and well-led identified at our inspection on 30 August 2016 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 provider had resolved the concerns for safety and well-led identified at our inspection on 30 August 2016 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 provider had resolved the concerns for safety and well-led identified at our inspection on 30 August 2016 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 provider had resolved the concerns for safety and well-led identified at our inspection on 30 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good



# **Newtons Practice**

**Detailed findings** 

#### Our inspection team

Our inspection team was led by:

This focussed inspection was undertaken by a CQC inspector.

### **Background to Newtons Practice**

Newtons Practice is practice offering general medical services to the population of Haywards Heath in West Sussex. There are approximately 13,835 registered patients.

The practice population has a slightly higher number of patients between 30 and 44 years of age and a significantly higher number of patients over 85 years of age than the national and local clinical commissioning group (CCG) average. There are a lower number of patients with a longstanding health condition of 40% compared to the CCG average of 52% and national average of 54%. The percentage of registered patients suffering deprivation (affecting both adults and children) is lower than the average for both the CCG area and England.

Newtons Practice is run by seven partner GPs (three male and four female). The practice is also supported by three salaried GPs (female), one advanced nurse practitioner, three practice nurses, two healthcare assistants and three paramedic practitioners. There is a team of administrative and reception staff, and an assistant practice manager.

The practice runs a number of services for its patients including asthma clinics, diabetes clinics, coronary heart disease clinics, minor surgery, child immunisation clinics, new patient checks and travel vaccines and advice.

Services are provided from one location:

Newtons Practice, The Health Centre, Haywards Heath, West Sussex, RH16 3BB

Opening hours are Monday to Friday 8am to 6.30pm Monday to Friday.

During the times when the practice is closed arrangements are in place for patients to access care from IC24 which is an Out of Hours service provider. Patients are advised of how to access this service via the practice website and the telephone answer message patient hear when the practice is closed.

## Why we carried out this inspection

We undertook a comprehensive inspection of Newtons Practice on 30 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Overall the practice was rated as requires improvement. The full comprehensive report following the inspection on 30 August 2016 can be found by selecting the 'all reports' link for Newtons Practice on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Newtons Practice on 23 June 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

## How we carried out this inspection

During our visit we:

# Detailed findings

- Spoke with a range of staff including the practice manager and a health care assistant.
- Observed how patients were being cared for in the reception area and talked with carers and/or family
- Visited the practices main location.

• 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**

#### What we found at our previous inspection

When we visited Newtons Practice on 30 August 2016 to carry out a comprehensive inspection we rated them as required improvement for the provision of safe services. We said they must:

- Ensure that medicines fridges are kept secure at all times.
- Ensure that healthcare assistants who carry out vaccines and immunisations do so under a clear authorisation which is maintained on record.
- Ensure a record of cleaning clinical areas and equipment is maintained to support infection control audits.

#### What we found at this inspection

We undertook a focused follow up inspection of the service on 23 June 2017 to review the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements. The practice is now rated as good for the provision of safe services.

#### Overview of safety systems and process

- Since our last inspection the practice had installed a digital lock to the storeroom where the medicines fridges were kept to ensure they are kept secure. Staff told us this door was routinely kept locked and we saw evidence to confirm this.
- The practice had a range of patient specific directions (PSDs) in place to enable the health care assistants to carry out vaccines and immunisations under a clear authorisation. (PSDs are written instructions, from a qualified and registered prescriber for a medicine including the dose, route and frequency or appliance to be supplied or administered to a named patient after the prescriber has assessed the patient on an individual basis.) The practice had conducted an audit to ensure their process for keeping PSD records up to date and was effective.
- The practice had reviewed their procedures for ensuring clinical areas and equipment was maintained and kept clean. We saw minutes of meetings with their cleaning contractors where the cleaning scheduled had been reviewed and a new cleaning schedule and plan agreed. This included the cleaners keeping a record of the cleaning tasks completed. The practice had conducted an infection control audit and taken action where it was required.



#### Are services well-led?

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

### **Our findings**

#### What we found at our previous inspection

When we visited Newtons Practice on 30 August 2016 to carry out a comprehensive inspection we rated them as required improvement for the provision of well-led services. We said they must:

• Ensure that the feedback from patients and other stakeholders is managed and responded to.

We also said they should;

- Keep minutes of the regular nurse meetings to assist with future training, development and any quality assurance audits.
- Review the records maintained for staff training to ensure they are up to date.

#### What we found at this inspection

We undertook a focused follow up inspection of the service on 23 June 2017 to review the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements. The practice is now rated as good for the provision of well led services.

#### **Governance arrangements**

We saw evidence in the form of minutes of meetings which showed the practice held monthly nurse meetings and the minutes circulated to nurses unable to attend the meeting.

The practice maintained a spreadsheet to record all training attended by staff. This enable the practice to

ensure all staff were up to date with their training. We were told this spreadsheet had been developed since our last inspection. The practice also kept a copy of the training certificates for courses completed in the individual staff files

# Seeking and acting on feedback from patients, the public and staff

The practice had worked with the patients participation group (PPG) to raise awareness of the Friends and Family test. We saw evidence that most of the comments made were positive. For example in February 2017, of 154 patient responses, 93% said they were extremely likely or likely to recommend the practice to their friends and family. They had reviewed feedback comments from the Friends and Family test and had identified action they could take in response to some issues raised. For example, when they saw a number of comments about difficulty in getting an appointment with a particular GP, the practice provided additional information to patients in the waiting area setting out how the GPs worked together in teams to help promote good continuity of care. In some instances they had responded directly to the feedback on the Friends and Family Test web page. (www.nhs.uk/friendsandfamily)

The practice had worked with the PPG to conduct their own survey of patients in October 2016. The practice had produced a report based on the results of the survey. One of the recommendations from the report was that they should take particular effort to get the views of younger patients next time they did a survey.