

Avon Valley Practice

Quality Report

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Date of inspection visit: The evidence provided by the practice enabled the Care Quality Commission to conduct this review without the need for a visit. The review of the evidence was carried out on 12 April 2017
Date of publication: 04/05/2017

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

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Overall summary

Letter from the Chief Inspector of General Practice

We visited Avon Valley Practice on 23 August 2016 to carry out a comprehensive inspection. We found the practice was not compliant with the regulation relating to safe care and treatment. Overall the practice was rated as good.

Specifically, we found the practice required improvement for the provision of safe services because:

- There was no atropine available at either of the practice's sites on the day of the inspection. (Atropine is a drug that can slow the heart rate and is recommended to be available for emergencies in practices that fit coils or perform minor surgery.)
- The practice did not have an up to date record of the Hepatitis B status for all staff who may have direct contact with patients' blood or blood-stained bodily fluids. For example, from sharps.

Following the inspection the provider sent us an action plan that set out the changes they would make and subsequently supplied information to confirm they had completed the actions.

This focused desk based inspection was undertaken on 2 February 2017 to ensure that the practice was meeting

the regulation previously breached. For this reason we have only rated the location for the key questions to which this related. This report should be read in conjunction with the full report of our inspection on 23 August 2016, which can be found on our website at www.cqc.org.uk.

The practice is now rated as Good for the provision of safe services and the overall rating remains as Good.

Our key findings were as follows:

- Atropine was now available at both the practice's sites.
- The practice has an up to date record of the Hepatitis B status for all staff who may have direct contact with patients' blood or blood-stained bodily fluids.

During our desktop review, we found that since our visit in August 2016 the practice had reviewed other areas of their practice to improve their services. For example, we saw evidence the practice had:

- Reviewed and updated their repeat prescription protocols.
- Reviewed and updated their employment policy to ensure that staff who required a DBS check due to their role, have it repeated at three yearly intervals.
- Reviewed and updated their telephone system.

Summary of findings

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?

When we visited Avon Valley Practice on 23 August 2016 to carry out a comprehensive inspection, we found the practice required improvement for the provision of safe services because:

- There was no atropine available at either of the practice's sites on the day of the inspection. (Atropine is a drug that can slow the heart rate and is recommended to be available for emergencies in practices that fit coils or perform minor surgery.)
- The practice did not have an up to date record of the Hepatitis B status for all staff who may have direct contact with patients' blood or blood-stained bodily fluids. For example, from sharps.

We undertook a follow up desk based inspection of the service on 12 April 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. We saw evidence which enabled us to find that;

- Atropine was available at both of the practice's sites.
- The practice had an up to date record of the Hepatitis B status of all staff who may have direct contact with patients' blood or blood-stained bodily fluids

The practice is now rated as good for providing safe services.

Good



Summary of findings

The six population groups and what we found

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

Older people

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe services identified at our inspection on 23 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe services identified at our inspection on 23 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe services identified at our inspection on 23 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)

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe services identified at our inspection on 23 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe services identified at our inspection on 23 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)

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe services identified at our inspection on 23 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Avon Valley Practice

Detailed findings

Our inspection team

Our inspection team was led by:

This desk based focused inspection was undertaken by a CQC inspector.

Background to Avon Valley Practice

Avon Valley Practice is small rural practice operating across two surgeries. The main practice is based in Upavon and the branch surgery in Durrington, on the edge of the Salisbury Plains in Wiltshire. It has a dispensary at each location. It is one of the practices within the Wiltshire Clinical Commissioning Group and has approximately 6,230 patients.

The area the practice serves has relatively low numbers of people from different cultural backgrounds and is in the low range for deprivation nationally, (although it is important to remember that not everyone living in a deprived area is deprived and that not all deprived people

live in deprived areas). The practice has a slightly higher than average patient population between 40 and 75 years old. The practice is close to a number of military bases and has a higher than average number of military veterans.

The practice provides a number of services and clinics for its patients including childhood immunisations, family planning, minor surgery and a range of health lifestyle management and advice including asthma management, diabetes, heart disease and high blood pressure management.

There are three full-time GP partners; two male and one female. They are supported by three nurse practitioners, three practice nurses, two health care assistants and an administrative and dispensing team of 17 led by the practice manager.

The practice is a teaching and training practice. (A teaching practice accepts provisionally registered doctors undertaking foundation training, while a training practice accepts qualified doctors training to become GPs who are known as registrars.) At the time of our inspection they had one registrar and one foundation doctor working with them.

The practice is open between 8am and 5.30pm Monday to Friday, and 8am and 6.30pm on Friday. Appointments are from 8.30am to 12 noon every morning and 2.30pm to 6pm daily. Extended hours appointments are offered at the Durrington branch surgery, approximately eight miles away, from 6.30pm to 7.30pm on Mondays. Appointments can be booked over the telephone or in person at the surgery.

When the practice is closed patients are advised, via the practice's website that all calls will be directed to the out of hours service. Out of hours services are provided by Medvivo.

The practice has a General Medical services contract to deliver health care services. This contract acts as the basis for arrangements between NHS England and providers of general medical services in England.

The practice provides services from the following sites:

- Upavon Surgery, 43 Fairfield, Upavon, Wiltshire, SN9 6DZ.
- Durrington Surgery, 77 Bulford Road, Durrington, Wiltshire, SP4 8EU.

Detailed findings

Why we carried out this inspection

We carried out a comprehensive inspection of Avon Valley Practice on 23 August 2016 and published a report setting out our judgements under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions. The full comprehensive report following the inspection in January 2016 can be found by selecting the 'all reports' link for Avon Valley Practice on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Avon Valley Practice on 12 April 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

Before undertaking this desk-based focused inspection, we reviewed a range of information that we hold about the practice. We reviewed the information sent to us by the practice which included information relating their emergency medicines and staff hepatitis B status. We did not visit the practice again because they were able to demonstrate that they had taken action to address the breaches of regulation found during the inspection of 23 August 2016.

The practice had previously been rated as good in delivering effective, caring, responsive services and well-led services. Therefore, we focused our review on the question of:

- Are services safe?

Please note that when referring to information throughout this report, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

When we visited Avon Valley Practice on 23 August 2016 to carry out a comprehensive inspection, we found the practice required improvement for the provision of safe services because:

- There was no atropine available at either of the practice's sites on the day of the inspection. (Atropine is a medicine that can slow the heart rate and is recommended to be available for emergencies in practices that fit coils or perform minor surgery.)
- The practice did not have an up to date record of the Hepatitis B status of all staff who may have direct contact with patients' blood or blood-stained bodily fluids. For example, from sharps.

We also advised the practice should ensure that the drug monitoring protocol is constantly reviewed to ensure that all repeat prescriptions continue to be monitored safely.

Following publication of our inspection report the practice sent us an action plan that set out the changes they would make and subsequently supplied information to confirm they had completed the actions.

We undertook a follow up inspection of the service on 12 April 2017. The practice is now rated as good for providing effective services. We found that:

- The practice had discussed and reviewed their procedure for checking emergency medicines and the emergency medicines they would keep in stock.
- They had changed their procedures to fix red cable ties to the emergency medicine box to make it easier to identify when it had been used.
- We saw evidence that showed the practice kept Atropine for emergency use in both surgery sites.
- The practice had discussed and reviewed their procedure for checking the Hepatitis B status of staff.
- We saw evidence that showed the practice had an up to date record of the Hepatitis B status for all staff who may have direct contact with patients' blood or blood-stained bodily fluids.
- The practice had completed a risk assessment for their drug monitoring and repeat prescription protocol.