

Flansham Park Health Centre

Quality Report

Flansham Park Health Centre

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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



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

The practice was rated good overall and is now rated good for providing safe services.

We carried out an announced comprehensive inspection of this practice on 6 June 2016. A breach of legal requirements was found during that inspection within the safe domain. After the comprehensive inspection, the practice sent us an action plan detailing what they would do to meet the legal requirements. We conducted a focused inspection on 17 November 2016 to check that the provider had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

During our previous inspection on 6 June 2016 we found the following area where the practice must improve:

- Ensure the safe storage of vaccines.

Our previous report also highlighted an area where the practice should improve:

- Continue to increase the numbers of patients diagnosed with chronic obstructive pulmonary disease (COPD) and dementia who receive an annual review.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at www.cqc.org.uk

During the inspection on 17 November 2016 we found:

- The practice had an updated cold chain policy which was adhered to and ensured vaccines were stored safely.

We also found in relation to the area where the practice should improve:

- The practice had increased the numbers of patients diagnosed with chronic obstructive pulmonary disease (COPD) and dementia who received annual reviews. For example the percentage of patients with COPD who had a review undertaken including an assessment of breathlessness in the preceding 12 months during 2015/2016 was 81% compared to the clinical commissioning group (CCG) average of 87% and the national average of 89% and the percentage of patients diagnosed with dementia whose care had been reviewed in a face time to face review in the preceding 12 months was 80% compared to the CCG average of 79% and the national average of 84%.

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 now rated Good for delivering Safe services

At our last inspection, we found that the practice did not have effective arrangements in place for the safe storage of medicines in fridges.

At this inspection, we found that medicines in fridges were stored within the safe temperature range and the associated policy was adhered to.

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

The practice was rated as good for the care of older people on 6 June 2016. This rating remains unchanged.

- The practice offered proactive, personalised care to meet the needs of the older people in its population.
- The practice was responsive to the needs of older people, and offered home visits and urgent appointments for those with enhanced needs.
- Patients discharged from hospital were offered a follow up consultation with their GP within three days of returning home.
- The nursing team offered flu vaccines at home for those who were unable to attend the practice.

Good



People with long term conditions

The practice was rated as good for the care of older people on 6 June 2016. This rating remains unchanged.

- Nursing staff had lead roles in chronic disease management and patients at risk of hospital admission were identified as a priority.
- Performance for diabetes related indicators was in line with the clinical commissioning group (CCG) and national averages. For example, patients with diabetes who had a blood pressure reading in the preceding 12 months of 140/80mmHg or less was 80% which was the same as the CCG average of 80% and similar to the national average of 78%.
- Longer appointments and home visits were offered to patients when needed.
- All these patients had a named GP and a structured annual review to check their health and medicines needs were being met. For those patients with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.
- There was a weekly fitness clinic run from within the practice to encourage healthy lives for people with long-term conditions.

Good



Families, children and young people

The practice was rated as good for the care of older people on 6 June 2016. This rating remains unchanged.

Good



Summary of findings

- There were systems in place to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of A&E attendances. Immunisation rates were relatively high for all standard childhood immunisations.
- Patients told us that children and young people were treated in an age-appropriate way and were recognised as individuals, and we saw evidence to confirm this.
- The practice's uptake for the cervical screening programme was 81%, which was in line with the clinical commissioning group (CCG) average of 83% and the national average of 82%.
- Appointments were available outside of school hours and the premises were suitable for children and babies.
- We saw positive examples of joint working with midwives and health visitors.
- The practice offered nurse led after school and early evening child illness clinics during the winter months which encouraged attendance. The practice told us this helped to reduce the number of children being admitted to accident and emergency.
- The practice ran a nurse led young adults clinic which offered lifestyle and sexual health advice.

Working age people (including those recently retired and students)

The practice was rated as good for the care of older people on 6 June 2016. This rating remains unchanged.

- The needs of the working age population, those recently retired and students had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care.
- The practice was proactive in offering online services as well as a full range of health promotion and screening that reflects the needs for this age group.
- The practice hosted a patient led choir and a guitar club on the premises in the evening which was popular among patients.

Good



People whose circumstances may make them vulnerable

The practice was rated as good for the care of older people on 6 June 2016. This rating remains unchanged.

- The practice held a register of patients living in vulnerable circumstances including homeless people, travellers and those with a learning disability.
- The practice offered longer appointments for patients with a learning disability.

Good



Summary of findings

- The practice regularly worked with other health care professionals in the case management of vulnerable patients.
- The practice informed vulnerable patients about how to access various support groups and voluntary organisations.
- Staff knew how to recognise signs of abuse in vulnerable adults and children. Staff were aware of their responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.
- The GPs promoted the local food bank criteria to patients who might be eligible. There was also a drop off point for donations of food within the practice.

People experiencing poor mental health (including people with dementia)

The practice was rated as good for the care of older people on 6 June 2016. This rating remains unchanged.

- Since the our inspection on 6 June 2016, the practice had increased the numbers of patients diagnosed with dementia who received annual reviews. For example figures for 2015/2016 showed the percentage of patients diagnosed with dementia whose care had been reviewed in a face time to face review in the preceding 12 months was 80% compared to the clinical commissioning group (CCG) average of 79% and the national average of 84%.
- The practice was in line with the CCG and national averages for their management of patients with poor mental health. For example, 88% of their patients with severe and enduring mental health problems had a comprehensive care plan documented in their records within the last 12 months which was comparable to the CCG average of 90% and the national average of 88%.
- The practice regularly worked with multidisciplinary teams in the case management of patients experiencing poor mental health, including those with dementia.
- The practice carried out advance care planning for patients with dementia.
- The practice had told patients experiencing poor mental health about how to access various support groups and voluntary organisations.
- The practice had a system in place to follow up patients who had attended accident and emergency where they may have been experiencing poor mental health.
- Staff had a good understanding of how to support patients with mental health needs and dementia.

Good



Flansham Park Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was led by a CQC inspector.

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 on

6 June 2016 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breaches of legal requirements were found. As a result, we undertook a focused inspection on 17 November 2016 to follow up on whether action had been taken to deal with the breaches.

Are services safe?

Our findings

Overview of safety systems and processes

At our previous inspection, we found that fridge temperatures had been recorded on a daily basis. However, we noted that for one fridge the temperature range had been recorded as being outside of specified parameters but that no action had been taken as a result. This meant the practice could not guarantee the safety of the vaccines stored in the fridge. The practice responded on the day of inspection by decommissioning the fridge and informing Public Health England to obtain advice on the safety of the vaccines stored. The outcome was that although there had

been a break in the cold chain, the stock was unaffected as the temperature remained within guidelines for the vaccines stored. The nursing team received refresher training on the cold chain protocol to ensure they understood the protocol and their role in relation to it.

At this inspection, we found there was an appropriate system in place for recording fridge temperatures and ensuring action was taken and recorded if required. The nurses we spoke with had a good understanding of the requirements for safe storage of vaccines. Daily fridge temperatures were recorded and were within specified parameters. The practice had a clear policy detailing appropriate action in the event of a break in the cold chain.