

Church Lane Surgery

Quality Report

Church Lane,
Boroughbridge,
York.

YO51 9BD

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Website: www.churchlanesurgery.com

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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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	6
Background to Church Lane Surgery	6
Why we carried out this inspection	6
How we carried out this inspection	6
Detailed findings	8

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Church Lane Surgery on 3 November 2016. The overall rating for the practice was good. However, a breach of the legal requirements was found which resulted in the practice being rated as requires improvement for providing safe services. The full comprehensive report for the November 2016 inspection can be found by selecting the 'all reports' link for Church Lane Surgery on our website at www.cqc.org.uk.

In addition to the breach of regulation, at the inspection on 3 November 2016 we also said the practice should consider the following areas:

- Review the arrangements currently in place for revisiting changes introduced by the practice over time to ensure they are effective and embedded within the practice.
- Review the governance arrangements currently in place for monitoring training to ensure the system is effective and affords the management oversight of what training is due to be completed and updated.
- Review the effectiveness of the governance arrangements in place for the recruitment of staff to ensure staff are recruited in a safe and timely way.

- Review the arrangements for supervising dispensing staff to ensure dispensing staff are supervised by a member of staff with detailed knowledge of their role.

This inspection was an announced focused inspection carried out on 5 July 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach of regulations that we identified in our previous inspection on 3 November 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- The practice had reviewed their arrangements for the management of medicines and these were managed safely.
- We saw that significant events, near misses and changes within the practice were discussed at relevant team meetings and that minutes were made available to all staff.
- The practice had implemented an improved system to monitor staff training, which enabled the management to review and arrange training in a proactive manner.
- The practice had reviewed the arrangements for the recruitment of staff.

Summary of findings

- We found that the arrangements for the supervision of dispensary staff were appropriate.

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?

This inspection was conducted to review issues that were found at the comprehensive inspection carried out on 3 November 2016. The issues at the previous inspection included:

- The practice must ensure that there were sufficient arrangements in place to ensure medicines were always safely managed.

At this inspection in July 2017 we found:

- The practice had reviewed their arrangements for the management of medicines. We saw that the practice had reviewed the storage of vaccines and medicines and had updated a number of Standard Operating Procedures (SOPs) in relation to medicines.
- The practice had updated their cold chain policy and made staff aware of this through staff training sessions.
- We saw that significant events, near misses and changes within the practice were embedded in the team through discussion at relevant team meetings. Minutes of the meetings were made available to all staff.
- The practice had implemented an improved system to monitor staff training, which enabled the management to review and arrange training in a proactive manner.
- The practice had reviewed the arrangements for the recruitment of staff.
- The practice had reviewed their arrangements for the supervision of dispensary staff and staff told us that they felt well supported.

Good



Summary of findings

Church Lane Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was carried out by a lead CQC inspector and a second CQC inspector.

Background to Church Lane Surgery

Church Lane Surgery, Church Lane, Boroughbridge, York, YO51 9BD is a rural practice serving Boroughbridge and the surrounding villages. There is a branch practice at Main Street, Helperby, York, YO61 2NS.

The practice provides primary care to 10,225 patients under a General Medical Services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. The National general practice profile shows that only 1% of the practice population is from a non-white ethnic group. The practice is ranked in the tenth least deprived decile (one being the most deprived and 10 being the least deprived).

The practice is a dispensing practice and dispenses medicines to approximately 56% of their patients.

The practice age profile differs from the England average, having a higher number of patients in the 45 – 79 age range and a lower number in the zero to four and 15 – 39 age range.

The practice is run by seven GP partners (three male and four female) and four salaried GPs. The practice is a teaching practice. The practice currently has a GP registrar. This means the GP registrar is currently on a three year GP registration course. The practice also employs one senior

practice nurse, five practice nurses and two HCA's. As part of the new care models pilot the practice is funded to receive pharmacist input at the practice every afternoon five days a week.

The clinical team is supported by a practice manager, an accounts manager, a clinical information manager and a reception team leader who are supported by a large team of administration staff. There is a dispensary manager (based at the branch practice) and dispensary supervisor based at the main practice who are assisted by six dispensary assistants.

Church Lane Surgery is open Monday to Friday from 8am to 6pm with morning appointments available between 8.30am to 12.30pm and afternoon appointments from 2pm to 5.30pm. Extended hours are offered on alternative Friday and Saturday mornings. Appointments on alternative Fridays are from 7am to 10.50am and alternative Saturday mornings from 8am to 9.40am; however the building is open until 1030 am. The dispensary is open Monday to Friday from 8.30am to 6pm. The branch practice at Helperby is open Monday to Friday from 8.30am to 12.30pm with appointments available between 8.40am and 10.50am. The dispensary is open 8.30am to 12.30pm Monday to Friday.

The practice has opted out of providing out-of-hours services to its own patients. Out of hours patients are directed to Harrogate District Foundation Trust (the contracted out-of-hours provider) via the 111 service.

Why we carried out this inspection

We undertook a comprehensive inspection of Church Lane Surgery on 3 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory

Detailed findings

functions. The practice was rated overall as good. However, a breach of the regulations was found in relation to the provision of safe services to patients. The full comprehensive report following the inspection in November 2016 can be found by selecting the 'all reports' link for Church Lane Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Church Lane Surgery on 5 July 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

We carried out a focused follow up inspection of Church Lane Surgery on 5 July 2017.

During our visit we:

- Spoke with the practice manager.
- Spoke with members of the dispensing team
- Spoke with a member of the nursing team
- Observed the arrangements for the storage of vaccines, emergency medications and prescriptions.
- Visited both practice sites.

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

At our previous inspection on 3 November 2016, we rated the practice as requires improvement for providing safe services. We found that the registered person did not do all that was reasonably practicable to ensure sufficient arrangements were in place to ensure that medicines were always safely managed.

These arrangements had significantly improved when we undertook a focussed follow up inspection on 5 July 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

- The practice had implemented an improved system to monitor staff training, which enabled the management to review and arrange training in a proactive manner. A training matrix was in place and reminders were sent to staff three months in advance requesting them to complete their training.
- In addition to other mandatory training, we saw that all staff had completed Fire and Infection Prevention and Control training.

Overview of safety systems and process

- The practice had reviewed their arrangements for the management of medicines. We saw that the practice had reviewed the storage of vaccines and medicines and had updated a number of Standard Operating Procedures (SOPs) in relation to medicines.
- We saw that vaccines were stored in the correct manner and a recent issue with the temperature of the vaccine fridge had been managed, recorded and reviewed appropriately. The practice downloaded information weekly from an electronic data logger kept within the fridge to identify and review any temperature issues.
- The practice had updated their cold chain policy and made staff aware of this through staff training sessions.

- We saw that nursing staff who were able to prescribe medications were proactively auditing and reviewing the safe prescribing of medications, such as antibiotics and their efficacy.
- The practice had reviewed the arrangements for the recruitment of staff; we saw that new staff had been recruited safely and that Disclosure and Barring checks were in place. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).
- The practice had reviewed their arrangements for the supervision of dispensary staff, support was available from both GPs and a pharmacist and staff told us that they felt well supported.

Monitoring risks to patients

- Staff were clear about their responsibilities in relation to significant events and near misses within the practice and these issues were discussed at team meetings and minutes were made available to all staff. Changes within the practice were embedded in the team through staff meetings, teaching sessions and ad hoc discussions.
- We saw that significant events and near misses within the practice were reviewed and signed each month by a nominated GP.

Arrangements to deal with emergencies and major incidents

- The practice had purchased an additional oxygen cylinder for use at their branch site and we saw that equipment such as oxygen masks which may be required in an emergency were in date.
- We found that emergency medicines and controlled drugs (medicines that require extra checks and special storage arrangements because of their potential for misuse) were stored and managed correctly.