

# Conner and Partners

## Quality Report

175 Ferry Road,  
Hullbridge,  
Hockley,  
Essex.  
SS5 6JH

Tel: 01702230555

Website: [www.riversidemedicalhullbridge.nhs.uk](http://www.riversidemedicalhullbridge.nhs.uk)

Date of inspection visit: 27 April 2017

Date of publication: 30/05/2017

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

## Contents

### Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3
The six population groups and what we found	4

### Detailed findings from this inspection

Our inspection team	5
Background to Conner and Partners	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Conner and Partners on 23 June 2016. The overall rating for the practice was good with requires improvement for the 'Safe' domain. The full comprehensive report for this inspection can be found by selecting the 'all reports' link for Conner and Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We then carried out a desk-based focused inspection on 27 April 2017 to confirm that the practice were now meeting the legal requirements in relation to the breaches of regulations that we identified in our previous inspection on 23 June 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, with the 'Safe' domain now rated as good.

Our key findings were as follows:

- Disclosure and Barring Service (DBS) checks were in place for all staff including those non-clinical staff who acted as chaperones.
- The recruitment policy and procedures followed available guidance.
- Staff records had been reviewed and evidenced appropriate staff's hepatitis B immunity status.
- Arrangements for monitoring staff training meant that staff undertook relevant, periodic training updates.
- Complaints information was easily available to patients.

**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 practice is rated as good for providing safe services.

- The practice had implemented a Disclosure and Barring Service checks (DBS) policy in relation to staff acting as chaperones.
- The recruitment policy and procedures followed available guidance.
- Staff records had been reviewed and evidenced appropriate staff's hepatitis B immunity status.
- Arrangements for monitoring staff training meant that staff undertook relevant, periodic training updates.
- Complaints information was easily available to patients.

**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 provider had resolved the concerns for safety identified at our inspection on 23 June 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 identified at our inspection on 23 June 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 identified at our inspection on 23 June 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 identified at our inspection on 23 June 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 identified at our inspection on 23 June 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 identified at our inspection on 23 June 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Conner and Partners

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk based inspection was carried out by an inspector.

## Background to Conner and Partners

Conner and Partners is located in a purpose built medical centre in the semi-rural village of Hullbridge in the borough of Rochford, in Essex; the practice provides services for 6855 patients.

The practice holds a General Medical Services (GMS) contract and provides GP services commissioned by NHS England and Castlepoint and Rochford Clinical Commissioning Group. A GMS contract is one between NHS England and the practice where elements of the contract such as opening times are standardised.

The practice provides a range of core services including:

- Childhood and adult vaccinations and immunisations
- Cervical screening
- Diabetes care
- Asthma and COPD care
- Mental health.

The practice provides a range of enhanced services including:

- Ambulatory BP checks
- Minor injuries and minor surgery.
- Senior health checks
- Learning disability health checks.

- Smoking cessation.

Enhanced services are those which require an enhanced level of provision above what is required under core GMS contracts.

The practice is managed by three GP partners who hold financial and managerial responsibility. One of the GP partners is the Registered Manager. A Registered Manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run. The practice also employs one salaried GP. In total one male and three female GPs work at the practice.

The practice is a GP training practice. Any doctors who wish to become GPs need to undertake specialist training. The practice's GPs have undertaken extra qualifications as GP trainers. Doctors who are training to become GPs are called Registrars and are fully qualified and experienced doctors. The practice also employs three practice nurses and one healthcare assistant. In addition the practice employs a team of receptionists and administrative staff.

The practice is open from 8am to 6.30pm on Mondays to Fridays. Appointments are available from 8am to 12pm and 3pm to 5.45pm. The practice does not provide early morning or late evening appointments. However weekend appointments are available for patients via a local initiative which the practice participates in.

The practice has opted out of providing GP out of hour's services. Unscheduled out-of-hours care is provided by IC24 and patients who contact the surgery outside of opening hours are provided with information on how to contact the service.

# Detailed findings

## Why we carried out this inspection

We undertook a comprehensive inspection of Conner and Partners on 23 June 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall with the 'Safe' domain rated as requires improvement. The full comprehensive report following the inspection on 23 June 2016 can be found by selecting the 'all reports' link for Conner and Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We then undertook a desk-based focused inspection of Conner and Partners on 27 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

We carried out a desk-based focused inspection of Conner and Partners on 27 April 2017. This involved reviewing evidence that:

- A Disclosure and Barring Service (DBS) check had been completed for all new staff including those involved with chaperoning.
- The recruitment policy and procedures followed available guidance.
- Staff records had been reviewed and evidenced appropriate staff's hepatitis B immunity status.
- Arrangements for monitoring staff training meant that staff undertook relevant, periodic training updates.
- Complaints information was easily available to patients.

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 23 May 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of; checks of staff immunity, recruitment, Disclosure and Barring Service checks (DBS), staff training updates and enabling patients' to raise complaints around safety, were not sufficient.

These arrangements had significantly improved when we undertook a desk-based inspection on 27 April 2017. The practice is now rated as good for providing safe services.

### Safe track record and learning

Information on how to complain about concerns regarding safety and other aspects of the service was readily available to patients.

### Overview of safety systems and process

We saw a policy around the use of staff with Disclosure and Barring Service checks (DBS) as chaperones which stated that only staff who had received a DBS check would be used as chaperones. Clinical staff received a DBS check as part of their employment checks. Recruitment procedures were clear and followed available guidance.

We viewed evidence of the staff training plan which clearly showed when staff needed updates of required training, there was a system in place to ensure that this training was provided in a timely manner.

The provider had a system in place for checking and recording staff Hepatitis B status.