

Sollershott Surgery

Inspection report

44 Sollershott East
Letchworth Garden City
Hertfordshire
SG6 3JW
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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 location

Requires improvement 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced comprehensive inspection at Sollershott Surgery on 18 July 2019 as part of our inspection programme.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected,
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as requires improvement overall and good for all population groups.

We rated the practice as **requires improvement** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe.
- The practice did not have appropriate systems in place for the safe management of medicines.
- The practice did not share learning when things went wrong.

We rated the practice as **requires improvement** for providing well-led services because:

- The overall governance arrangements were ineffective.
- The practice did not have clear and effective processes for managing risks, issues and performance.

We rated the practice as **good** for providing effective, caring and responsive services because:

- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs.

The areas where the provider **must** make improvements as they are in breach of a regulations:

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements are:

- Continue to take steps to ensure the patient monitoring and recall system is effective.
- Continue to monitor patient feedback and survey results in relation to telephone access and appointment availability.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Good 
Working age people (including those recently retired and students)	Good 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a practice manager specialist adviser.

Background to Sollershott Surgery

12PointCare Limited is the registered provider of Sollershott Surgery. 12 Point Care Limited is a federation made up of 10 GP practices covering the North Hertfordshire area. The federation is run by three directors and supported by a business manager. The contract to run Sollershott Surgery was awarded to 12PointCare Limited from 1 July 2018.

Sollershott Surgery is located at 44 Sollershott East, Letchworth Garden City, Hertfordshire, SG6 3JW. The provider is registered with CQC to deliver four Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury.

Sollershott Surgery provides services to approximately 5,108 patients of various ages under the terms of an Alternative Provider Medical Services (APMS) contract with the local Clinical Commissioning Group (CCG). APMS is a contract between general practices and the CCG for delivering primary care services to local communities. The practice has one registered manager in place. (A registered manager is an individual registered with CQC to manage the regulated activities provided).

The practice team consists of two female salaried GPs and one long-term male locum GP. There is one advanced practice nurse, a practice nurse and a healthcare assistant. There is a practice manager who is supported by a team of administration and reception staff members.

The practice population is predominantly white British with a higher than average 60 to 79 year age range. National data indicates the area is one of low deprivation.

The Out of Hours service is provided by Herts Urgent Care and can be accessed via the NHS 111 service. Information about this is available in the practice, on the practice website and on the practice telephone line.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <p>The provider did not have clear oversight of safety risk assessments, such as Legionella and fire or an up to date health and safety risk assessment in place.</p> <p>The provider did not have a system to ensure all electrical equipment was tested according to manufacturer's instructions to ensure the equipment was safe to use.</p> <p>The provider did not have a system to ensure all relevant staff members received a DBS check as part of their induction. Not all staff members who acted as a chaperone had received a DBS check and the practice had not taken any action to mitigate risks.</p> <p>The provider did not have a sufficient system in place to assess and manage emergency medicines stocked at the practice.</p> <p>The provider did not have a comprehensive system in place to ensure the required recruitment checks were always carried out.</p> <p>The provider had not taken reasonable steps to ensure clinical and non-clinical staff members had received all of the required vaccinations for their roles.</p> <p>This was in breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Safe care and treatment.</p>

Regulated activity

Regulation

This section is primarily information for the provider

Requirement notices

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Treatment of disease, disorder or injury

Regulation 17 HSCA (RA) Regulations 2014 Good governance

There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular:

The provider did not have a comprehensive system in place to ensure safeguarding children training was completed to the appropriate level by all clinical staff members.

The provider did not have an effective system in place to ensure relevant practice policies were in place and regularly reviewed.

The provider did not have a documented process in place to manage uncollected prescriptions.

The provider did not have a system in place to ensure learning and action from significant events was always shared with relevant staff members.

The provider did not have a clear system in place to ensure the practice provided patients with information on the role of the health ombudsman when sending a final complaint response to patients.

The provider did not have an effective system in place to ensure the management of clinical documentation was appropriately monitored and audited.

This was in breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Good governance.