

# Parson Drove Surgery

## Quality Report

Main Road  
Parson Drove  
Wisbech  
PE13 4LF

Tel: 01945 700223

Website: [www.parsondrovesurgery.com](http://www.parsondrovesurgery.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

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Parson Drove Surgery on 7 June 2016. At this time we noted that improvement was required to strengthen the recall system for medication reviews for patients who were prescribed medicines that required specific monitoring.

After the comprehensive inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to ensuring effective processes were in place.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

The overall rating for the practice is good. You can read our previous report by selecting the 'all reports' link for on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

### **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?**

At the last inspection on 7 June 2016 we found that:

- The practice had a medication review system in place to support patients who take medicines that require monitoring. Data showed that there was scope to develop the system further to ensure that it was effective.

Our focused inspection on 12 December 2016 found that:

The practice is rated as good for providing safe services.

- The practice had implemented a clear system to ensure that patients taking medicines that required specific monitoring received health reviews in line with national prescribing guidance.

This report should be read in conjunction with the full inspection report from 7 June 2016.

Good



# Parson Drove Surgery

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk based review was completed by a CQC lead inspector.

## Background to Parson Drove Surgery

Parson Drove Surgery is a purpose built practice situated in Parson Drove, Cambridgeshire. The practice provides services for approximately 6,300 patients over a six to eight mile radius of the village of Parson Drove, which crosses the border into South Lincolnshire. It holds a Personal Medical Services contract with Cambridgeshire and Peterborough CCG.

According to information taken from Public Health England, the patient population has an age profile comparable to the practice average across England, with a lower than average number of patients aged between 20 and 39. The practice is in an area with a mixed level of socio-economic deprivation.

The practice team consists of three male GP partners (clinicians who hold managerial and financial responsibility for the practice), a female GP locum, a practice manager, an advanced nurse practitioner, three practice nurses and three healthcare assistants. It also has teams of reception, administration and secretarial staff.

Parson Drove Surgery is open from Monday to Friday. It offers appointments from 9am to 12pm and 4pm to 8pm on Mondays, 9am to 12pm and 4pm to 6pm on Tuesdays, Thursdays and Fridays, and 9am to 12pm on Wednesdays. Out of hours care is provided by the NHS 111 service.

## Why we carried out this inspection

As a result of the last inspection on 7 June 2016 we had concerns and issued a requirement notice in respect of safe care and treatment. This was because the practice had not ensured that patients who were prescribed medicines that required specific monitoring were reviewed in line with national prescribing guidance.

## How we carried out this inspection

We spoke with the practice manager and reviewed the information received from the practice.

We have not revisited Parson Drove Surgery as part of this review because the practice were able to demonstrate they were meeting the standards without the need for a visit.

We carried out a desk-based review on 12 December 2016.

# Are services safe?

## Our findings

We found improvements were needed in relation to safe care and treatment at our last inspection on 7 June 2016.

- Data showed that a number of patients who took prescribed medication that required specific monitoring had not received a recent medication review. This highlighted that there was scope for the practice to improve the system used to review patients taking medicines that require specific monitoring.

The provider sent us an action plan informing us about the action they would take to ensure that patients were safe. Our focused inspection on 12 December 2016 found that the practice had implemented an effective system to ensure that patients taking medicines that required specific monitoring received health reviews in line with national prescribing guidance.

- The practice provided us with a written comprehensive protocol for the monitoring of patients taking medicines that require specific monitoring. This detailed how the practice would liaise with patients to ensure that an appointment was booked. The protocol had clear guidance on how to manage patients who did not respond to the recalls.

- The practice had implemented regular data searches to ensure that an overview of these patients' medication needs was maintained. We were assured that the practice were following their protocol and that this had become embedded into practice.
- Both clinicians and administration staff had taken lead roles to ensure that the process was adhered to.

On our previous inspection we noted that the practice should review the process for cascading and actioning Medicines and Healthcare Products Regulatory Agency (MHRA) updates. Our focused inspection on 12 December 2016 found that the practice had implemented a new process to manage safety alerts, including those from the MHRA.

Furthermore, on our previous inspection we found that the practice should instigate a system to share and review relevant best practice guidelines, such as those issued by the National Institute for Health and Care Excellence. On our focused inspection on 12 December 2016 we were provided with evidence stating that best practice guidelines were now formally discussed during clinical governance training afternoons.