Elm Surgery

Quality Report

123 Leypark Walk
Estover
Plymouth
PL6 8UF

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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
Are services effective?	Good
Are services caring?	Good
Are services responsive to people's needs?	Good
Are services well-led?	Good

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an inspection of Elm Surgery on the 18 August 2016. This review was performed to check on the progress of actions taken following our inspection we made on 19 January 2016. Following that inspection the provider sent us an action plan which detailed the steps they would take to meet their breaches of regulation. During our latest inspection on 18 August 2016 we found the provider had made the necessary improvements.

This report covers our findings in relation to the requirements and should be read in conjunction with the report published on 10 March 2016. This can be done by selecting the 'all reports' link for Elm Surgery on our website at www.cqc.org.uk

Our key findings at this inspection were as follows:

- The practice had improved the health and safety for patients by improving the governance processes. These were implemented to support effective monitoring and improvement of service quality; for example, infection control management, test result management and policy reviews.
- The practice had gathered feedback from patients through the surveys and complaints received. The practice had begun to establish a patient participation group.

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?	Good
Are services effective?	Good
Are services caring?	Good
Are services responsive to people's needs?	Good
Are services well-led? We review elements of this domain to check on the progress of actions taken following our inspection we made on 19 January 2016. Following that inspection the provider sent us an action plan which detailed the steps they would take to meet their breaches of regulation. We found governance arrangements for considering risks had improved. For example; • Governance arrangements for infection control had improved. • Systems and processes for the management of test results had improved and a robust policy was in place to accompany this. • All practice policies and procedures had been reviewed and updated • The practice had systems in place to gain patient feedback and had begun to establish a patient participation group.	Good

Elm Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our review was undertaken by a CQC Inspector.

Background to Elm Surgery

We inspected the practice in January 2016 and found improvements were needed in regard of Regulation 17, in the area of governance. The provider sent us an action plan which detailed the steps they would take to meet the breaches in regulation. During our latest inspection on 18 August 2016 we found the provider had made the required improvements.

The practice is situated in Estover on the outskirts of Plymouth, Devon. The practice provides a primary medical service to 6,100 patients across a diverse age range. The practice is a teaching practice for medical students and a training practice for trainee GPs.

There is a team of four GPs partners, two female and two male, who together worked 3.5 full time equivalents. There was also one full time trainee GP in their final year. Partners hold managerial and financial responsibility for running the business. The team were supported by a practice manager, two practice nurses, two health care assistants, a phlebotomist and additional administration staff.

Patients using the practice also have access to community nurses, mental health teams and health visitors, midwives and other health care professionals who visit the practice regularly.

The practice is open between the NHS contracted opening hours of 8am and 6.30pm Monday to Friday. Appointments are offered anytime within these hours. Extended hours surgeries are offered on Wednesdays with the practice offering appointments until 9pm.

Outside of these times patients are directed to contact the Devon doctors out of hour's service by using the NHS 111 number.

The practice offeres a range of appointment types including book on the day, telephone consultations and advance appointments. A system of "Doctor call back" for all requests that need anything sooner than the next routine appointment is in place. Calls coming in between 8am and 10am receive a call back within 60 minutes to plan a suitable response to the patient's needs. After 10am the majority of call back requests go onto the following morning's call list, while patients who state that their need is more urgent receive a same day response.

The practice has a Personal Medical Services (PMS) contract with NHS England

The practice provides regulated activities from its sole location at Elm Surgery, Leypark Walk, Plymouth, PL6 8UF.

Why we carried out this inspection

We carried out this inspection at Elm Surgery on 18 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, and to look at the overall quality of the service, and to provide a rating for the service

Detailed findings

under the Care Act 2014. We visited the practice and reviewed documentation to check on the progress of actions taken following the comprehensive inspection we completed on 19 January 2016.

We inspected the practice, in part, against one of the five questions we ask about services, is the service well led.

This is because the service had previously not met some regulatory requirements. At our previous inspection in January 2016 the safe, effective, caring and responsive domains were rated as good. Therefore, these domains were not re inspected at this inspection.

Good

Are services safe?

Our findings

Good

Are services effective?

(for example, treatment is effective)

Our findings

Good

Are services caring?

Our findings

Good

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

Are services well-led?

Good

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

Governance arrangements

At our inspection in January 2016 we found there were arrangements for identifying, recording and managing risks, issues and implementing mitigating actions. However, we found that not all risks had been considered. For example;

- The management of infection control
- Timely test result management
- Continual reviewing of policies and protocols.

At our inspection in August 2016 we found the practice had made improvements which ensured that systems and procedures were in place to promote good patient care through clearer governance processes.

- We found that improvements to the governance arrangements for infection control, including a full infection control audit that was undertaken in April 2016 and an updated policy, were in place.
- Systems and processes for the management of test results had improved and a robust policy was in place to accompany this. Where the requesting clinician was absent from the practice, the results were shared with another nominated clinician using a buddy system.
- All practice policies and procedures had been reviewed and updated.

Seeking and acting on feedback from patients, the public and staff

At our inspection in January 2016 we saw the practice valued feedback from patients, the public and staff. They had gathered feedback from patients through surveys and complaints received. However, there was no patient participant group (PPG) set up to represent views of patients for improvements to the practice management team.

At this inspection in August 2016 we saw that improvements had been made. Information was available on the website asking patients interested in joining the PPG to contact the practice. To date several people had expressed an interest and the practice had planned a meeting in September 2016 to start up a group. The practice encouraged patients to provide feedback about services through the NHS Friends and Families test via their website. Latest results showed 80% of patients were likely to recommend the practice.