

# Whiteparish Surgery

## Quality Report

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Date of inspection visit: The evidence provided by the practice enabled the Commission to conduct this review without the need for a visit.  
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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 responsive to people's needs?		Good	

# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

When we visited Whiteparish Surgery on 12 January 2016 to carry out a comprehensive inspection, we found, the practice had breached regulations relating to safe care and treatment, safeguarding service users from abuse and improper treatment, receiving and acting on complaints, and good governance. The practice was rated as requires improvement for safe, effective and responsive and good for caring and well led. Overall the practice was rated as requires improvement.

Following the inspection the provider sent us an action plan that set out the actions they would take to meet the breached regulations.

This focused desk top inspection was undertaken on 20 October 2016 to check the practice was meeting the regulations previously breached. For this reason we have

only rated the location for the key questions to which this inspection related. This report should be read in conjunction with the full inspection report of our inspection in January 2016. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Whiteparish Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We found the practice had made improvements since our last inspection. The information we received enabled us to find the practice was meeting the regulations that it had previously breached.

We have changed the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe, effective, caring, responsive and well led services.

**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?

When we inspected Whiteparish Surgery in January 2016 they were rated as requires improvement for the provision of safe services. The practice took action to address the issues we found and prior to this inspection the practice sent us information confirming the action they had taken. We reviewed the information the practice sent us and found:

- All staff had received adult and children safeguarding training appropriate to their role.
- The practice had updated their policy and procedure for keeping prescription pads secure, which were in line with national guidance. This included a recording of what blank prescription forms were held by the practice and the security responsibilities of those using the forms.
- The practice had up to date fire risk assessments and carried out regular fire drills. The fire alarm system was being tested each week and serviced annually.

Good



### Are services effective?

When we inspected Whiteparish Surgery in January 2016 the practice was rated as requires improvement for the provision of effective services. The practice took action to address the issues we found and prior to this inspection the practice sent us information confirming the action they had taken. We reviewed the information the practice sent us and found:

- All staff had completed an approved on-line fire training course.

Good



### Are services responsive to people's needs?

When we inspected Whiteparish Surgery in January 2016 the practice was rated as requires improvement for the provision of responsive services. The practice took action to address the issues we found and prior to this inspection the practice sent us information confirming the action they had taken. We reviewed the information the practice sent us and found:

- There was a notice in the practice waiting area informing patients about the complaints process and that a complaints leaflet was available from the receptionists. This information was also available on the practice website.

Good



# Summary of findings

- They had a standard operating procedure for dealing with complaints which included setting out the process for reviewing complaints on an annual basis.

# 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe, effective and responsive services identified at our inspection on 12 January 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe, effective and responsive services identified at our inspection on 12 January 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe, effective and responsive services identified at our inspection on 12 January 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)

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe, effective and responsive services identified at our inspection on 12 January 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

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe, effective and responsive services identified at our inspection on 12 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Summary of findings

## People experiencing poor mental health (including people with dementia)

We did not inspect the population groups as part of this inspection. However, the provider had resolved the concerns for safe, effective and responsive services identified at our inspection on 12 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Whiteparish Surgery

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our focused desk top inspection was undertaken by a CQC Inspector.

### Why we carried out this inspection

We carried out a comprehensive inspection of Whiteparish Surgery in January 2016 and published a report setting out our judgements. The practice was rated as Requires Improvement. We found the practice had breached regulations relating to safe care and treatment, safeguarding service users from abuse and improper treatment, receiving and acting on complaints, and good governance. We undertook a focused desk top inspection 20 October 2016 to check that the practice had taken the actions they told us they would make to comply with the regulations they were not meeting at the previous inspection. We found that the provider was now meeting the fundamental standards included within this report.

### How we carried out this inspection

We undertook a focused desk top inspection of Whiteparish Surgery on 20 October 2016. This was carried out to check that the practice had completed the actions they told us they would take to comply with the regulations we found had been breached during an inspection in January 2016.

To complete this desk top inspection we:

- Asked the practice to send us evidence to demonstrate they had carried out the actions they had set out in their action plan.
- We reviewed this information.

Because this was a focused desk top inspection we looked at three of the five key questions we always ask:

- Is it safe?
- Is it effective?
- Is it responsive to people's needs?

# Are services safe?

## Our findings

When we inspected Whiteparish Surgery in January 2016 they were rated as requires improvement for the provision of safe services. During the inspection we found a number of regulation breaches including:

- The practice did not ensure all staff had safeguarding training appropriate to their role.
- The system used to secure prescription pads for hand written prescriptions was not in line with national guidance.
- There was no record of the fire alarm system being serviced or maintenance undertaken for the last two years.

Following publication of our inspection report, the practice provided an action plan of the changes they would implement. We reviewed the information the practice sent us prior to this inspection.

### Overview of safety systems and processes

We saw evidence that all staff had received adult and children safeguarding training appropriate to their role. For example, all GPs had been trained to level three in Safeguarding Children, all nursing staff to level two and all other staff to level one.

### Medicines Management

The practice had carried out a review of their system for storing prescription pads securely and had updated their policy and procedure in line with national guidance. This included a record of what blank prescription forms were held by the practice and the security responsibilities of those using the forms.

### Monitoring risks to patients

The practice had up to date fire risk assessments and carried out regular fire drills. The fire alarm system was being tested each week. We saw evidence that the fire alarm system had been serviced shortly after our inspection in January 2016 and again in July 2016. They had developed a system to remind the staff responsible when the next service was due.

All of the above actions had ensured that Whiteparish Surgery was operating with safe systems in place.



# Are services effective?

(for example, treatment is effective)

## Our findings

### Effective staffing

When we inspected Whiteparish Surgery in January 2016 the practice was rated as requires improvement for the provision of effective services. During the inspection we found some staff had not received fire training since September 2011.

Following publication of our report of the inspection, the practice provided an action plan of the changes they would implement. Subsequently sent us evidence showing the actions had been completed.

We undertook a focused desk top inspection in October 2016 to ensure that the improvements set out in the action plan had been completed. We saw evidence that all staff had completed an approved on-line fire training course. Three staff members who had joined since our last inspection had completed this fire training within a month of starting and two had completed it within the first week.

All of the above actions had ensured that Whiteparish Surgery was operating with effective systems in place.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

### Listening and learning from concerns and complaints

When we inspected Whiteparish Surgery in January 2016 the practice was rated as requires improvement for the provision of responsive services. During the inspection we found a number of regulation breaches including:

- Information about how to complain was not available in the waiting room and reception areas or on the practice website.
- The practice did not have any formal systems to review complaints.

Following publication of our inspection report, the practice provided an action plan of the changes they would implement. They subsequently sent us evidence showing the actions had been completed.

We undertook a focused desk top inspection in October 2016 to ensure that the improvements set out in the action plan had been completed. We saw evidence that:

- There was a notice in the practice waiting area informing patients about the complaints process and that a complaint leaflet was available from the reception team. This information was also available on the practice website.
- The practice had a standard operating procedure for dealing with complaints which included setting out the process for reviewing complaints on an annual basis.

All of the above actions had ensured that Whiteparish Surgery was operating with responsive systems in place.