

Bridge Practice

Quality Report

Bridge Practice
Chertsey Family Health Centre
Stepgates
Chertsey
Surrey
KT16 8HZ

Tel: 01932 561199

Website: www.bridgepracticechertsey.nhs.uk

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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 effective?

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 Bridge Practice on 17 November 2015. The overall rating was good. During the inspection we found breaches of legal requirements and the provider was rated as requires improvement under the effective key question. Following this inspection the practice sent to us an action plan detailing what they would do to meet the legal requirements in relation to the following:-

- Ensuring that training for staff is completed as appropriate and training records kept up to date.

We carried out a focused follow up inspection on 28 February 2017, this inspection was to verify if the practice had carried out their action plan to meet the legal requirements in relation to the breaches in regulations that we had identified in our previous inspection on 17 November 2015. We found that they had not completed their action plan. We found staff training had not been completed and training was not being monitored appropriately by the practice. The overall rating was good but remained rated as requires improvement under the effective domain. As the provider had not completed their action plan to meet the legal requirements following this inspection we issued a warning notice that the practice must comply with the legal requirements in relation to the following:-

- Ensuring that training for GP partners, clinical and non-clinical staff is completed as appropriate to their job role and that training is monitored by the practice.

This report covers our findings in relation to the concerns regarding training. The full comprehensive report on the 17 November 2015 and the focused follow up report on the 28 February 2017 inspection outcomes can be found by selecting the 'all reports' link for Bridge Practice on our website at www.cqc.org.uk.

At this inspection, on 24 April 2017 we found that training appropriate to job roles had been completed and training was being monitored by the practice.

The practice is now rated as good for providing effective services.

Our key findings at this inspection, 24 April 2017 were as follows:

- All GP partners, clinical and non-clinical staff had completed training at a level appropriate to their job role and in accordance with the practice training schedule.
- The practice had implemented a central record of staff training and was using this to monitor training.

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 effective?

The practice is now rated as good for providing effective services.

During our inspections on 17 November 2015 and 28 February 2017 we identified concerns with staff training and appraisals. Following our previous inspection 28 February 2017 the practice had made significant improvements to become compliant with the legal requirements in the warning notice.

At this inspection on 24 April 2017, we found:

- All GP partners, clinical and non-clinical staff had completed training appropriate to their job role and in accordance with the practice training schedule.
- The practice had implemented a central training recording system and this was being used effectively to monitor staff training and ensure that all training was up to date.

Good



Bridge Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a CQC lead inspector.

Background to Bridge Practice

The Bridge Practice is situated in the Stepgates area of Chertsey. The practice is located in the Chertsey Family Health Centre which is a purpose built property. The building is owned by NHS Estates and there are three providers sharing the property. This practice is not the major tenant. At the time of our inspection there were approximately 7,900 patients on the practice list.

Since our last visit the practice had undergone a period of change following the retirement of two long standing partners.

The practice has three GP partners and two salaried GPs (two male and three female), three nurses, a practice manager, a deputy practice manager, reception and administration staff. The practice is a training practice, training practices have GP trainees and Foundation Year Two junior doctors and at the time of our inspection had one GP registrar.

The practice is open between 8am and 6.30pm Monday to Friday. Extended hours surgeries are offered 7.30am to 8am Tuesday and Thursday mornings and 6.30pm to 7.30pm Tuesday, Wednesday and Thursday evenings. Patients requiring a GP outside of normal hours are advised to call NHS 111 where they will be directed to the most appropriate out of hours service. The practice has a Personal Medical Services (PMS) contract and offers enhanced services for example; various immunisation and learning disabilities health check schemes.

The service is provided at the following location:-

The Bridge Practice

Chertsey Family Health Centre

Stepgates

Chertsey

Surrey

KT16 8HZ

The practice has a below average number of patients aged 0-29, and an above average number of patients aged 40-54 and male patients aged 65-69. There are a slightly higher than average percentage of patients with long standing health conditions. The practice has a lower number of children and older people affected by deprivation than the national average although it is slightly higher than the clinical commissioning group average.

Why we carried out this inspection

We undertook a comprehensive inspection of Bridge Practice on 17 November 2015 and a focused follow up on 28 February 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report following the November 2015 inspection and the report for the focused follow up February 2017 inspection can be found by selecting the 'all reports' link for Bridge Practice on our website at www.cqc.org.uk.

We undertook a follow up focused warning notice inspection of Bridge Practice on 24 April 2017. This

Detailed findings

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 focused inspection of Bridge Practice on 24 April 2017. This involved reviewing evidence that:

- GP partners, clinical and non-clinical staff had completed training appropriate to their job role.
- The system the practice was using to record staff training and maintain an overview.
- Minutes and agendas for staff and team meetings.

During our visit we:

- Spoke with staff including the practice manager and deputy practice manager.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 17 November 2015, we rated the practice as requires improvement for providing effective services as the arrangements in respect of staff training. The practice remained rated as requires improvement following our inspection on 28 February 2017, as we found that some training had still not been completed, and we issued a warning notice that the practice must comply with the legal requirements in relation to training.

Following our previous inspection 28 February 2017 the practice had made significant improvements to be compliant with the legal requirements.

Effective staffing

During our inspection 28 February 2017 we saw that the practice was recording staff training and non-clinical staff had completed training appropriate to their role including information governance and basic life support. We noted that not all GP partners or clinical staff had completed training appropriate to their job role or in accordance with the practice training schedule. For example; not all GPs or nurses had completed infection control, information governance or fire safety within the last twelve months and one GP did not have current basic life support training including anaphylaxis or level three safeguarding children.

We also noted that none of the nursing staff had completed training regarding the Mental Capacity Act 2005. We found that the system for recording staff training had been reviewed and improved, although still required more active monitoring.

At our inspection 24 April 2017 we found that all GP partners, clinical and non-clinical staff had completed training appropriate to their job role and in accordance with the practice training schedule. This included basic life support, safeguarding children and adults, infection control, information governance and fire safety.

We also saw that the practice was maintaining an up to date record of training which was being used to actively monitor training. This was reviewed weekly by the practice manager and deputy practice manager and at monthly meetings by the GP partners. The practice had identified a GP partner who had taken on the role of training lead for the partnership.

Staff we spoke with told us that GP partners and staff who conducted appraisals were reminded of the importance of reviewing training at appraisals. The practice had implemented a system of reminders for GP partners and staff in advance of their training due date to ensure that training remained up to date. We also saw an induction plan for a new recruit which included time for mandatory training to be completed.