

Drybrook Surgery

Inspection report

Drybrook Road
Drybrook
GL17 9JE
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www.drybrooksurgery.nhs.net

Date of inspection visit: 13 April 2022
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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?	Requires Improvement	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced inspection at Drybrook Surgery on Friday 13 May 2022. Overall, the practice is rated as Requires Improvement.

Safe - Requires Improvement

Effective - Requires Improvement

Caring - Good

Responsive - Good

Well-led - Requires Improvement

Following our previous inspection on 28 June 2016, the practice was rated Good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Drybrook Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to review the standard of care since our previous report.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

Our findings

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.

Overall summary

We have rated this practice as Requires Improvement overall

We found that:

- The practice had just gone through a change in management and ownership. There was a lack of clarity on allocation of a new registered manager. The practice had submitted an application to put these leads in place but withdrew the application prior to processing in January 2022. At the time of the inspection the practice had not resubmitted their applications for a new registered manager or provider.
- There was evidence of some audit activity carried out by the practice. However, there was no formal quality improvement programme in place.
- Systems and processes to monitor significant event occurrences were ineffective.
- There was limited evidence of learning and dissemination of information for the management of incident reporting.
- The systems in place for monitoring patients' health in relation to the use of medicines including high risk medicines, were ineffective.
- There was limited evidence for established quality improvement process. The practice was not participating in any local or national clinical pilots or other initiatives.
- We found that the Infection prevention and control was not given sufficient priority or oversight.
- People were able to access care and treatment in a timely way.
- The practice understood the needs of its local population and had developed services in response to those needs.
- Staff treated patients with kindness, respect and compassion.
- Patient feedback was positive about the care and treatment they had received.
- Governance systems and processes were in place but not fully embedded into practice.

We found breaches of regulations. The provider **must**:

- Ensure incidents are effectively recognised and reported and acted upon.
- Ensure infection prevention and control is formally documented with adequate time and resource to ensure compliance.
- Establish effective processes to ensure good governance in accordance with the fundamental standards of care.

The provider **should**:

- Develop an effective system for monitoring patients' health in relation to the use of medicines including high risk medicines and those with long term conditions have adequate oversight.
- Develop and implement a quality improvement process and rolling audit plan.

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

Our inspection team

Our inspection team was led by a CQC lead inspector with an additional inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Drybrook Surgery

Drybrook Surgery is located in Drybrook at:

The Surgery

Drybrook

Gloucestershire

GL17 9JE

Drybrook Surgery is a long-established family orientated GP practice located in Drybrook, Gloucestershire which is a rural area in the Forest of Dean. The practice is situated in a two storey purpose built health centre building and is wheelchair accessible. The practice provides general medical services to approximately 4,400 patients. Services to patients are provided under a General Medical Services (GMS) contract with NHS England. (A GMS contract is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract).

The Practice has Three GP's working at the practice. The clinical team includes three practice nurses and one healthcare assistant and two Advanced Nurse practitioners. The practice manager is supported by a team of five administrators / receptionists. Drybrook Surgery is a dispensing practice with a team of three dispensers working in the dispensary on a rotational basis. The practice dispenses to approximately 34% of the registered patient base.

The practice population has a higher proportion of patients aged over 65 compared to local and national averages. For example, 24% of practice patients are aged over 65 compared to the local clinical commissioning group (CCG) average of 20% and the national average of 17%. The practice is located in an area with low social deprivation and is placed in the third least deprived decile by public health England. The prevalence of patients with a long-standing health condition is 57% compared to the local CCG average of 55% and the national average of 54%.

People living in more deprived areas and with long-standing health conditions tend to have greater need for health services.

The practice is open between 8.30am and 6pm on Monday to Friday. Between 8am - 8.30am and 6pm – 6.30pm every weekday telephone calls are picked up by the reception team and a duty doctor is on site to treat any medical emergencies. Appointments are available between 8.30am and 1pm every morning and 1.30pm to 6pm every afternoon.

Out of hours cover is provided by South Western Ambulance Service NHS Foundation Trust and can be accessed via NHS 111.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Family planning services Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• There was no action taken following the power lost to medicine fridges to ensure medicines remained safe to administer to patients.• There was a low reporting culture of incidents. We found evidence where incidents had occurred, but no action had been taken to record and learn from them to reduce the likelihood of them occurring again.• Monitoring and reviewing of high-risk medicines including patients with long term conditions such as diabetes was not being conducted in a timely manner.• Insufficient time was given to a comprehensive infection prevention and control programme of auditing and assurance.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <ul style="list-style-type: none">• There was insufficient oversight of systems and processes to ensure that appropriate action had been taken to maintain safety and deliver a safe and effective service. Such as recording of incidents and significant events, or arrangements for Infection prevention and control.