

Holly Tree Surgery

Inspection report

42 Boundstone Road
Wrecclesham
Farnham
Surrey
GU10 4TG
Tel: 01252793183
www.hollytreesurgery.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 location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced comprehensive inspection at Holly Tree Surgery on 6 November 2019 as part of our inspection programme. At this inspection we followed up on breaches of regulations identified at a previous inspection on 6 November 2018.

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.

We have rated this practice as good overall.

We rated the practice as **requires improvement** for providing well led services because:

- The practice had not consistently identified areas that required a review, such as monitoring of waiting times for the sit and wait service. Staff induction processes were not established and there were no records of staff health status to determine if reasonable adjustments should be applied. We also identified some infection control governance concerns, which required a review.
- The practice had not identified or assessed potential risks to patient safety and we found concerns with practice premises and security and patient prioritisation processes.

We rated the practice as **good** for providing safe, effective, caring, and responsive services because:

- The practice had clear systems, practices and processes to keep people safe and safeguarded from abuse.
- Staff training was organised and maintained throughout the year and clinicians could demonstrate they used evidence based practice.

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised services to meet patients' needs. Patients could access care and treatment at a time that suited them.

The areas where the provider **must** make improvements are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements are:

- Develop a system for monitoring consent seeking process.
- Continue to collect staff immunisation status information, to keep staff and patients safe.
- Identify correct storage processes for maintaining the cold chain when transporting refrigerated medicines outside the practice.
- Implement a system to support how verbal complaints and feedback from patients can be documented and reviewed to identify any themes and trends.
- Improve complaint responses to include details of the health ombudsman.
- Develop a system for undertaking health checks for patients on the learning disability register.

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

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Good 
Working age people (including those recently retired and students)	Good 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector and included a GP specialist advisor, a practice manager specialist advisor and two CQC medicines team inspectors.

Background to Holly Tree Surgery

Holly Tree Surgery provides personal medical services to approximately 6,192 patients and has an in-house practice dispensary. The practice is part of North East Hampshire and Farnham clinical commissioning group (CCG) and a member of the federation of GP practices across all of North East Hampshire and Farnham locality. They are also a part of a federation of five Farnham GP services which also formed the Farnham primary care network in July 2019.

The registered provider is Holly Tree Surgery. The practice is registered to provide the following regulated activities: Treatment of disease, disorder or injury, Surgical procedures, Family planning, Maternity and midwifery services and Diagnostic and screening procedures.

The practice and dispensary are located at:

42 Boundstone Road, Wrecclesham, Farnham, Surrey, GU10 4TG.

The practice has three GP partners and two salaried GPs. Between them, they offer 28 sessions and a whole time equivalent (WTE) of 3.5 full time GPs. The nursing team consists of two part time practice nurses (WTE 1.06) and two part time healthcare assistants (WTE 0.77).

The dispensary is managed by a dispensary manager who is a qualified dispenser. There are four further qualified dispensers and three assistant dispensers.

Day-to-day operations are managed by a full time practice manager, a personal assistant to the practice manager, two secretaries and seven reception/administration staff.

The practice is open Monday to Friday from 8.20am until 6.30pm with telephone lines operating from 8am until 6.30pm. Access to GPs was mostly available through a sit and wait, same-day access service, with the exception of some appointments for specific procedures such as minor surgery, coil and implant fitting, or if the health care need was complex or required a longer time to be seen.

Patients can access the sit-and-wait system by arriving at the practice between 8.20am and 10am for morning clinics and 3.30pm to 5.15pm for afternoon clinics. After checking in with the reception team, patients then sit in the waiting room to be seen on a first come, first served basis.

The dispensary operating hours are Monday to Friday from 8.30am to 12.30pm and from 2pm to 6.15pm.

An improved access service is provided by the federation of five Farnham practices from a different location and operates from Monday to Friday between 6.30pm and 8pm and on Saturday mornings. Patients from Holly Tree Surgery can access pre-bookable appointments to see a GP, nurse or healthcare assistant at this service, from the practice reception team.

Out of hours GP services are provided by an external stakeholder. Patients can access the out of hours service by contacting the NHS111 telephone service.

The practice population is situated in an area of low deprivation. Levels of employed patients is similar to

local and national averages, whilst levels of unemployment are above the local average and in line with the national average. There is a high white British population of 96.5% with only 3.5% of patients deriving from black or minority ethnic groups. Average life expectancy was higher for the population compared with local and national averages.

The practice has been inspected before. You can find the previous practice reports by clicking on the link for Holly Tree Surgery and then the “all reports” section on our website: www.cqc.org.uk.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

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> <p>Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> <p>How the regulation was not being met...</p> <p>There were inconsistent systems or processes that enabled the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:</p> <ul style="list-style-type: none">• No risk assessment or audit had been carried out to determine if waiting times for the sit and wait service were safe or effective and there was no system in place to assess the immediate needs or concerns of patients, to determine priority or urgent need.• There was no documented evidence of formal assessments of staff physical and mental health status, in line with schedule 3.• New staff induction processes were not yet fully established and embedded.• There had been no risk assessment of the premises and security of the practice (including access to the dispensary). Dispensary stock was not secure.• An annual infection control audit had identified some areas of risk from October 2018 that had not been completed. <p>This was in breach of Regulation 17 (1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>