

Hardwicke House

Quality Report

Hardwicke House
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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



Summary of findings

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Hardwicke House	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Hardwicke House on 3 October 2016. The practice was rated as good overall, and requires improvement for providing safe services as improvements were needed to ensure that medicines were managed appropriately. The full comprehensive report on the 3 October 2016 inspection can be found by selecting the 'all reports' link for Hardwicke House on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 18 April 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 3 October 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

The practice is now rated as good overall and good for providing safe services.

Our key findings were as follows:

- Standard operating procedures which govern the dispensing of medicines were comprehensive and

available at all dispensing sites. Effective standard operating procedures and log books for the recording of the destruction of medicines, including controlled drugs (medicines that require extra checks and special storage requirements because of their potential for misuse) had been produced and implemented.

- Systems and processes were in place to ensure that medicines, including vaccines, were stored within the recommended temperature range and medicines were checked for expiry dates. However the refrigerator thermometer was not being reset in line with guidelines in the dispensary at Hardwicke House. A standard operating procedure was submitted following the inspection to address this.
- The practice held appropriate emergency medicines which were checked regularly and were all in date.
- Patient group directives for the nursing staff had been signed and were up to date.
- A system was in place to ensure the practice management team had oversight of staff training and that staff were informed of updates and changes within the practice.

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?

At the last inspection on 3 October 2016 we found that improvements were needed in relation to safe care and treatment, by ensuring that medicines were managed appropriately.

Our focused inspection on 18 April 2017 found that improvements had been made.

- An effective system had been implemented to check the expiry dates of medicines and standard operating procedures and log books for the recording of the destruction of medicines, including controlled drugs (medicines that require extra checks and special storage requirements because of their potential for misuse) had been produced and implemented.
- Standard operating procedures which govern the dispensing of medicines had been improved, were standardised and available at all dispensing sites. The practice held appropriate emergency medicines, which were regularly checked and were all in date.
- Systems and processes were in place to ensure that medicines, including vaccines, were stored within the recommended temperature range. Refrigerator temperature checks at the branch practice and those completed by nursing staff at Hardwicke House were monitored and documented appropriately. Dispensing staff we spoke with at Hardwicke House were not aware of how to reset the refrigerator thermometer. The practice submitted a standard operating procedure following the inspection to ensure that dispensary staff were aware of how to do this.
- Patient group directives for the nursing staff had been signed and were up to date.

Good



Hardwicke House

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector and included a GP specialist adviser.

Background to Hardwicke House

The practice area covers the town of Sudbury and extends into the outlying villages. There are five surgery sites, and medicines are dispensed from three of these. The practice offers health care services to around 23000 patients and has consultation space for GPs and nurses as well as extended attached professionals including midwives, physiotherapists, and staff from services such as a sleep apnoea clinic. Hardwicke House is the practice where the administrative functions for the practice are managed. The practice holds a Personal Medical Service (PMS) contract with the local CCG, and is a training practice providing education to medical students.

- There are seven GP Partners and seven salaried GPs at the practice (eight female and six male GPs). There are three healthcare assistants, one nurse practitioner, and six practice nurses. A team of sixteen dispensary trained staff support the medicines manager.
- A team of 40 administration and reception staff support the management team. The practice manager is supported by a deputy manager and an IT manager. Each branch site has a manager.
- The practice is open between 8am and 6.30pm Monday to Friday; extended hours are available on Saturday mornings each week.

- If the practice is closed IC24 provide emergency care, patients are asked to call the NHS111 service or to dial 999 in the event of a life threatening emergency.
- The practice demography is similar to the national average but each practice site has its own demography within their immediate area.
- Male and female life expectancy in this area is in line with the England average at 80 years for men and 84 years for women.

Why we carried out this inspection

We undertook a comprehensive inspection of Hardwicke House on 3 October 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and requires improvement in respect of providing safe care and treatment. The full comprehensive report following the inspection on October 2016 can be found by selecting the 'all reports' link for Hardwicke house on our website at www.cqc.org.uk.

We undertook a follow up focussed inspection of Hardwicke House on 18 April 2017. This 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

During our visit we:

Detailed findings

- Visited Hardwicke House and the branch practice at Church Square, Bures, which both provide dispensing services.
- Spoke with a range of staff including a GP, the practice manager, nurses and dispensing staff.
- Looked at standard operating procedures in use at the practice.

Are services safe?

Our findings

At the last inspection on 3 October 2016 we found that improvements were needed in relation to safe care and treatment. This was in relation to ensuring that medicines were managed appropriately. This included

- Producing and implementing an effective standard operating procedure and log books for the recording of the destruction of medicines, including controlled drugs (medicines that require extra checks and special storage requirements because of their potential for misuse).
- Ensuring medicines, which included vaccines, were stored within the recommended temperature range.
- Implementing an effective system to check the expiry dates of medicines.

These arrangements had improved when we undertook a follow up inspection on 18 April 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

- The practice had implemented standard operating procedures and log books for recording the destruction of medicines, including controlled drugs.
- An effective system was in place to ensure that all medicines were within their expiry date.
- A nursing team protocol had been written following the inspection on 3 October 2016 in relation to refrigerator temperatures, vaccine safety and storage, and checking medicine and vaccine expiry dates. Improvements had been made to ensure that medicines, including vaccines, that required refrigeration, were safely managed.

- We noted that record of the minimum and maximum temperatures of the refrigerator in the dispensary at Hardwicke House had been the same since October 2016. Staff we spoke with were not aware of how to reset the refrigerator thermometer. We raised this with dispensary lead who advised they would write a standard operating procedure to ensure that dispensary staff were aware of this. They sent this to us following the inspection. Refrigerator temperature records we reviewed in the dispensary at Bures Surgery were being taken and recorded correctly, and staff were aware of the action they would take if temperatures were outside of the agreed range.
- The standard operating procedures which govern dispensing processes had been improved. They were comprehensive and available at all dispensaries. Staff we spoke with confirmed that they were straightforward and support and advice was readily available if this was needed.
- Patient group directives for the nursing staff had been signed and were up to date.

Arrangements to deal with emergencies and major incidents

- Emergency medicines were easily accessible to staff in a secure area of the practice and all staff knew of their location. All the medicines we checked were in date and stored securely. The practice had made available emergency medicine to treat patients who might develop complications during contraceptive procedures.