

Swanage Medical Practice

Quality Report

Station Approach Swanage Dorset BH19 1HB Tel: 01929 422231 Website: www.swanagemedical.org.uk/

Date of inspection visit: 14 April 16 Date of publication: 23/05/2016

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.

Contents

| Summary of this inspection | Page |
|---|------|
| Overall summary | 1 |
| The five questions we ask and what we found | 3 |
| Detailed findings from this inspection | |
| Background to Swanage Medical Practice | 5 |
| Why we carried out this inspection | 5 |
| How we carried out this inspection | 5 |
| Detailed findings | 7 |

Overall summary

Letter from the Chief Inspector of General Practice

We carried out a focused desktop inspection of Swanage Medical Practice on 14 April 2016 to assess whether the practice had made the improvements in providing safe care and services.

We had previously carried out an announced comprehensive inspection at Swanage Medical Practice on 26 August 2015 when we rated the practice as good

overall. The practice was rated as requires improvement for providing safe care. This was because of how the cleaning cupboard that stored substances potentially harmful to health was managed.

We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time. The practice was able to demonstrate that they were meeting the standards. The practice is now rated as good for providing safe care. The overall rating remains as good.

Summary of findings

This report should be read in conjunction with the full inspection report.

Our key findings across the areas we inspected were as follows:

- There was an open and transparent approach to safety and an effective system in place for reporting and recording significant events.
- Risks to patients were assessed and well managed.

Staff assessed patients' needs and delivered care in line with current evidence based guidance. Staff had been trained to provide them with the skills, knowledge and experience to deliver effective care and treatment.

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?

The practice is rated as good for providing safe services.

- There was an effective system in place for reporting and recording significant events.
- Lessons were shared to make sure action was taken to improve safety in the practice.
- When things went wrong patients received reasonable support, truthful information, and a written apology. Patients were told about any actions to improve processes to prevent the same thing happening again.
- The practice had clearly defined and embedded systems, processes and practices in place to keep patients safe and safeguarded from abuse.
- Risks to patients were assessed and well managed.

Good



Summary of findings



Swanage Medical Practice

Detailed findings

Background to Swanage **Medical Practice**

Swanage Medical Practice is located at Station Approach, Swanage, Dorset, BH19 1HB. The practice has a patient population of approximately 11500 and is the only GP practice located in Swanage.

The practice is located in the centre of a busy seaside town. The practice population increases significantly during the summer months due to holiday makers. The practice has a predominantly older population with 53% of patients being over the age of 65. The practice has 10 GP partners and two salaried GPs. Seven GPs were male and five were female. Other practice staff includes practice nurses, a health care assistant, a practice manager and teams of administration

reception staff. The location has ten consultation rooms and six treatment rooms. The district nursing team for the area is also based at the practice.

The practice is a research active practice with GPs involved in medical research. The premises are owned by the GP partners.

The practice is open between 8.30am and 1pm and 2pm to 6.30pm Monday to Friday. The practice offered some extended hours appointments on some Monday and Wednesday evenings and alternate Saturday mornings but the timings of these appointments were not publicised in

the practice, on the practice information leaflet or website.

During the period late July to mid September additional appointments for holidaymakers and visitors are held Monday to Friday at 1.50pm. These appointments are 'sit and wait' services. In addition there are 'sit and wait' appointments for patients registered with the practice on weekday mornings between 9am and 10.30am and weekday afternoons between 3pm and 4pm.

The practice has a personal medical services contract, which is a locally agreed alternative to the standard general medical services contract used when services are agreed locally with a practice which may include additional services beyond the standard contract. The practice GPs opted out of providing their own out of hours care and out of hours care was provided by South West Ambulance Service via the NHS 111 system.

We previously inspected Swanage Medical Practice on 26 August 2015. Following this inspection, the practice was given a rating of good. A copy of the report detailing our findings can be found at www.cqc.org.uk/

Why we carried out this inspection

We carried out an announced inspection at Swanage Medical Practice on 26 August 2015 when we rated the practice as good overall. Specifically, the practice was rated as good for providing responsive services, being well-led, providing effective care for being caring and requires improvement for providing safe care.

How the regulation was not being met: The cleaning cupboard stored substances potentially harmful to health. The cupboard was in a public area and was not secure and therefore accessible to patients and members of the public.

We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time. We have followed up to make sure

Detailed findings

that the necessary changes have been made and found the provider is now meeting the regulations included within this report. This report should be read in conjunction with the full inspection report.

Following the inspection in August 2015, the provider sent us evidence which demonstrates how the cleaning cupboard and substances hazardous to health are stored securely.

How we carried out this inspection

We have not revisited Swanage Medical Practice as part of this review because they were able to demonstrate that they were meeting the standards without the need for a visit. We carried out a focused review based on the evidence the practice provided to us.



Are services safe?

Our findings

Monitoring risks to patients

At our last inspection on 26 August 2015, the cleaning cupboard used for storing potentially harmful cleaning products was not secure. The cleaning cupboard was used for storing keys as well as cleaning products. At our previous inspection, we found the door to the cupboard was bolted on the outside and marked as private. This meant that it was less accessible to young children but did not prevent unauthorised access by patients and members of the public.

The cleaning cupboard has now been secured by the practice.

On 12 April 2016 the practice was able to supply evidence of how they had improved their procedures and were now complying with the regulation.

The practice has now secured this cupboard by installing a secure lock accessible with key pad access. The practice submitted photographic evidence to demonstrate that the key pad lock is in place. The code for the cupboard is only available to authorised personnel.

This section is primarily information for the provider

Enforcement actions

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.