

# Hersham Surgery

### **Quality Report**

The Surgery Pleasant Place Walton On Thames Surrey **KT12 4HT** Tel: 01932 229033 Website: www.hershamsurgery.nhs.uk

Date of inspection visit: We have not revisited the practice as part of this review because the practice was able to demonstrate that they were meeting the regulations associated with the Health and Social Care Act 2008 without the need for a visit. Date of publication: 03/07/2017

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

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## Overall summary

#### **Letter from the Chief Inspector of General Practice**

At our previous comprehensive inspection at Hersham Surgery in Walton On Thames, Surrey on 20 September 2016 we found a breach of regulations relating to the provision of safe services. The overall rating for the practice was good. Specifically, the practice was rated requires improvement for the provision of safe services and good for the provision of effective, caring, responsive and well-led services. The full comprehensive report on the September 2016 inspection can be found by selecting the 'all reports' link for Hersham Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 19 June 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulations that we identified in our previous inspection in September 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

We found the practice had made improvements since our last inspection. Using information provided by the practice we found the practice was now meeting the

regulations that had previously been breached. We have amended the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe, effective, caring, responsive and well-led services.

Our key findings were as follows:

- We saw the practice had reviewed existing arrangements and all clinical staff had suitable and appropriate indemnity insurance. Indemnity insurance is used for professional negligence claims, or allegations of malpractice, received against a member of staff in the course of their professional duties.
- Revised recruitment policies and processes had been adopted which reflected national guidance. For example, supporting recruitment documentation that was missing during the September 2016 inspection was now all recorded and documented correctly including registration with the appropriate professional body.
- The practice had reviewed and updated the practice governance framework. This included a review of policies and procedures. Furthermore, as part of the governance review, updated guidance had been sent to all staff to increase awareness of where policies were stored.

# Summary of findings

• Further steps had been taken steps to increase privacy and confidentiality in an upstairs area of the practice. Awareness of the importance of confidentiality has been discussed with all practice staff and continued to be regularly reviewed including in-house observations.

**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 had taken appropriate action and is now rated as good for the provision of safe services.

Our last inspection in September 2016 identified concerns relating to how the practice managed and monitored risks. We saw most risks to patients were assessed and managed, with the exception of recruitment checks, medical indemnity insurance for clinicians, and out of date information in the business continuity plan.

Using information provided by the practice we found the concerns had been addressed:

- The practice had revised recruitment policies and processes which reflected national guidance. For example, supporting recruitment documentation that was missing during the September 2016 inspection was now all recorded and documented correctly including registration with the appropriate professional body.
- The practice had review existing arrangements and all clinical staff now had suitable and appropriate indemnity insurance.
- The practice had reviewed and updated the practice governance framework. This included a review of policies and procedures and an amendment to the business continuity plan. Furthermore, as part of the governance review, updated guidance had been sent to all staff to increase awareness of where policies were stored.

Good





# Hersham Surgery

**Detailed findings** 

## Our inspection team

Our inspection team was led by:

This desk based review inspection was completed by a CQC Inspector.

# Background to Hersham Surgery

Hersham Surgery is based in a purpose built property in Hersham village in Walton On Thames, Surrey. The practice has a General Medical Services (GMS) contract with NHS England. (GMS is one of the three contracting routes that have been available to enable commissioning of primary medical services). The practice is part of NHS North West Surrey Clinical Commissioning Group (CCG).

At the time of our inspection there were approximately 8,000 patients on the practice list. The practice has a higher than average number of patients aged over 65 years and a slightly higher than average number of patients from birth to nine years. The practice has a lower than average number of patients aged 10 to 34 years old. The practice has a highest number of patients aged over 65 years in the CCG. The practice provides care and treatment to the residents of a large retirement village as well as several other large residential and nursing homes. The practice also has a lower than average number of patients with long standing health conditions. Deprivation amongst children is low when compared to the population nationally. Deprivation among older people is higher than the CCG average but still low when compared to the population nationally. Overall the practice is in the second least deprived decile nationally.

There are five GP partners (three male and two female) and the practice had increased their attempts to recruit a salaried GP. They are supported by two practice nurses, a clinical pharmacist, three phlebotomists, a practice manager, a deputy practice manager, a reception manager and a team of clerical and reception staff. Hersham Surgery is a training practice, it takes supernumerary registrars who are qualified doctors completing their specialist training as GPs.

The practice is open between 8am and 6.30pm Monday to Friday and does not offer extended hours appointments. When the practice is closed patients are advised to call NHS 111 where they will be given advice or directed to the most appropriate service for their medical needs.

The service is provided from the following location:

• The Surgery, Pleasant Place, Walton On Thames, Surrey KT12 4HT.

# Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 20 September 2016 and we published a report setting out our judgements. These judgements identified a breach of regulations. 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 undertook a follow up desk-based focused inspection on 19 June 2017 to follow up and assess whether the necessary changes had been made, following our inspection in September 2016. We focused on the aspects of the service where we found the provider had breached

## **Detailed findings**

regulations during our previous inspection. We followed up to make sure the necessary changes had been made. We found the practice was meeting all the requirements of the regulations that had previously been breached.

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

# How we carried out this inspection

We carried out a desk-based focused inspection of Hersham Surgery on 19 June 2017. This involved reviewing evidence provided by the practice and a range of information we hold about the practice.

- We reviewed the previous Care Quality Commission (CQC) inspection report and the action plan submitted by the practice outlining how they would make the necessary improvements to comply with the regulation.
- We also reviewed information provided by the practice, including evidence of the new arrangements to manage risks, specifically recruitment arrangements, medical indemnity insurance for clinicians, the business continuity plan and information of improved systems to improve confidentially.

All were relevant to demonstrate the practice had addressed the breaches of regulation identified at the inspection in September 2016.



## Are services safe?

## **Our findings**

When we inspected Hersham Surgery in September 2016, we identified concerns relating to the management of risks within the practice. For example, we reviewed personnel files and found that not all appropriate recruitment checks had been undertaken prior to employment. We also found registration with appropriate professional body had not been checked and the practice did not have evidence of medical indemnity insurance for all of the clinical members of staff.

Furthermore, whilst reviewing the business continuity plan (in place for major incidents such as power failure or building damage) we noted that some information that was out of date.

We reviewed information provided by the practice and found the practice had made improvements to address the concerns previously identified.

### Overview of safety systems and processes

The practice had reviewed existing systems and processes and made several improvements, which included:

• Within 24 hours of the September 2016 inspection the practice had reviewed existing arrangements and all clinical staff had suitable and appropriate indemnity insurance. Indemnity insurance is used for professional negligence claims, or allegations of malpractice, received against a member of staff in the course of their professional duties. To ensure a similar concern did not

- happen again, we saw the practice now had an indemnity insurance review schedule which clearly identified dates of renewal. The management of this schedule had been assigned to a senior administrator.
- The practice had reviewed all staff files and recruitment correspondence for staff recruited in the last five years. Following this review we saw revised recruitment policies and processes which reflected national guidance. For example, supporting recruitment documentation that was missing during the September 2016 inspection was now all recorded and documented correctly including registration with the appropriate professional body. We also saw the practice now had a checklist assigned to each staff file to ensure all correspondence was recorded correctly.

### Arrangements to deal with emergencies and major incidents

• The practice had reviewed and updated the practice governance framework. This included a review of policies and procedures and an amendment to the business continuity plan which now contained updated information. The practice had also adopted a policy and procedure matrix as a tool to identify and schedule regular annual reviews of practice policies. Furthermore, as part of the governance review, updated guidance had been sent to all staff to increase awareness of where policies were stored.

These actions were now ensuring that requirements relating to safe care and treatment were being met.