

# Tolsey Surgery

## Quality Report

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Date of inspection visit: 10 November 2016  
Date of publication: 01/12/2016

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.

### 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

In May 2016 a comprehensive inspection of Tolsey Surgery was conducted. The practice was rated as requires improvement for safe and good for effective, caring, responsive and well led. Overall the practice was rated as good.

We found that the practice required improvement for the provision of safe services, improvements were needed in the method the practice assessed, managed and mitigated the risks that related to the safe management of medicines.

Tolsey Surgery sent us an action plan that set out the changes they would make to improve these areas.

We carried out an announced focussed inspection of Tolsey Surgery on 10 November 2016 to ensure the practice had made these changes and that the service was meeting regulations. At this inspection we rated the practice as good for providing safe services. The overall rating for the practice remains good. For this reason we have only rated the location for the key question to which

this related. This report should be read in conjunction with the full inspection report of 17 May 2016. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Tolsey Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Our key findings at the November 2016 inspection were:

- The practice had ensured effective systems were in place for monitoring patients prior to issuing repeat prescriptions of high risk medicines
- Standard operating procedures for the signing of repeat prescriptions prior to dispensing were being adhered to.
- Standard operating procedures in relation to checks of controlled drugs and the maintenance of an accurate controlled drugs register were being adhered to.
- Systems were in place to ensure effective monitoring of hand written prescription use.
- Fire drills had been carried out.

### 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. Since our last inspection in May 2016, systems had been put in place to ensure safe patient care.

- A system had been introduced to track serial numbers of blank prescriptions to effectively monitor their use.
- We saw that the system introduced ensured that all repeat prescriptions were signed prior to being dispensed.
- New standard operating procedures for controlled drugs had been implemented and we saw evidence that these were being adhered to by staff.
- Staff had received additional training on the management of controlled drugs.
- All patients on high risk drugs who required regular monitoring had been identified and an effective system had been introduced.
- Fire drills had been performed as stated in the practices fire risk assessment.

Good



# Tolsey Surgery

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

The focussed inspection was undertaken by a CQC inspector.

### Why we carried out this inspection

We carried out a comprehensive inspection on 17 May 2016 and published a report setting out our judgements. We asked the practice to send a report of the changes they would make to comply with the regulations they were not meeting. We have followed up to make sure the necessary changes had been made and found the practice was meeting the fundamental standards included within this report. This report should be read in conjunction with the full inspection report.

### How we carried out this inspection

We undertook a focused inspection of Tolsey Surgery on 17 May 2016. This was carried out to check that the practice had completed the actions they told us they would take to comply with the regulations we found had been breached during an inspection in May 2016.

To complete this desk top inspection we:

- Reviewed records relevant to the safe management of medicines.
- Spoke to a GP partner, the practice manager and the dispensary manager.

Because this was a focused follow up inspection we looked at one of the five key questions we always ask:

- Is it safe?

# Are services safe?

## Our findings

The practice is rated as good for providing safe services.

When we visited the practice in May 2016 we found that the practice:

- The provider had failed to ensure effective systems were in place for monitoring patients' prior to issuing repeat prescriptions of some high risk medicines.
- The provider had failed to log serial numbers of hand written prescription pads when taking delivery.
- The provider had failed to ensure standard operating procedures were being adhered to by staff in relation to the dispensing of medicines prior to receiving a signed prescription.
- The provider had failed to ensure standard operating procedures were adhered to in relation to checks of controlled drugs and the maintenance of an accurate controlled drugs register.

This was a breach of Regulation 12 HSCA (RA) regulations 2014: Safe care and treatment. Following our comprehensive inspection, the practice sent us an action plan which detailed how they would ensure all these areas were addressed.

We also told the practice that they should:

- Ensure fire drills were carried out, as stated in the fire risk assessment.

Subsequently the practice provided us with an action plan that detailed the changes they would make to ensure compliance.

We undertook a focussed inspection on 10 November 2016 to review these systems and ensure the improvements had been completed. From our focussed inspection we found:

### Overview of safety systems and processes

Since our last inspection in May 2016 the practice had employed an experienced dispensary manager to evaluate the practices processes, specifically processes associated with medicines management and suggest improvements that could be made. We saw that the arrangements for managing medicines, in the practice kept patients safe (including obtaining, prescribing, recording, handling, storing, security and disposal).

- All patients on high risk drugs who required regular monitoring had been identified and an effective system had been introduced. Appropriate tests and reviews that were required and the frequency of testing along with details of the tests results were logged and filed according to the next scheduled testing date. Non-attenders were identified at the end of each month. Non-attenders were contacted by receptionists and encouraged to make an appointment. The GP would contact those patients who were reluctant to do this. Roles and responsibilities for staffing groups were clearly documented to ensure the system remained effective.
- Handwritten prescriptions were stored safely and securely. We saw a monitoring system had been introduced to track serial numbers to effectively monitor their use.
- We saw that the system introduced ensured that routine repeat prescriptions were signed prior to being dispensed.
- We also saw that prescriptions suggested by nursing staff in smoking cessation and long term conditions clinics were sent to a GP to approve and prescribe before dispensing.
- The practice had been visited by the controlled drugs accountable officer for the area, who had made recommendations to the practice of ways to improve the way the controlled drugs register was reconciled and controlled drugs were stored. New standard operating procedures had been implemented and we saw evidence that these were being adhered to by staff. The lead dispensing GP and a dispenser had attended a Controlled Drug course. Information from this course was cascaded to all dispensing staff at an in house training session
- We saw minutes of meetings that documented actions to ensure safe medicines management had been discussed and actioned at clinical and dispensary meetings. We also saw updated standard operating procedures that reflected the changes made and evidence that these were being adhered to.
- Fire drills had been performed as stated in the practices fire risk assessment.

Our focussed inspection found that the practice had made sufficient improvements and the completed actions also

## Are services safe?

ensured that regulations relating to this aspect of the safe delivery of services and management of medicines were being met. This enabled us to provide an updated rating for the provision of safe services.