

Bedminster Family Practice

Quality Report

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Date of inspection visit: 6 June 2017

Date of publication: 27/06/2017

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



Are services responsive to people's needs?

Good



Are services well-led?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Bedminster Family Practice on 9 March 2016. The practice was rated as requiring improvement for providing safe, responsive and well-led services; and was rated as good for providing effective and caring services. As a result, the practice was given an overall rating of requires improvement. Following the inspection we issued two requirement notices. A notice was issued due to a breach of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, relating to safe care and treatment; and a notice was issued due to a breach of Regulation 17 of The Health and Social Care Act (Regulated Activity) Regulations 2014, relating to good governance.

Within our last inspection report we reported that the provider must ensure that:

- A risk assessment process was in place so that all clinical staff employed on either a permanent basis or as locum GPs had had their employment history and qualifications verified by a GP Partner, and a record of this stored on file.

- There was an overarching health and safety policy with a defined list of procedures or risk assessments in place to wholly meet the needs of the practice.
- There was a system to ensure that complaints were satisfactorily handled and monitored, and learning led to improvements being made to prevent reoccurrence.
- Compliments were monitored effectively and good feedback shared with staff.
- Practice policies were reviewed and updated to reflect changes in regulations and guidance.

The full comprehensive report on 9 March 2016 inspection can be found by selecting the 'all reports' link for Bedminster Family Practice on our website at www.cqc.org.uk.

We undertook a focused follow-up inspection of the practice on 6 June 2017. The inspection was to confirm that the practice had implemented its action plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 9 March 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

There were key findings across all the areas we inspected during this follow-up inspection. We saw documentary evidence:

Summary of findings

- The practice had revised its employment application form to ensure that all prospective applicants were required to declare a full employment history, and explain any gaps in employment.
- The practice had revised its risk assessment processes so that all clinical staff employed on either a permanent basis or as locum GPs had had their employment history and qualifications verified by a GP Partner, and a record of this stored on file.
- The practice employment checklist had been updated to reflect the full range of immunisations required for clinical staff.
- Of a written risk assessment for all staff, covering professional registration, previous employment references, evidence of a Disclosure and Barring Service (DBS) check, and measures to ensure patient safety if clinical staff were employed before this information had been received.
- The practice had an overarching health and safety policy in place which included risk assessments for legionella's disease (Legionella is a term for a particular bacterium which can contaminate water systems in buildings), and for the use of a platform lift.
- The practice had reviewed its policy for the management of complaints; and had taken steps to monitor complimentary feedback from patients, and share this information with staff.

Following this inspection the practice was rated as good across all domains, which changed its overall rating to Good.

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 domain for safe is now rated as good. This is because, during our focused inspection on 6 June 2017, we found:

Good



- That the provider had ensured all appropriate staff recruitment checks were made, and information held in regard to staff and the locum GPs who had worked in the practice. The practice had revised its employment application form. The revised form indicated that candidates were required to disclose their full employment history and account for any gaps in employment.
- Documentary records indicated that all clinical staff employed on a permanent basis or as locum GPs had their employment history and qualifications verified by a GP Partner, and a record of this kept on file.
- Documentary evidence, in the form of a medical status checklist for clinical staff, which included the full range of immunisations required. The checklist included immunisations against Measles, Mumps and Rubella (MMR).
- Documentary evidence of a written risk assessment in place for clinical staff. The risk assessment recorded the practice's actions or decisions regarding patient safety if clinical staff were employed whilst registration checks, and previous employer DBS checks and references were being received.
- That the practice had an overarching health and safety policy in place which included risk assessments for legionella's disease (Legionella is a term for a particular bacterium which can contaminate water systems in buildings), and for the use of a platform lift.

Are services responsive to people's needs?

The domain for responsive is now rated as good. This is because:

Good



- The provider had taken steps to ensure it had a mechanism to monitor trends or themes of complaints. We saw documentary evidence that verbal comments made to staff regarding the practice were recorded and responded to within appropriate timescales.
- The provider had taken steps to ensure that compliments were monitored and good feedback shared with staff.

Are services well-led?

The domain for well-led is now rated as good. This is because:

Good



Summary of findings

- The practice had reviewed practice specific policies, to meet changes in regulations and guidance.
- The practice had reviewed its processes and implemented changes to improve responding to complaints and comments.
- The practice had addressed aspects of the recruitment process, and put in place risk assessments associated with health and safety to protect patients and staff.

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The provider had resolved the concerns for safe, responsive and well-led services as identified at our inspection on 6 June 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for safe, responsive and well-led services as identified at our inspection on 6 June 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for safe, responsive and well-led services as identified at our inspection on 6 June 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safe, responsive and well-led services as identified at our inspection on 6 June 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safe, responsive and well-led services as identified at our inspection on 6 June 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safe, responsive and well-led services as identified at our inspection on 6 June 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Bedminster Family Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our focused inspection was completed by a CQC Lead Inspector.

Background to Bedminster Family Practice

Bedminster Family Practice is located in the Bedminster area of Bristol. There are approximately 11288 patients registered who live within the Bedminster area of Bristol. The practice operates from one location:

Regent Road

Bedminster

Bristol

BS3 4AT

The Bedminster Family Practice is situated in a purpose built surgery close by to retail and residential areas. The consulting, treatment rooms and some of the main administration areas for the practice are situated on the ground and first floor of the building. There is no patient parking and a small number of parking spaces for staff. There is short stay parking in the local vicinity.

The practice is made up of eight GPs in total including four partners and four salaried GPs. Four male and four female. They are supported by a practice manager, assistant practice manager and administration team. The practice is a teaching practice with three GPs as trainers and two GPs as appraisers and they had two GP registrars and a foundation doctor at the time of this inspection. One GP was a GP with Specialist Interest (GPwSI) in dermatology.

They have two nurse prescribers and another in process of completing their qualification for this. There is one healthcare assistant and two phlebotomists (for taking blood samples). They have recently employed a pharmacist.

Bedminster Family Practice is open from 8.30am until 6.30pm Monday to Friday Tuesday, Thursday and Friday. There are extended opening hours Tuesday and Thursday 6.30pm until 7.15pm, Wednesday 7.00pm until 7.45pm. On Fridays patients can access early morning appointments from 7.30am until 8.00am. The practice also opens two mornings, usually the first and third Saturday each month.

The practice has a Personal Medical Services contract with NHS England (a locally agreed contract negotiated between NHS England and the practice). The practice is contracted for a number of enhanced services including extended hours access, patient participation, immunisations and unplanned hospital admission avoidance.

The practice is a training practice and also offers placements for foundation doctors and trainee GPs.

The practice does not provide out of hour's services to its patients, this is provided by BrisDoc. Contact information for this service is available in the practice and on the practice website.

Patient Age Distribution

0-4 years old: 7% (the national average 5.9%)

5-14 years old: 9.6% (the national average 11.4%)

Under 18 years old: 18.8% (the national average 20.7%)

65-74 years old: 10.7% (the national average 17.1%)

75-84 years old: 4.9% (the national average 5.9%)

85+ years old: 1.5% (the national average 23%)

Detailed findings

Other Population Demographics

% of Patients with a long standing health condition is 49.2% (the national average 54%)

% of Patients in paid work or full time education is 66.8% (the national average 61.5%)

Practice List Demographics / Deprivation Index of Multiple Deprivation 2015 (IMD): is 28% (the national average 21.8%)

Income Deprivation Affecting Children (IDACI): is 22.6% (the national average 19.9%)

Income Deprivation Affecting Older People (IDAOPI): is 26.6% (the national average 16.2%)

Why we carried out this inspection

We undertook a focused follow-up inspection of Bedminster Family Practice on 6 June 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

Before writing our report, we reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We visited the practice to undertake a focused inspection on 6 June 2017.

Before producing our report we:

- Spoke with the practice manager and other practice staff such as receptionists.
- Reviewed a range of documents, such as those relating to recruitment processes, risk assessments, and managing feedback.

Are services safe?

Our findings

At the last comprehensive inspection of Bedminster Family Practice on 9 March 2016 we rated the practice as requires improvement for safe services, as arrangements for recruitment checks, information held in regard to staff and locum GPs who had worked at the practice, and equipment checks did not keep patients safe.

The areas of concern identified at the practice were:

- The provider must ensure that a risk assessment was undertaken for all staff, such as locum GPs, and a recruitment process and checklist used effectively.
- The provider must ensure that there was an overarching health and safety policy with a defined list of procedures or risk assessments in place to wholly meet the needs of the practice.

These arrangements had improved when we undertook a focused inspection on 6 June 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

- During the inspection at Bedminster Family Practice on 9 March 2016 we found the practice could not demonstrate a robust approach to recording its decisions or actions when waiting for appropriate staff information such as identity checks and evidence of training and qualifications. Although the practice had a recruitment process and checklist, this was not used effectively when locum GPs were employed either directly by the practice or obtained through an agency. During our focused follow-up inspection on 6 June 2017 we saw two completed application forms that provided a full work history and evidence of training and qualifications for locum GPs, with candidates required to account for any gaps in employment. The employment history and qualifications of these clinical staff was validated by a GP Partner and a record of this kept on file. We saw documentary evidence that all staff had received an enhanced Disclosure and Barring Service (DBS) check, and that the practice had a mechanism to check when these were due for renewal. When we spoke to the practice they informed us that the risk assessment form ensures that staff will not be employed before appropriate staff information had been received.

Monitoring risks to patients

- During the inspection at Bedminster Family Practice on 9 March 2016 we found there was no overarching health and safety policy with a defined list of procedures or risk assessments in place to wholly meet the needs of the practice. For example, the practice did not have a risk assessment in place for legionella (Legionella is a term for a particular bacterium which can contaminate water systems in buildings). During our focused follow-up inspection on 6 June 2017 we saw documentary evidence that this issue had been addressed. The practice now has an overarching health and safety policy which included a named health and safety lead. We saw documentary evidence that a risk assessment for legionella's disease was carried out in February 2017, and that the risk assessment included a detailed action plan. A risk assessment register included review dates and an annual inspection checklist for each room in the practice.
- During the inspection at Bedminster Family Practice on 9 March 2016 we found the practice did not have a risk assessment in place for the use of a platform lift. During our focused follow-up inspection on 6 June 2017 we saw documentary evidence that this issue had also been addressed. The practice now has a risk assessment for its platform lift. The practice completed a risk assessment for use of its platform lift in 2016 which included details of servicing and general maintenance work. When we spoke to the practice, we saw comments submitted by patients regarding the ease of use of the platform lift.
- During the inspection at Bedminster Family Practice on 9 March 2016 we found that the practice employment medical checklist did not have the full range of immunisations required for practice staff. During our focused follow-up inspection on 6 June 2017, this issue had been addressed. We saw documentary evidence that the medical checklist for clinical staff had been updated to reflect the full range of immunisations required, as this had not been the case previously. We saw the practice 'immunisation status' form for all staff recruited to the practice and documentary evidence that two staff recruited in 2016 were recorded as having received the full range of required immunisations.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At the last comprehensive inspection of Bedminster Family Practice on 9 March 2016 we rated the practice as requires improvement for responsive services. This was because of issues concerning the monitoring of complaints and compliments.

We reported that the provider must ensure that complaints were satisfactorily handled and monitored, and learning led to improvements being made to prevent reoccurrence.

In addition, the provider should ensure that compliments were monitored effectively and good feedback shared with staff.

These arrangements had improved when we undertook a focused follow-up inspection on 6 June 2017. The practice is now rated as good for providing responsive services.

Listening and learning from concerns and complaints

During our announced comprehensive inspection on 9 March 2016, we found that Bedminster Family Practice did not have a thorough mechanism to monitor trends or themes of complaints, or of recording and dealing

immediately with verbal comments made about the practice. During our focused follow-up inspection on 6 June 2017, we saw that several changes had been made to practice systems and processes. For example:

- A list of complaints received by the practice in the last six months, along with actions taken to address these.
- Documentary evidence that new complaints were included as a standing item on the practice meeting agenda, and minutes of meetings where actions and responses were delivered within suitable timescales.
- Documentary evidence that a summary of (anonymised) complaints was shared with the practice patient participation group (PPG), with the minutes of these meetings available to view online.
- Documentary evidence that all recorded complaints were reviewed bi-annually at governance meetings with the lead GP.

During our announced comprehensive inspection on 9 March 2016, we found that compliments were not monitored effectively and good feedback not always shared with staff. During our focused follow-up inspection on 6 June 2017, we saw that the practice had devised a 'compliments form' for patients to record their feedback. We examined documentary evidence which showed that the findings were shared during staff meetings, and in the practice's weekly newsletter.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At the last comprehensive inspection of Bedminster Family Practice on 9 March 2016 we rated the practice as requires improvement for well-led services. This was because of issues concerning practice governance.

There were areas of concern identified during our announced comprehensive inspection of Bedminster Family Practice on 9 March 2016. The provider must ensure that:

- Practice specific policies were robustly reviewed and updated to meet the changes in regulations and guidance.
- The practice response to complaints, comments and evidence of improvement were fully in place.
- Aspects of the recruitment process, and risk assessments associated with health and safety were in place to protect patients and staff.

These arrangements had improved when we undertook a focused follow-up inspection on 6 June 2017. The practice is now rated as good for providing well-led services.

Governance arrangements

During our focused follow-up inspection on 6 June 2017, we saw that several changes had been made:

- That the practice had revised its application form to ensure that it required all prospective applicants to declare a full employment history and explain any gaps in employment.
- That the practice had revised its risk assessment processes so that all clinical staff employed on either a permanent basis or as locum GPs had had their employment history and qualifications verified by a GP Partner, and a record of this stored on file.
- That the practice checklist had been updated to reflect the full range of immunisations required for clinical staff.
- That a written risk assessment for all staff, covering professional registration, previous employment references, evidence of a Disclosure and Barring Service (DBS) check, and measures to ensure patient safety whilst these checks were forthcoming if staff were already employed.
- That the practice had an overarching health and safety policy in place which included risk assessments for legionella's disease (Legionella is a term for a particular bacterium which can contaminate water systems in buildings), and for the use of a platform lift.
- That the practice had reviewed its policy for the management of complaints, and had taken steps to monitor complimentary feedback from patients, and share this with staff.