

# Henfield Medical Centre

### **Quality Report**

Deer Park Henfield **West Sussex** BN59JQ

Tel: 01273 492255 Website: www.henfieldmedicalcentre.co.uk Date of inspection visit: 4 April 2017 Date of publication: 03/05/2017

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**

We carried out an announced comprehensive inspection at Henfield Medical Centre on 6 October 2016. The overall rating for the practice was good but was rated as requires improvement for providing safe services. The full comprehensive report on the October 2016 inspection can be found by selecting the 'all reports' link for Henfield Medical Centre on our website at www.cqc.org.uk.

Following this inspection the practice sent to us an action plan detailing what they would do to meet the legal requirements in relation to the following:

- Ensuring the safe and proper management of medicines are reviewed to protect patients against the risk of unsafe care and treatment.
- Ensuring that the assessment, detection and controlling the spread of infections, including those that are associated with health care are reviewed so that their infection control audit procedure has a method of documenting how issues are resolved and when this was done.

Additionally we had found that:

- The practice needed to review their complaints process to ensure patients are given information on how they can escalate a complaint should they remain dissatisfied.
- The practice needed to record and ensure that the reasons for fridge temperatures going out of range was established.

This inspection was an announced focused inspection carried out on 4 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. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is still rated as good.

Our key findings were as follows:

- The provider had reviewed all aspects of medicines management and devised new standard operating procedures which all appropriate staff had been notified of and signed to acknowledge the information within these.
- The provider had reviewed their infection control audit process and now documented how issues were to be resolved and when these were to be completed by.

# Summary of findings

- The provider had reviewed their complaints procedure and now ensured that information was provided to the complainant that allowed them to escalate a complaint should they remain dissatisfied.
- The provider had reviewed how they recorded their fridge temperatures and documented the cause when temperatures went outside the accepted range and undertook appropriate actions.

**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 our previous inspection on 6 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of infection control management and medicines management required some improvements.

On our inspection of 4 April 2017 we found that:

- We saw evidence that medicine management practices were comprehensive and kept patients safe.
- The practice now documented actions taken to resolve issues found during infection control audits and also recorded when these were completed.
- The practice now documented the reason that fridges went outside their accepted temperature range and recorded the actions taken to remedy this.

Good





# Henfield Medical Centre

**Detailed findings** 

## Our inspection team

Our inspection team was led by:

Our team consisted of a CQC Lead inspector and a medicines inspector.

## Background to Henfield **Medical Centre**

Henfield Medical Centre is a dispensing practice offering general medical services to the population of Henfield and surrounding areas in West Sussex. There are approximately 9,600 registered patients.

The practice population has a higher number of patients between 45-85 years and over compared to the national and local CCG averages. The practice population also shows a lower number of patients between the age of 15-44 years compared to the national and local CCG averages. There are a higher number of patients with a longstanding health conditions. The percentage of registered patients suffering deprivation (affecting both adults and children) is lower than the average for both the CCG area and England.

Henfield Medical Centre is run by eight partners, seven GP partners (two male and five female), and a practice manager partner. The practice is also supported by six practice nurses (five female and one male) three healthcare assistants, a dispensary team, a team of administrative and reception staff, and an assistant practice manager.

The practice runs a number of services for its patients including asthma clinics, diabetes clinics, coronary heart disease clinics, minor surgery, child immunisation clinics, new patient checks and travel vaccines and advice.

Services are provided from two locations:

Henfield Medical Centre, Deer Park, Henfield, West Sussex, **BN59JO** 

And a branch surgery at:

Partridge Green Surgery, Woodlawn, High Street, Partridge Green, West Sussex, RH13 8HR.

We did not inspect the branch surgery on the day of inspection.

Opening hours are Monday to Friday 8am to 6.30pm. The practice has extended hours with early morning appointments from 7am Tuesday to Friday inclusive.

During the times when the practice is closed arrangements are in place for patients to access care from IC24 which is an Out of Hours provider. Access is gained to this provider by calling NHS 111.

# Why we carried out this inspection

We undertook a comprehensive inspection of Henfield Medical Centre on 6 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 but requires improvement for providing safe services. The full comprehensive report following the inspection in October 2016 can be found by selecting the 'all reports' link for Henfield Medical Centre on our website at www.cqc.org.uk.

# How we carried out this inspection

During our visit we:

# Detailed findings

- Spoke with their dispensary manager, practice manager and infection control lead.
- Reviewed their medicines management systems in relation to controlled drugs, emergency drugs, dispensing drugs and providing dosette boxes.
- Reviewed their infection control audit procedure.
- Reviewed their complaints management process.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.



### Are services safe?

## **Our findings**

At our previous inspection on 6 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of medicines management and infection control were not adequate.

We issued a requirement notice in respect of these issues and found arrangements had significantly improved when we undertook a follow up inspection of the service on 4 April 2017. The practice is now rated as good for providing safe services.

#### Overview of safety systems and process

At our last inspection in October 2016 we found that the arrangements for managing medicines (including obtaining, prescribing, recording, handling, storing, security and disposal) did not always keep people safe. Some medicines were given to patients before the prescriptions were signed by the GP and we found some expired medicines that had not been disposed of appropriately. Staff were recording fridge temperatures, but any action taken if the temperatures went out of the recommended manufacturer's range was not being recorded.

During this inspection, in April 2017, the practice showed us the changes it had made to improve safety and we found that all prescriptions were signed by the GP before dispensing.

The practice had amended their standard operating procedures (SOPs) for dispensing monitored dosage systems (MDS-dosette boxes) and controlled drugs (CDs medicine with potential for misuse, requiring special storage and closer monitoring). SOPs included instructions for prescriptions to be signed by the GP before dispensing; staff had signed the SOPs to say that they had read and understood them.

The practice had amended their fridge temperature recording chart to include space for staff to record actions taken if the fridge went out of range.

### **Monitoring risks to patients**

At our previous inspection evidence was seen that the practice had undertaken infection control audits, however, they did not have a system in place to capture how and when these issues were resolved. During this inspection, evidence was seen that infection control audits had an action plan to resolve issues that had been found during their process and that this was regularly updated by the infection control lead with matters also being discussed at practice meetings.