

Grange Road Surgery

Quality Report

Grange Road,
Bristol,
BS13 8LD

Tel: 01179644343
Website: www.grangeroadsurgery.co.uk

Date of inspection visit: 25 August 2016
Date of publication: 05/10/2016

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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	5
Background to Grange Road Surgery	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 an announced comprehensive inspection at Grange Road Surgery

on 24 November 2015. Following our comprehensive inspection overall the practice was rated as good with requires improvement for the safe domain. Following the inspection we issued a requirement notice. The notice was issued due to a breach of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, Safe care and treatment. The requirement notice was for the practice to implement the necessary changes to ensure patients who used the service were protected against any risks associated with the safe management of the medicines, checking of emergency equipment and the safe management of blank prescriptions. A copy of the report detailing our findings can be found at www.cqc.org.uk.

Our key findings across all the areas we inspected during this inspection were as follows:

- The areas where the provider must make improvement are:
- The practice must implement policy and procedures which reflect current best practice to ensure the safe management of the medicines, checking of emergency equipment and the management of

blank prescriptions. The processes for the safety of prescriptions must be sufficiently implemented to provide a clear audit trail in the event of any security incident.

- The areas where the provider should make improvement are:
- The provider should review the layout and staffing of the reception area so that conversations between patients and the receptionist could not be overheard and reduce the wait for reception so patients did not have to queue so long.
- The practice should always involve a GP in the 6 month review of the significant events and the learning and action taken.
- The practice should identify a date for completion of actions or training in the staff had personal development plans.
- The policies and procedures should always cite the latest best practice or guidance.

We undertook this focused inspection on 25 August 2016 to follow up the requirement to assess if the practice had implemented the changes needed to ensure patients who used the service were safe.

Summary of findings

Our key findings across all the areas we inspected during this inspection were as follows:

- The practice had reviewed and rewritten their medicine management protocols, processes for prescription security and checking emergency equipment; these had been fully implemented by the practice.
- The front desk staffing had been reviewed and dedicated reception staff were available to focus on patients who arrived at the reception desk.
- The process for review of significant events now involved the GP team.
- We found the policies and procedure which had been compiled since our last visit made reference to best practice guidance.
- Personal development plans had been updated to include completion dates for any training or action.

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 now rated as good for providing safe services. We found the provider had taken actions to provide a safe service following our comprehensive inspection of the practice in November 2015. This included updating training and protocols for all staff involved with medicine management, prescription security and emergency equipment checks.

Good



Grange Road Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Grange Road Surgery

Grange Road Surgery is located in a suburban area of Bristol. They have approximately 10378 patients registered. Grange Road Surgery is located on a main road in a residential area,.

The practice operates from one location:

Grange Road,

Bristol,

BS13 8LD

It is sited in a purpose built two storey building. The consulting and treatment rooms for the practice are situated on the both floors; there was no lift access to the second floor. The practice has eight consulting rooms, one for each GP partner and one allocated for any trainee GPs on placement. There are three treatment rooms (for use by nurses, health care assistants) and a phlebotomy room, reception and a waiting room area on the ground floor. There is a further consulting/counselling room on the first floor along with the offices for administrative staff, kitchen facilities and a meeting room. There is limited patient parking immediately outside the practice with spaces reserved for those with disabilities.

The practice is made up of seven GP partners, three salaried GPs and the practice manager, working alongside

a nurse practitioner, five qualified nurses and two health care assistant and two phlebotomists. The practice is supported by an administrative team made of medical secretaries, receptionists and administrators.

The practice is open for urgent and routine appointments between 8.30am – 6.30pm with extended hours appointments every Monday evening until 9pm, and in the morning on the second Saturday of the month. In addition to this there are pre-bookable appointments that can be booked up to two weeks in advance with the GP and nurse practitioner appointments; nurse and health care assistant's appointments are available up to 6 weeks in advance. The service also offered 'same day' phlebotomy appointments.

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, facilitating timely diagnosis and support for patients with dementia, patient participation, immunisations and unplanned admission avoidance.

The practice is a training practice and also offers placements to medical students 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 website.

Patient Age Distribution

% aged 0 to 4 years: 8% - higher than the national England average.

% aged 5 to 14 years: 12.6% - higher than the national England average.

% aged under 18 years: 16.1% - higher than the national England average.

Detailed findings

% aged 65+ years: 13.6%

% aged 75+ years: 7.1%

85+ years old: 2.1%

Patient Gender Distribution

Male patients: 49.57 %

Female patients: 50.43 %

Other Population Demographics

% of Patients in a nursing Home: 0.4 %

% of Patients from BME populations: 4.08 %

All GP practices across Bristol Clinical Commissioning Group (CCG) are engaged in contract reviews with NHS England. There is a wide disparity across practices in funding terms of income per patient, and this exercise will put in place a process over the next five years to equalise the per patient rate across the 55 Practices in the Bristol CCC area.

The practice is in South Bristol which has the highest number of people with a long term health problem or disability in each age category in Bristol and the highest % of long term conditions.

Why we carried out this inspection

We carried out a focused inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of

our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

How we carried out this inspection

We carried out an announced comprehensive inspection at Grange Road Surgery

on 24 November 2015. Following our comprehensive inspection overall the practice was rated as good with requires improvement for the safe domain. Following that inspection we issued a requirement notice. This notice was issued due to a breach of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, Safe care and treatment. The requirement notice was for the practice to implement the necessary changes to ensure patients who used the service were protected against any risks associated with the safe management of the medicines, checking of emergency equipment and the safe management of blank prescriptions.

We undertook this focused inspection on 25 August 2016 and visited the practice to follow up the requirement notices for breaches of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, Safe care and treatment to ensure patients who used the service were safe.

Are services safe?

Our findings

Overview of safety systems and processes

- On our inspection in November 2015, we had found the practice held a small stock of medicines that required extra checks and special storage arrangements because of their potential for misuse (controlled drugs) and we looked at how they were managed. We observed that the cabinet in which the controlled drugs were stored also contained other medicines. Access should only have been by a person authorized to possess the controlled drug, or their authorized representative, but we found the keys were not kept securely and were not under the direct control of a responsible person. We looked at the record of the medicines and found it took the form of a hand written bound notebook kept on top of the medicine cupboard and was not stored securely. We had also found there was no written policy or procedure for the safe storage and recording of medicines held at the practice, and the records for stock and emergency medicines did not reflect in full what was kept.
- On this visit we found the practice had written and implemented a new policy for the safe management of medicines held at the practice. We checked this had been implemented by undertaking spot checks of the system and reviewing the records held. We found the system reflected what stock was held and there was an audit trail of medicines used in the practice. The practice had purchased a controlled drug register which was stored securely. The controlled drugs had been reviewed and reduced so that there was minimum amount of stock held on the premises. No other medicines were held within the controlled drug cabinet. The keys were held securely and access to them was limited to the senior nurse on duty.
- At our last visit we had reviewed the arrangements at the practice for the security of prescriptions and the implementation of the 'Security of prescription forms guidance' (Updated August 2015) issued by NHS Protect. We found that the stocks of prescription forms were locked away; however the staff working in reception had access to the cupboard. We found there was no authorisation procedure implemented regarding access to the prescriptions. We saw the prescription pads for GPs and the serial numbers of Drug Misuse instalment prescriptions (blue prescriptions) were not recorded by the practice and therefore they had no audit trail in the event of any security incident.
- On this visit we found the practice had written and implemented a new policy for the management of prescription computer paper, pads and blue prescriptions. This included limiting access to the cupboard by storing the keys in a coded safe whose combination was only known to a limited number of staff. Clinical staff had no access to the cupboard. The practice had introduced a new system of recording serial numbers and ensuring that when they were distributed around the practice they were recorded by number and room. The prescription pads were stored separately and each pad had its own record sheet. When needed prescriptions were issued singly and recorded so that they could then be cross checked on patient records. All blue prescriptions were recorded individually with patients signing on collection from the practice.

These new systems demonstrated safe practice and implementation of best practice guidance.

Arrangements to deal with emergencies and major incidents

- At our last inspection we had found the checking procedures for the emergency equipment did not record specifically what had been checked; abbreviations for equipment were used such as 'PO' for pulse oximeter. We did not see any record of expiry dates for equipment or medicines.
- On this visit we found the record keeping had been reviewed and items were individually documented on sheets with expiry dates and the signature of the person who had completed the check.