

# Mendip Country Practice

## Quality Report

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Radstock

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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 of Mendip Country Practice on 20 September 2016. The practice was rated as requiring improvement for providing safe services; and was rated as good for providing effective, caring, responsive and well-led services. As a result, the practice was given an overall good rating. Following the comprehensive inspection we issued a requirement, due to a breach of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, relating to safe care and treatment.

Within our last inspection report we stated that the provider must:

- Ensure proper and safe management of medicines including arrangements for temperature checks of vaccine storage and action where temperatures are found to be outside the acceptable range.
- Ensure patients are kept safe by staff who had a Disclosure and Barring Service (DBS) check to act as chaperones; and arrangements are understood and consistently applied by all staff.

In addition, we stated that the provider should:

- Review arrangements to assess areas of 'near misses' in the dispensary in order to identify trends and take action to prevent, where possible, future occurrences.
- Review health and safety arrangements for use of cryogenic substances.
- Review arrangements to ensure all staff receive regular appraisals.

The full comprehensive report on 20 September 2016 inspection can be found by selecting the 'all reports' link for Mendip Country Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a focused follow-up inspection of the practice on 8 August 2017. The inspection was to confirm that the practice had implemented its action plan to meet the legal requirements in relation to the regulatory breaches that we identified in our previous inspection on 20 September 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 areas we inspected during this follow-up inspection. We saw documentary and other evidence that:

- The practice had a record of appropriate actions to be taken if vaccine fridge temperatures were outside the acceptable range.

# Summary of findings

- The practice reviewed its chaperone policy so that only trained staff with a Disclosure and Barring Service (DBS) check would act as patient chaperones. When we spoke to staff who act as chaperones, arrangements were understood and consistently applied.
- The practice monitors and records 'near misses' in the dispensary in order to identify trends and take action to prevent future occurrences.
- A Control of Substances Hazardous to Health (CoSHH) risk assessment was in place for cryogenic substances.
- The practice reviewed arrangements to monitor and ensure that all staff received a regular annual

appraisal. During our focused follow up inspection, we saw documentary evidence that appraisals for all staff were completed before the end of 2016, or were scheduled for completion in 2017. We saw the practice had a system in place to monitor when appraisals were due.

Following this inspection the practice was rated as good across all domains, and its overall rating remained unchanged.

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 8 August 2017, we found:

- Medicines including the required arrangements for temperature control of vaccine storage were managed appropriately.
- The provider had reviewed their chaperone policy in 2016 so only trained staff with a Disclosure and Barring Service (DBS) check would act as patient chaperones. When we spoke to members of staff, arrangements were understood and consistently applied.
- Documentary evidence that the provider had monitored and recorded 'near misses' in the dispensary in order to identify trends and take action to prevent, where possible, future occurrences.
- Documentary evidence of a Control of Substances Hazardous to Health (COSHH) risk assessment for cryogenic substances.
- The provider had reviewed arrangements to monitor and ensure all staff had received a regular annual appraisal.

**Good**



# 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 services as identified at our inspection on 8 August 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 services as identified at our inspection on 8 August 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 services as identified at our inspection on 8 August 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 services as identified at our inspection on 8 August 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 services as identified at our inspection on 8 August 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 services as identified at our inspection on 8 August 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Mendip Country Practice

## Detailed findings

### Our inspection team

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

Our focused inspection was completed by a CQC Lead Inspector.

## Background to Mendip Country Practice

Mendip Country Practice is located in Coleford, near Radstock, Somerset. The practice serves a local, mostly rural population of approximately 5300 patients from the village and surrounding area. The practice participates in the Somerset Practice Quality Scheme (SPQS), instead of QOF, including services under the brand 'Your Health and Wellbeing Mendip'. The practice operates a dispensary on site and participates in the Dispensary Services Quality Scheme (DSQS).

The address is:

Mendip Country Practice  
Church St  
Coleford  
Radstock,  
Somerset  
BA3 5NQ

There is parking on site, including spaces for patients with a disability and unrestricted parking on adjacent road. The practice has a number of rooms which it makes available to other services, including Health Connections Mendip.

Mendip County Practice has five GPs, four of whom are partners. Between them they provide 31 GP sessions each week and are equivalent to 3.9 whole time employees (WTE). Three GPs are female and two are male. A new partner had joined the practice in May 2016; however, we had not yet received the required Application to include the partner in the CQC Registration. The provider was reminded of their responsibility to submit the required registration change application to the Care Quality Commission and this was subsequently received.

There are two practice nurses, whose working hours are equivalent to 1.6 WTE, including a non-medical prescriber who offers seven sessions per week. Two health care assistants are also employed by the practice with combined hours of 1.3 WTE. The GPs and nurses are supported by 21 management and administrative staff including a practice manager and a deputy/IT lead. The practice also employs a clinical prescribing pharmacist for two sessions per week.

The practice patient population is expanding and has slightly more patients between the age of 40 and 74 years; and slightly less patients between the age of 20 and 39 years than the national averages. Approximately 22% of the patients are over the age of 65 years compared to a national average of 17%.

Approximately 56% of patients have a long standing health condition compared to a national average of 54%. Patient satisfaction scores are high with 93% of patients describing their overall experience at the practice as good compared to a national average of 85%.

The general Index of Multiple Deprivation (IMD) population profile for the geographic area of the practice is in the fourth least deprivation decile. (An area itself is not deprived: it is the circumstances and lifestyles of the people living there that affect its deprivation score. It is important to remember that not everyone living in a

## Detailed findings

deprived area is deprived and that not all deprived people live in deprived areas). Average male and female life expectancy for the area is in line with the national average of 79 and 83 years respectively; and for males, is one year less, than the Clinical Commissioning Group average.

The practice is open between 8am and 6.30pm Monday to Friday, with early access from 6.45am on Tuesdays. Appointments are available from 9am and emergency telephone access is available from 8.30am. Extended hours appointments are offered on Tuesdays, from 7am and the practice also offers telephone consultations. The practice operates a mixed appointments system with some appointments available to pre-book and others available to book on the day.

GP appointments are 10 minutes each in length and appointment sessions are typically 9am until 12pm and 2pm until 6pm. Each consultation session has 18 appointment slots. The practice offers online booking facilities for non-urgent appointments and an online repeat prescription service. Patients need to contact the practice first to arrange for access to these services.

The practice has a General Medical Services (GMS) contract to deliver health care services; the contract includes enhanced services such as childhood vaccination and immunisation scheme, facilitating timely diagnosis and support for patients with dementia and minor surgery services. An influenza and pneumococcal immunisations enhanced service is also provided. These contracts act as the basis for arrangements between the NHS Commissioning Board and providers of general medical services in England.

The practice is a teaching and training practice and three registrar GPs were in placed at the time of our inspection.

The practice also hosts placements for medical students. Four of the GPs are GP trainers and this provides training resilience when one of the training partners is away. The practice has opted out of providing out-of-hours services to their own patients. Patients are directed to this service by the practice outside of normal practice hours.

### Why we carried out this inspection

We undertook a focused follow-up inspection of Mendip Country Practice on 8 August 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 8 August 2017.

During our site visit we:

- Spoke with the practice manager, a GP partner and other staff such as receptionists.
- Reviewed a range of documents, such as those relating to risk assessments, staff appraisals and procedures for vaccine storage.

# Are services safe?

## Our findings

At the last comprehensive inspection of Mendip Country Practice on 20 September 2016 we rated the practice as requires improvement for safe services.

Within our last inspection report we stated that the provider must:

- Ensure proper and safe management of medicines including arrangements for temperature checks of vaccine storage and action where temperatures are found to be outside the acceptable range.
- Ensure patients are kept safe by only using trained and DBS checked staff to act as chaperones; and that chaperone arrangements are understood and consistently applied.

In addition, we stated that the provider should:

- Review arrangements to assess areas of 'near misses' in the dispensary in order to identify trends and take action to prevent, where possible, future occurrences.
- Review health and safety arrangements for use of cryogenic substances.

These arrangements had improved when we undertook a focused follow-up inspection on 8 August 2017. The practice is now rated as good for providing safe services.

### Overview of safety systems and processes

During our focused follow-up inspection on 8 August 2017 we saw that a data logger, which provided a six-hourly record of storage temperatures, was fitted to all practice vaccine fridges. We saw that readings were then relayed to

the practice computer system, and a daily written record of temperatures provided a further check. An updated policy and procedure for the storage of vaccines (November 2016) included clear guidance to staff on action to be taken if temperatures were not within the acceptable range.

### Safe track record and learning

During our focused follow-up inspection on 8 August 2017 we saw:

- Documentary evidence that the provider had reviewed their chaperone policy to ensure that only staff with a DBS check would act as chaperones. The practice arranged chaperone training for all relevant staff, and we spoke with a member of staff who demonstrated that arrangements were understood and consistently applied.
- The practice monitored medicines incidents or 'near misses' and a written record of discussions was now included in a log book. We saw documentary evidence that near miss incidents were discussed monthly, investigated, and appropriate actions taken to minimise the chance of similar errors occurring again. The practice provided evidence that no similar errors had occurred again since the last comprehensive inspection.

### Monitoring risks to patients

During our focused follow-up inspection on 8 August 2017, we saw documentary evidence of a COSHH risk assessment for the use of liquid nitrogen, a cryogenic substance used by the practice. The risk assessment covered all areas: for example, the use, storage, decanting and transportation of liquid nitrogen.