

Wickhambrook Surgery

Quality Report

Boyden Close
Nunnery Green,
Wickhambrook,
Suffolk,
CB8 8XU

Tel: 01440820140

Website: www.wickhambrooksurgery.nhs.uk

Date of inspection visit: 20 February 2017

Date of publication: 16/03/2017

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

Are services safe?

Good



Summary of findings

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3
Areas for improvement	4

Detailed findings from this inspection

Our inspection team	5
Background to Wickhambrook Surgery	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

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

This inspection was a desk-based review carried out on 20 February 2017 to confirm that the practice had addressed concerns identified at our previous inspection on 6 June 2016. This report covers our findings in relation to improvements made since our last inspection.

In June we identified that the practice needed to improve in the following areas:

- Review and implement processes relating to consumable expiry date checks.

In June, we also found areas where improvements should be made:

- Review actions put in place after significant events.
- Regularly review fire safety arrangements.

- Review the cleaning schedule to ensure all relevant areas of the practice are included.
- Ensure staff are up to date with infection control training.
- Monitor the recently introduced system to track prescription pads to ensure it remains effective.
- Ensure robust process for completing recruitment checks prior to employment of locum GPs.

The practice provided evidence of work they had undertaken to deliver improvements. The practice had decided to organise an external review of their fire safety and had attempted to arrange a schedule of deep cleaning with an external company. This was ongoing at the time of this inspection.

The areas where the provider should still make improvements are:

- Ensure that evidence of fire safety checks are maintained.
- Review the cleaning schedule to ensure all relevant areas of the practice are included.

The practice is now rated as good for providing safe services.

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.

Good



- The practice had a process in place to check that consumable items were within their expiry dates. Stock checks and spot checks were undertaken monthly.
- There was an effective system in place for reporting, recording learning from and checking that identified actions had been completed following significant events to further reduce the risk of the significant event occurring again.
- The practice had a locum appointment protocol which detailed the employment checks that would be undertaken for locum GPs.
- There was a tracking process in place for prescription stationery which identified which stationery had been taken, by whom and for which patient.
- Infection control and prevention training had been arranged for April 2017.
- The practice had decided to organise an external review of their fire safety and had attempted to arrange a schedule of deep cleaning with an external company. This was ongoing at the time of this inspection.

Summary of findings

Areas for improvement

Action the service SHOULD take to improve

The areas where the provider should still make improvement are:

- Ensure that evidence of fire safety checks are maintained.
- Review the cleaning schedule to ensure all relevant areas of the practice are included.

Wickhambrook Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

This desk based review was completed by a CQC lead inspector.

Background to Wickhambrook Surgery

The Wickhambrook Surgery is situated in Wickhambrook, Suffolk. The practice provides services for approximately 4450 patients. They hold a General Medical Services contract with NHS West Suffolk CCG.

The most recent data provided by Public Health England showed that the patient population has a higher than average number of patients aged between 45 and 85, and a lower than average number of patients aged between one to 44 compared to the England average. The practice is located within an area of low deprivation.

The practice has three partners, two male and one female, a salaried GP (female) and one trainee GP. The team includes two practice nurses, one healthcare assistant/phlebotomist. The clinical staff are supported by a team of dispensary, administration and reception staff who are led by a practice manager. At the time of inspection, the practice was open between 8.00am to 6.30pm Monday to Friday. GP appointments were available every day between the hours of 9.00am to 11.30am and 3.30pm to 6.00pm whilst nurse appointments were available every day between 9.00am to 11.30am and 3.00pm to 5.30pm. Extra appointments were available through Suffolk GP+

after practice opening hours until 9.00pm during the week and also between the hours of 9.00am and 2.00pm at the weekends. Care UK provides out of hours GP services at all other times.

Why we carried out this inspection

We undertook a comprehensive inspection of Wickhambrook Surgery on 6 June 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 on June 2016 can be found by selecting the 'all reports' link for Wickhambrook Surgery on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Wickhambrook Surgery on 20 February 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

We carried out a desk-based focused inspection of Wickhambrook Surgery on 20 February 2017. This involved reviewing evidence provided by the practice in relation to stock checking processes, significant events, management of blank prescription forms and the locum appointment protocol. We spoke with the practice manager to update us on the other actions identified in the 6 June 2016 inspection.

Are services safe?

Our findings

At our previous inspection on 6 June 2016, we rated the practice as requires improvement for providing safe services. Although risks to patients who used services were assessed, some of the systems and processes to address these risks were not robust to ensure patients were kept safe.

- The practice did not ensure dressings were within their expiry date.
- Actions put into place as a result of significant events were not always reassessed.
- Evidence relating to recruitment checks for locums was not available, although this was provided after the inspection.
- Blank prescription pads, although stored and receipted correctly, were not accurately tracked outside of the dispensary.
- Fire safety arrangements should be regularly reviewed.
- Staff should be up to date with infection control training.
- Review the cleaning schedule to ensure all relevant areas of the practice are included.

These arrangements had improved when we undertook a follow up inspection on 20 February 2017. The practice is now rated as good for providing safe services.

The practice sent copies of completed stock checks for the dressing trolley, resuscitation trolley, utility, hall and treatment room cupboards and GP rooms. These had been undertaken on a monthly basis. Spot checks had also been completed on a monthly basis.

The practice had an effective system in place for reporting and recording significant events. We reviewed two

significant events submitted by the practice. These showed that reviews had been undertaken following the significant events, to check that identified actions to reduce the risk of the significant event occurring again, had been completed.

The practice submitted a locum appointment protocol which we reviewed. This detailed the pre-employment checks that would be carried out for new locum GPs, for example references, General Medical Council registration and a Disclosure and Barring Service check, (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). It also included the information contained in the GP locum information pack.

Blank prescription forms were held securely on arrival in the dispensary and records were held of the serial numbers of the forms received. Staff had a process for tracking prescription stationery through the dispensary. The practice had recently introduced a system to track prescription pads outside of the dispensary. We reviewed the standard operating procedure for logging prescription forms which was created in July 2016. We viewed a copy of the log of the prescription paper, which showed the date the prescription paper was taken, the corresponding number and the number of the patient for which it was used.

Some of the areas where the provider should make improvements had not been completed, although they had been planned for. The practice manager advised that the practice had agreed to commission an external review of their fire safety arrangements. The practice had also attempted to source an external cleaning company who would be able to undertake a schedule of deep cleaning. This had not been satisfactory and the practice felt it may be due to their rural location. They planned to continue to pursue this. The infection control and prevention training had been arranged for April 2017.