

Castlefields Surgery

Quality Report

Castle Way,
Stafford.

ST16 1BS

Tel: 01785 223012

Website: www.castlefieldssurgery.nhs.uk

Date of inspection visit: 12 June 2017

Date of publication: 04/07/2017

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

Contents

Summary of this inspection

Overall summary	Page 2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Castlefields Surgery	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We previously carried out an announced comprehensive inspection at Castlefields Surgery on 20 April 2016. The overall rating for the practice was as 'Good' with requires improvement in providing a safe service. The full comprehensive report on the 20 April 2016 inspection can be found by selecting the 'all reports' link for Castlefields Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 12 June 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations identified in our previous inspection on 20 April 2016. This report covers our findings in relation to those requirements.

Overall the practice is rated as Good.

Our key findings were as follows:

- Patient Group Directives (PGDs) were up to date and current.
- Appropriate checks were undertaken to ensure vaccines are always stored in line with manufacturers' guidelines.
- The nursing roles were clearly defined.

However, there were also areas of practice where the provider needs to make improvements.

- Improvements were needed in how patients who were carers were identified and recorded.

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.

- Patient Group Directives (PGDs) were up to date and current.
- Appropriate checks were undertaken to ensure vaccines are always stored in line with manufacturers' guidelines.
- The nursing roles were clearly defined.
- Improvements were needed in how patients who were carers were identified and recorded.

Good



Castlefields Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser.

Background to Castlefields Surgery

Castlefields Surgery is registered with the Care Quality Commission (CQC) as a partnership provider. The practice holds a Primary Medical Services contract with NHS England. At the time of our inspection the practice was caring for 6,449 patients. The practice is situated in Stafford, and is part of the NHS Staffordshire and Surrounds Clinical Commissioning Group. Car parking, (including disabled parking) is available at this practice. The practice area is one of more deprivation when compared with the local average, although lower than the national average. The practice also provides a GP service to a local care home of approximately 40 patients.

The practice is a teaching practice and supports medical students. The practice also works with the research department of Keele University and is a practice that supports nurse training which commenced in April 2017.

The practice team comprises of:

- Four GP partners (one male and three females).
- A lead nurse practitioner, a practice nurse and a healthcare assistant/phlebotomist
- A practice manager
- Clinical Co-ordinator

- Reception manager and a team of reception and administration staff.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8am to 12.30pm every morning and 3.30pm to 5.40pm daily. Extended hours surgeries are offered at 7am on two mornings per week. When the surgery is closed the phone lines are switched to an answering machine message that instructs patients to dial 111 or 999 if it was an emergency. Out of hours care is provided by Staffordshire Doctors Urgent Care Ltd.

The practice is one of five member GP practices that now form the Stafford Primary Care Health Alliance. They have collaborated on several joint work streams with the aim of redesigning the way they provide services for their community. All five practices are on the same clinical system and at the weekend have access to an overarching EMIS system which allows GPs and Nurses access to all the patients' records (with appropriate data sharing agreements in place). The practices all belong to the local GP Federation, (which covers all GP practices in Stafford and Cannock CCGs). They are able to augment their capacity and capability by utilising services currently being delivered by the GP Federation via the Prime Ministers GP Access Fund.

Why we carried out this inspection

We previously undertook a comprehensive inspection of Castlefields Surgery on 20 April 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good with requires improvement in providing a safe service. The full comprehensive report following the inspection on 20 April 2016 can be found by selecting the 'all reports' link for Castlefields Surgery on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up focused inspection of Castlefields Surgery on 12 June 2017. This inspection was carried out to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

Before our inspection we reviewed a range of information we held about the practice.

During our inspection we:

- Spoke with the practice manager, a GP partner, a lead nurse and healthcare assistant.
- Reviewed an anonymised sample of the treatment records of patients.
- Looked at information the practice used to deliver care and treatment.

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 20 April 2016, we rated the practice as requires improvement for providing safe services. This was because:

- Some Patient Group Directives (PGDs) were not up to date and current.
- Appropriate checks were not always undertaken to ensure vaccines are always stored in line with manufacturers' guidelines.
- The nursing roles were not clearly defined.
- Improvements were needed in how patients who were carers were identified and recorded.

We issued a requirement notice in respect of the PGDs and vaccines and found arrangements had significantly improved when we undertook a follow up inspection of the service on 12 June 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

A system was in place to ensure that Patient Group Directives (PGDs) were up to date and current. The lead nurse demonstrated that signed paper copies of the PGDs were cross referenced with those agreed and signed off by the Clinical Commissioning Group. Staff who administered vaccines could demonstrate how they stayed up to date with changes to the immunisation programmes, for example by access to on line resources and discussion at practice meetings. Nursing staff knew where to locate the PGDs. The healthcare assistant worked under Patient

Specific Directives (PSDs). We saw that there was an auditable system in place for the safe administration of vaccines. For example, documenting in the patient records the vaccine batch number, expiry date and area on the patient's body in which the vaccine was administered.

Appropriate checks were undertaken to ensure vaccines were stored in line with manufacturers' guidelines. We saw that appropriate temperature checks were completed, recorded and signed by staff. Staff had protocols in place to ensure safe transportation of vaccines should they be required for example at a care home or a patient's own home.

The lead nurse practitioner, nurse and healthcare assistant were clear of their roles and responsibilities. The lead nurse had been in receipt of a job description and described their evolving role as they gained further qualifications, skills and experience.

The practice had identified 41 people as carers (0.6% of the practice list). The reception staff were responsible for maintaining the carers register. A carer's identification form was kept in the patient information file in the waiting area so that the practice could identify and support any newly identified carers. Written information was available to direct carers to the various avenues of support available to them. Carers were offered services such as NHS Health checks, flu vaccinations and a signposting service to carer groups. The numbers of carers registered at the practice had reduced from 52, to 41 since the last inspection 20 April 2016. The practice had awareness of the need to continue to focus on ensuring their carer register reflected the number of patients on their patient list who were carers.