

# St Lukes Surgery

## Quality Report

St Luke's Close  
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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 a focused follow up inspection of St Lukes Surgery on 1 December 2016. This inspection was performed to check on the progress of actions taken following an inspection we made on 18 November 2014. These included;

- Having effective recruitment procedures to ensure all necessary checks are made prior to a new member of staff commencing employment. This included obtaining satisfactory information for locum GPs.
- Recording medicine refrigerator temperatures as specified in the practices policy.

Following the inspection in November 2014 the provider sent us an action plan which detailed the steps they would take to meet their breaches of regulation. During our latest inspection on 1 December 2016 we found the provider had made the necessary improvements in delivering safe services.

This report covers our findings in relation to the requirements and should be read in conjunction with the comprehensive inspection report published in March 2015.. This can be done by selecting the 'all reports' link for St Lukes Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk) .

Our key findings across the areas we inspected in this focused follow up inspection were as follows:

- There were now effective recruitment procedures ensuring that all necessary checks were made prior to a new member of staff commencing employment. This included obtaining satisfactory information for locum GPs.
- Patient safety was improved through the monitoring of medicine refrigerator temperatures, which was monitored and recorded daily.

**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 inspection on 18 November 2014, we found the provider needed to make improvements to ensure patients were supported safely. For example;

- The practice did not have effective recruitment procedures to ensure that all necessary checks are made prior to a new member of staff commencing employment. This included obtaining satisfactory information for locum GPs.
- Medicine refrigerator temperatures were not recorded as specified in their own policy.

Significant improvements had been made since the previous inspection. The practice is now rated as good for providing safe services. For example;

- There were now effective recruitment procedures ensuring all necessary checks were made prior to a new member of staff commencing employment. This included obtaining satisfactory information for locum GPs.
- Patient safety was improved through the monitoring of medicine refrigerator temperatures, which were monitored and recorded daily.

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

We did not inspect the population groups as part of this inspection. However, the outcomes we found when inspecting the Safe domain means the rating for this population group is unchanged as Good.

Good



### People with long term conditions

We did not inspect the population groups as part of this inspection. However, the outcomes we found when inspecting the Safe domain means the rating for this population group is unchanged as Good.

Good



### Families, children and young people

We did not inspect the population groups as part of this inspection. However, the outcomes we found when inspecting the Safe domain means the rating for this population group is unchanged as Good.

Good



### Working age people (including those recently retired and students)

We did not inspect the population groups as part of this inspection. However, the outcomes we found when inspecting the Safe domain means the rating for this population group is unchanged as Good.

Good



### People whose circumstances may make them vulnerable

We did not inspect the population groups as part of this inspection. However, the outcomes we found when inspecting the Safe domain means the rating for this population group is unchanged as Good.

Good



### People experiencing poor mental health (including people with dementia)

We did not inspect the population groups as part of this inspection. However, the outcomes we found when inspecting the Safe domain means the rating for this population group is unchanged as Good.

Good



# St Lukes Surgery

## Detailed findings

### Our inspection team

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

Our inspection team was led by a CQC Lead Inspector.

## Background to St Lukes Surgery

St Luke's Surgery, also known as St Luke's and Botley Surgeries, is situated at St Luke's Close, Off Shamble Lane South, Hedge End, Southampton. SO30 2US. A branch surgery is provided at Botley Health Centre, Mortimer Road, Botley, SO32 2UG. The practice is open at 8am to 6.30pm Monday to Friday, at the St Luke's Surgery site. Botley Road Surgery site is open on Monday to Friday 8.30am to 12.30pm and on Wednesdays open in the afternoons between 3pm and 6pm. Patients are able to arrange appointments at either practice, GPs and nurses work across both sites.

The practice has approximately 12,700 registered patients and has a higher number of patients aged between 35 and 49, when compared to the England average. There are also a higher percentage of young patients aged between 0 and 14 years old. The mix of patients' gender (male/female) is almost equal.

The practice operates from a purpose built premises and currently has three GP partners and two salaried GPs. One of whom is male and four of whom are female. In addition to GPs there are three nurse practitioners and three practice nurses. The practice also employs two health care assistants and a phlebotomist. GPs and nurses are supported by a practice manager and reception and administration staff. The majority of staff work part time.

The practice has a General Medical Services (GMS) contract. The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities. It has opted out of providing out of hours service to their own patients and refers them to another provider.

## Why we carried out this inspection

We carried out this inspection 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, and to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014. We visited the practice and reviewed documentation and checked on the progress of actions taken following the comprehensive inspection we completed in November 2014.

We inspected the practice, in part, against one of the five questions we ask about services; is the service safe? This is because the service had previously not met one regulatory requirement. At our previous inspection in November 2014 the effective, caring, responsive and well led domains were rated as good. Therefore, these domains were not re-inspected at this focused follow up inspection.

## How we carried out this inspection

We carried out an inspection of the practice, reviewed records and interviewed key staff.

# Are services safe?

## Our findings

At our inspection in November 2014 we found that the provider needed to make improvements. For example;

- The practice did not have effective recruitment procedures to ensure all necessary checks were made prior to a new member of staff commencing employment. This included obtaining satisfactory information for locum GPs.
- Medicine refrigerator temperatures were not recorded as specified in the practices policy.

Significant improvements had been made since the previous inspection. The practice is now rated as good for providing safe services. For example;

- There were now effective recruitment procedures ensuring all necessary checks were made prior to a new member of staff commencing employment. This included obtaining satisfactory information for locum GPs.
- Patient safety was improved through the monitoring of medicine refrigerator temperatures, which were monitored and recorded daily.

The practice had introduced a new protocol for recruiting locum staff. We saw evidence that all of this protocol was

followed for all locum staff who had been engaged to work at the practice since November 2014. We reviewed three personnel files and found appropriate recruitment checks had been undertaken prior to employment. For example, proof of identification, references, qualifications, registration with the appropriate professional body and the appropriate checks through the performer list and Disclosure and Barring Service (DBS). This meant patients were cared for by appropriately screened clinical staff.

The practice had created a new form which was signed and dated by staff each time the refrigerator temperature checks were made. We looked at 12 months records of these, all of which were completed daily. The practice manager told us that a data logger (a backup device to record internal fridge temperatures) was used, which we saw in place. The day before the inspection it had been reported that the higher temperature reading of the fridge thermometers was slightly out of the safe range of 2-8 degrees Celsius. The practice had followed its procedure and obtained a readout of a 24 hour period from the data logger. This provided the practice with reassurance the actual internal temperature of the fridge was within the safe range. The practice manager also carried out monthly spot checks to ensure these checks were being done. We saw evidence these were being completed and as a result patient safety was improved.