

Blyth's Meadow Surgery

Quality Report

Trinovantian Way,
Braintree,
Essex,
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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



Are services effective?

Good



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out a comprehensive inspection at Blyth's Meadow Surgery on 13 February 2015. The practice was rated as good overall and in particular rated as good for effective, caring, responsive, well-led services and requires improvement for safe service.

During the inspection on 13 February 2015 we found that;

- The practice did not have safe medicine management procedures.
- They did not have robust controlled drugs stock control.
- No controlled drugs disposal arrangements.
- They did not follow the practice policy for the safe disposal of medication.

The practice were issued with a requirement notice for improvement.

There were also areas we told the practice they should address to improve safety.

We found:

- Risks to patients were not assessed appropriately or recorded.

- Complaints were not being reviewed to detect recurrent themes or trends.
- Meeting minutes were not recorded or made available to staff members.

Following the previous inspection the practice sent us information about the actions they would take and when they would be implemented.

We then carried out a focused inspection at Blyth's Meadow Surgery 08 December 2015 to follow-up on our previous inspection and to ensure that the practice had made the required improvements.

Our key findings during this focused follow-up inspection were as follows:

- The practice had reviewed medicine management procedures and implemented changes that were effective.
- Risks to patients were assessed and well managed.
- Complaints were reviewed to detect themes and trends.
- Minutes of meetings were recorded and made available to staff.

We were therefore satisfied that the provider had made all of the improvements identified as a result of the inspection on 13 February 2015.

Summary of findings

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.

- The practice had reviewed and updated all their medicine management procedures.
- There was an effective system to report and record safety events.
- Lessons learned from safety events, concerns and complaints were shared in meetings, and recorded in minutes that were made available to staff members.
- Risks to patients were assessed recorded and well managed to provide assurance of safety.

Good



Are services effective?

As the practice was rated as good for providing effective services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Good



Are services caring?

As the practice was rated as good for providing caring services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Good



Are services responsive to people's needs?

As the practice was rated as good for providing responsive services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Good



Are services well-led?

As the practice was rated as good for providing well-led services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Good



Blyth's Meadow Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector. The team included a GP specialist advisor, a second CQC inspector, and a practice manager specialist advisor.

Background to Blyth's Meadow Surgery

Blyth's Meadow Surgery is located at Trinovantian Way, Braintree, Essex. The practice provides primary medical care to approximately 10300 patients living in the Braintree local area and holds a General Medical Services (GMS) contract.

There are four GP partners at the practice, three of which are male and one female. The GPs are supported by two practice nurses, a health care assistant, a practice manager, secretaries, administrative, and reception staff.

The practice is open Monday to Friday, from 8.30am until 6.30pm. Consultation appointments are available starting at 8.30am until 11.20am and 4pm until 6pm Monday to Friday. Home visits are available as required based upon need.

The practice has opted out of providing GP services to patients outside of normal working hours such as evenings and weekends. Outside of surgery hour's services are provided by '111' and 'Primecare' out-of-hours emergency and non-emergency treatment services. Details of how to access this out of hour's service is available within the practice on the practice website and in the practice leaflet.

Why we carried out this inspection

We inspected this service to follow-up on a previous inspection where 'the proper and safe management of medicines' was found to require improvements.

We carried out a focused inspection of Blyth's Meadow Surgery 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 was now compliant with regulation 12(2) (g) 'the proper and safe management of medicines' associated with the Health and Social Care Act 2008, and provide a rating for the practice under the Care Act 2014.

How we carried out this inspection

Before visiting, we reviewed a range of information the practice had sent us.

During our focused inspection we:

- Spoke with a range of staff including a GP partner, a nurse, administrative, and reception staff members.
- Talked with a member of the medicines management team from the local CCG that provides support to the practice.
- Reviewed policies, procedures, processes, staff understanding, and their responsibilities.

Are services safe?

Our findings

Safe track record and learning

There was an effective system in place for reporting and recording safety events.

- Staff told us the practice manager was the practice contact for any safety events and there was a recording form on the practice's computer system.
- We saw the practice analysis of safety events had been checked to ensure there were no recurrent themes.

We reviewed safety records, incident reports national patient safety alerts and minutes of meetings where these were discussed. Lessons learned from safety events, concerns and complaints were shared in meetings, and recorded in minutes that were made available to staff members. This ensured staff were aware of actions taken to improve safety in the practice was maintained.

When there were unintended or unexpected safety events, people received a truthful response with a written apology when appropriate. Those involved were also told about any actions undertaken to improve processes or prevent the same event happening again.

Overview of safety systems and processes

The practice had clear methodologies, processes and practices in position to keep people safe which included:

- The arrangements for managing medicines had been reviewed and updated in response to the issues raised during the previous inspection. The controlled drugs (CDs) protocol and procedure had been signed by all the clinical staff to show it had been endorsed by the practice. These procedures included the storage, recording, and disposal of CD's. Other medicine protocols, including the emergency drugs and vaccinations, held at the practice to keep patients safe (included obtaining, prescribing, recording, handling, storage and security).
- There were regular medicine audits carried out at the practice, with the support of the local CCG medicine management team, who visited the practice on a weekly basis to ensure prescribing was in line with best practice guidelines for safe prescribing.
- Prescription pads were securely stored and there was a system in place to monitor their use.

Monitoring risks to patients

Risks to patients were assessed and well managed.

- There were procedures in place for monitoring and managing risks to patient and staff safety. There was a current health and safety poster in the reception office and a policy for staff available. The practice had an up to date fire risk assessment and carried out fire drills. All electrical equipment had been checked to ensure it was safe to use and clinical equipment was checked to ensure it was working properly. The practice also had a variety of other risk assessments in place to monitor safety of the premises such as control of substances hazardous to health and infection control and legionella.

Arrangements to deal with emergencies and major incidents

The practice had adequate arrangements in place to respond to emergencies and major incidents.

- The practice had arrangements in place to manage emergencies. Records showed that staff had received training in basic life support.
- Emergency equipment was available including access to oxygen and an automated external defibrillator (used to attempt to restart a person's heart in an emergency). When we asked members of staff, they knew the location of this equipment and records confirmed that it was checked regularly.
- We found that emergency equipment and medicines were stored appropriately in a treatment with an appropriate sign on the door to inform staff of its location.
- The types of emergency medicines available followed published guidance. These included those for the treatment of cardiac arrest, anaphylaxis (a sudden allergic reaction) and hypoglycaemia (low blood sugar).
- There were processes in place to check emergency medicines were safe and suitable for use. All medicines we checked were in date, and safe to use.

A business continuity plan was in place to deal with a range of emergencies that may impact on the daily operation of the practice. Risks were identified, assessed and managed, these included power failure, adverse weather, unplanned

Are services safe?

staff sickness and access to the building. The document also contained relevant contact details for staff to refer to. For example, contact details of the practice electricity supplier and the number to call for emergency assistance.

Are services effective?

(for example, treatment is effective)

Our findings

As the practice was rated as good for providing effective services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Are services caring?

Our findings

As the practice was rated as good for providing caring services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

As the practice was rated as good for providing responsive services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

As the practice was rated as good for providing well-led services during the inspection on 13 February 2015 we did not need to inspect this domain during the focused inspection on 08 December 2015.