

# Portsdown Group Practice

## Quality Report

Portsdown Group Practice  
Cosham Park Avenue  
Portsmouth  
Hampshire  
PO6 3BG

Tel: 02392 009191

Website: [www.portsdowngrouppractice.co.uk](http://www.portsdowngrouppractice.co.uk)

Date of inspection visit: 9 October 2015

Date of publication: 28/01/2016

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

	Page
Overall summary	2
The five questions we ask and what we found	3
What people who use the service say	4

### Detailed findings from this inspection

Our inspection team	5
Background to Portsdown Group Practice	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced focussed desk top inspection of Cosham Park Avenue Surgery on 9 October 2015. Overall the practice is rated as good.

Our previous inspection in January 2015 had found the practice was good overall. We found that the practice required improvement in the Safe domain due to breaches of regulations relating to safe delivery of services. The practice was good for Effective, Caring and Responsive and Well Led services.

We followed up on our inspection of January 2015 to check that action had been taken to meet the minimum

standards. We have not revisited Cosham Park Surgery as part of this review because they were able to demonstrate that they were meeting the standards without the need for a visit.

Our key findings across all the areas we inspected were as follows:

- Risk assessments related to the Control of Substances Hazardous to Health (COSHH) were being carried out effectively and all cleaning procedures were robust enough to ensure control of infections in the practice.
- There was an open and transparent approach to safety and an effective system in place for reporting and recording significant events.
- Risks to patients were assessed and well managed.

**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.

- Lessons were shared to make sure action was taken to improve safety in the practice.
- The practice had clearly defined and embedded systems, processes and practices in place to keep people safe.
- Risks to patients were assessed and well managed.

**Good**



# Summary of findings

## What people who use the service say

We did not speak to patients for this desk top inspection. During our visit on 15 January 2015 we spoke with eight patients and two representatives from the friends of the practice. We reviewed 38 comments cards from patients who had visited the practice in the previous two weeks. The majority of feedback we received was positive. Although there were negative comments relating to the time patients had to wait for appointments to see their chosen GP and that GPs appeared to be rushed in consultations.

Patients we spoke to were complimentary about the practice staff team and the care and treatment they received. Patients told us that they were not rushed, that

the appointment system was adequate and staff explained their treatment options clearly. They said all the staff at the practice were helpful, caring and supportive.

Data showed that the practice was above the national average for the proportion of respondents to the GP patient survey who stated that the last time they saw or spoke to a GP; the GP was good or very good at treating them with care and concern. The practice was also above average for the percentage of patients who described their overall experience of their GP practice's fairly good or very good.

# Portsdown Group Practice

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection was conducted by a CQC Inspector who was part of the original CQC team that inspected this practice.

## Background to Portsdown Group Practice

Cosham Park Avenue Surgery, Cosham Park Avenue, Portsmouth, Hampshire, PO6 3BG is part of the Portsdown Group Practice. The group practice has been established in the Portsmouth area for many years and operates from five sites covering Portsmouth and the surrounding area. The five surgeries are located in Crookhorn Lane (Waterlooville) to the North, Cosham Park Avenue and Allaway Avenue (Paulsgrove) in the middle, Kingston Crescent, North End and Somers Town, both of which serve the Southern part of the area.

The inspection on 15 January 2015 was conducted at Cosham Park Avenue Surgery only. This practice has a patient list of about 12,000 and is contracted by the Portsmouth area Clinical Commissioning Group under a Personal Medical Services (PMS) contract.

Portsdown Group practice has a total of 23 GPs and four Nurse Practitioners. Each clinician has his or her “home” practice where they are based, which allows the group to give continuity of care wherever possible. Although patients may be offered an appointment at a practice other than their usual practice, the group were confident that the level of care received would be of the same high standard throughout the group practice. All patient records were

computerised which meant that the same information was available in each site. The practice rarely relied on locums, instead using their own GPs to cover for sickness and leave where required.

Cosham Park Surgery on the day of our inspection had a total of five partner GPs, three male and two female, and three salaried GPs, one male and two female, working a full time equivalent (FTE) total of 5.67. There were two nurse practitioners with a FTE of 1.24, nine nurses with a FTE of 2.89 and two healthcare assistants with a FTE of 1.

The group offered a variety of extended hours, routine and same day appointments across the five sites which we were told meant that patients were able to see a GP somewhere within the practice group six days per week.

The practice had opted out of out of hour’s working and this service was provided by another provider Hampshire Doctors.

## Why we carried out this inspection

At the inspection carried out on 15 January 2015, we made a requirement action in relation to Regulation 15(1) (a) and 15(2) Health & Social Care Act. 2008. (Regulated Activities) Regulations 2014.

We asked the provider to send us a report of the changes they would make to comply with the regulations they were not meeting.

How the regulation was not being met: There were various cleaning products however there was no evidence of any records relating to Control of Substances Hazardous to Health (COSHH) for them. This meant that the cleaning procedures were not robust enough.

# Detailed findings

We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

We have followed up to make sure that the necessary changes have been made and found the provider is now meeting the regulations included within this report. This report should be read in conjunction with the full inspection report.

## How we carried out this inspection

We have not revisited Cosham Park Surgery as part of this review because they were able to demonstrate that they were meeting the standards without the need for a visit.

Following the inspection the provider sent us evidence which demonstrates how Control of Substances Hazardous to Health COSHH will be monitored and cleaning processes had improved and were sustained within the practice.

# Are services safe?

## Our findings

### Cleanliness and infection control

On 15 January 2015 patients we spoke with commented positively on the standard of cleanliness at the practice. The premises and especially the nurses' treatment room appeared clean and well maintained. Work surfaces were easily cleanable and were clutter free. The room was well organised with well sited information and clean privacy curtains, sharps boxes and foot operated waste bins. We spoke with one of the nurses who clearly described the procedures in place to maintain a clean and safe working environment.

Hand washing guides were available above all sinks both in clinical and patient areas. There was a good supply of bacterial soap pump dispensers and hand towels in all areas. Personal protective equipment (PPE) such as gloves and aprons were available for staff and they were aware of when PPE should be used. There was segregation of waste.

We were told that the cleaning of the practice was divided between a small company and a self-employed person who came in and cleaned some parts of the building. The practice was not clear if there were any cleaning schedules or colour coded systems.

There were various household cleaning products with no evidence of any records relating to Control of Substances Hazardous to Health (COSHH) for them. This is the law that requires employers to control substances that are hazardous to health. A COSHH assessment concentrates on the hazards and risks from substances in the workplace.

We saw a very basic cleaning rota which did not fully specify times scales for cleaning areas and equipment to maintain an appropriate level of cleanliness.

Privacy curtains in consulting rooms were made of fabric the practice manager was unsure of when the curtains had been laundered and there were no records to show whether this had occurred or not.

On 9 October 2015 the practice was able to supply evidence of how they had improved their procedures and were now complying with the regulation.

The practice had completely reviewed its cleaning practices and had introduced a cleaning plan which had been discussed and written in line with the National Patient Safety Agency (NPSA) published National Specifications for cleanliness in the NHS.

The practice informed us they had created a cleanliness working group since 15 June 2015 which had the specific objective of implementing the specifications of the NPSA within the practice. This group would meet on a regular basis with the cleaning staff to discuss issues. A message book had been adopted for day to feedback with the cleaning staff at the same time.

The practice had implemented cleaning schedules for daily, weekly, monthly and other cleaning activities which covered the whole practice.

The number of cleaning products had been reduced and control of substances hazardous to health (COSHH) reports had been printed for all materials used and kept in a folder in each cleaning cupboard.

The practice had also produced premises spot-check cleaning templates to record each room and action any improvements required.