

Little Bushey Surgery

Inspection report

California Lane
Bushey Heath
Bushey
WD23 1EZ
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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 location

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Little Bushey Surgery on 13 November 2019 as part of our inspection programme.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected;
- information from our ongoing monitoring of data about services and;
- information from the provider, patients, the public and other organisations.

We have rated this practice as good overall.

We rated the practice as requires improvement for providing safe services because:

- The practice's systems for the appropriate and safe use of medicines, including medicines optimisation were not always comprehensive.
- Although not part of the requirement notice due to the practice's immediate actions, there were some concerns that contributed to the requires improvement rating for the safe key question. They included those relating to: staff vaccinations, carpet flooring risk assessment, the security of prescription stationery, a protocol for the healthcare assistant, and the practice's emergency medicines supply.

Please see the final section of this report for specific details of our concerns.

We rated the practice as good for providing effective, caring, responsive and well-led services because:

- Patients received effective care and treatment that met their needs. The practice routinely reviewed the effectiveness and appropriateness of the care it provided. Staff had the skills, knowledge and experience to deliver effective care and treatment.
- Staff involved patients in their care and treatment decisions and treated them with kindness, dignity and respect.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high quality, person-centred care and an

inclusive, supportive environment for staff. There was a focus on continuous learning and improvement at all levels of the practice. Where we identified any concerns during our inspection, the practice took immediate action to respond or plans of action were in place to ensure any issues were resolved.

The area where the provider must make improvements is:

- Ensure care and treatment is provided in a safe way to patients.

Please see the final section of this report for specific details of the action we require the provider to take.

The areas where the provider should make improvements are:

- Continue to strengthen policies, systems and processes for the appropriate and safe use of medicines. Especially those in relation to the prescribing of Hypnotics medicines, emergency medicines provision, Patient Specific Directions (PSDs) protocols and monitoring the use of blank prescription stationery.
- Continue to strengthen policies, systems and processes in relation to staff vaccinations, and encouraging women to attend for their cervical screening and patients to engage in national cancer screening programmes.
- Continue to take steps so that existing infection prevention and control, and health and safety risk assessment processes are strengthened.
- Take steps to improve access to the practice. This includes improving levels of patient satisfaction in relation to the National GP Patient Survey results and access to the practice for patients with a disability or mobility issues.
- Continue to identify and support carers in the practice population.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Requires improvement	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

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

Background to Little Bushey Surgery

Little Bushey Surgery provides a range of primary medical services from its premises at California Lane, Bushey Heath, Bushey, Hertfordshire, WD23 1EZ.

The practice is part of the Herts Health GP Federation extended access provision. The practice is also in the early stages of participating in a Primary Care Network (PCN). (A Primary Care Network is a group of practices working together to provide more coordinated and integrated healthcare to patients).

The provider, Dr Raja Ganguly, is registered with CQC to deliver four Regulated Activities at Little Bushey Surgery. These are: diagnostic and screening procedures; maternity and midwifery services; surgical procedures and treatment of disease, disorder or injury. Services are provided on a General Medical Services (GMS) contract (a nationally agreed contract) to approximately 6,200 patients.

The practice is within the Hertfordshire local authority and is one of 59 practices serving the NHS Herts Valleys Clinical Commissioning Group (CCG).

The practice team consists of one male senior GP, one male salaried GP, one female GP retainer, one female long-term locum GP and one male regular locum GP. There are two advanced nurse practitioners (also prescribers), two practice nurses (with one on long-term absence), a healthcare assistant, a practice manager, a business manager, and eight managerial, reception, administration and secretarial staff.

The practice serves an above average population of those aged 65 years and over. The practice population is predominantly white British and has a Black and minority ethnic (BME) population of approximately 16.1% of which most are from the south Asian community (2011 census). There is a significant Jewish community in the area. Information published by Public Health England rates the level of deprivation within the practice population as 10. This is measured on a scale of one to 10, where level one represents the highest levels of deprivation and level 10 the lowest.

An out of hours service for when the practice is closed is provided by Herts Urgent Care and can be accessed via the NHS 111 service.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>There was no proper and safe management of medicines. In particular:</p> <p>The prescribing of antibacterial medicines was above local and national averages. A clinical management plan was in place. This had not yet been effective in reducing antibacterial medicines prescribing at the practice.</p> <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>