

Morrab Surgery

Inspection report

2 Morrab Road
Penzance
Cornwall
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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

Outstanding



Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Morrab Surgery on 11 March 2015. There was one area followed up in a desktop reviewed on 26 November 2015. The overall rating for the practice was outstanding, with other ratings listed at the beginning of the report. The full comprehensive report can be found by selecting the 'all reports' link for Morrab Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 29 November 2018. The purpose of the inspection was to review actions taken by the practice to safeguard patients following a serious incident of fraudulent activity investigated by the police.

We did not rate the practice at this inspection. This will be reviewed at the next routine comprehensive inspection.

Are services well-led?

We found that this service was providing well-led care in accordance with the relevant regulations. However, there were areas of governance where improvement was required. The practice demonstrated safeguards were now in place resulting from the serious incident: Limiting prescribing and issuing of scripts for medications by authorised clinical staff only. Increased security of prescription stationary was in place. Staff had a clear understanding of their roles and responsibilities regarding patient prescriptions.

Our key findings were:

- There was immediate notification and liaison with appropriate authorities (Care Quality Commission, NHS England and Nurses, Midwife Council) after the practice was made aware of unusual prescribing activity.
- Processes were put in place limiting access within the prescribing part of the patient record system to allow only authorised clinical staff who held a prescribing qualification to prescribe medicines.

- Duty of candour requirements were followed with affected patients being informed about the incident, with records of any actions taken.
- The practice worked closely with the police during their investigation and court case.
- Risk assessments were completed for additional prescription security and locks purchased for printers to secure prescription stationary.
- Gaps were seen in governance processes where mitigating actions to reduce risks had not been followed up. The practice did not have an effective audit system to determine whether improvements and changes made were embedded. A risk assessment covering prescription security and new procedures were written within 48 hours of the inspection covering authorisation and initiation of combined oral contraception, dispensary and reception tasks regarding acute prescriptions.
- An inconsistent approach was seen regarding which process should be followed for complaints and significant events, which could be confusing and affect the governance of these processes by the practice.

The areas where the provider must make improvements are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

There were areas where the provider could make improvements and should:

- Keep policies and procedures for prescribing management under review to ensure current best practice guidance is followed to reduce risks.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Population group ratings

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser.

Background to Morrab Surgery

Morrab Surgery is located at 2 Morrab Road, Penzance, Cornwall TR18 4EL. The surgery has rail and bus links, which are limited. There is a private pharmacy co-located with Morrab Surgery. Since the last inspection a merger had taken place. The practice now had a branch surgery and dispensary at: Pendeen Surgery, Boscawell Downs, Pendeen, Penzance, Cornwall, TR19 7D. A small branch surgery at Mousehole (open on Wednesdays only).

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury. These are delivered from both sites.

Morrab Surgery is situated within the Kernow Clinical Commissioning Group (CCG) and provides services to 11289 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a partnership of three GPs who registered with the CQC in April 2013. The practice employs three salaried GPs, two nurse practitioners, four practice nurses, a visiting nurse, two health care assistants, a phlebotomist and several administration staff. The practice is not currently part of any wider network of GP practices.

The National General Practice Profile shows 97.7% patients are white with 2.3% of the population originating

from black, mixed or other non-white ethnic groups. Information published by Public Health England, rates the level of deprivation within the practice population group as three, on a scale of one to ten. Level three represents a higher level of deprivation and level ten the lowest. Male life expectancy is 76 years compared to the national average of 79 years. Female life expectancy is 83 years compared to the national average of 83 years.

The practice is open between 8am and 6:30pm Monday to Friday. Pendene surgery (Branch) has a dispensary and opening times are listed on the practice website. Patients can choose to attend any of the sites for appointments and at a time to suit them. Early and late appointments before/after surgery are offered by the practice as part of the improved access to extended services. The practice participates in rotation with other practices in the area providing pre-arranged appointments every Saturday from 9am. Outside of these times, patients access hubs based in Bodmin, Stratton, St Austell, Liskeard, Newquay, Falmouth and Truro. Staff at the practice direct patients to these access services with further information available on the practice website. Patients requiring repeat prescriptions have access to a 24 hour, 7 days a week prescription line.

The opening hours of the practice have been agreed locally under the contract. Outside of these times patients are directed to contact the out-of-hours service by using the NHS 111 number.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met.</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular we found:</p> <p>The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions were not operated effectively. Examples were:</p> <ul style="list-style-type: none">• The practice planned to fit locks to printers in the longer term but did not know the locations of greatest security risk for prescription stationary. An action to produce a protocol setting out the checks required for women who were prescribed contraception had not been completed or followed up. Audit was not routinely used to assess whether change was embedded in practice.• There was a lack of consistency in how complaints and significant events (SEA) were defined and reviewed which could have impacted governance in the identification of themes and patterns to reduce potential risks. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>