

# The Homewell Practice

## Inspection report

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[www.homewellpractice.co.uk](http://www.homewellpractice.co.uk)

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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 to people's needs?		Good	
Are services well-led?		Good	

# Overall summary

We carried out an announced inspection at The Homewell Practice (Curlew Practice) between 17 and 29 March 2022.

Overall, the practice is rated as Good.

Safe – Requires Improvement

Effective – Good

Caring – Good (carried over from the previous inspection)

Responsive – Good (carried over from the previous inspection)

Well-led – Good

Following our previous inspection in July 2019 the practice was rated Good overall and for all key questions.

## **Why we carried out this inspection**

We carried out an announced comprehensive inspection between 17 and 29 March 2022 as part of our provider monitoring programme. The full reports for previous inspections can be found by selecting the 'all reports' link for The Homewell Practice (Curlew Practice) on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## **How we carried out the inspection.**

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently. This inspection/review was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included :

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

## **Our findings**

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 found :

# Overall summary

- All staff had undertaken mandatory training appropriate to their role.
- The practice had made adjustments associated with the COVID-19 pandemic to ensure that patients were kept safe and protected from avoidable harm.
- The practice was able to demonstrate staff had the skills, knowledge and experience to carry out their roles. Staff members were appraised annually and received appropriate supervision and training.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care. The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- Staff we spoke with told us they felt supported by the management team and if they raised concerns these would be listened to and acted upon.
- The practice had an open and supportive culture, where there was a focus on improvement.

However:

- The practice did not always carry out reviews and or monitoring relating to the safe prescribing of some medicines.
- The practice's system for reviewing safety alerts was not always effective.
- The practice's system for the security of prescriptions needed to be enhanced.
- The practice did not have an active patient participation group (PPG), however, they were actively trying to recruit at the time of our inspection.

We found there was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to Safe care and treatment.

The provider must ensure care and treatment is provided in a safe way to patients. The provider **must**:

- Ensure appropriate reviews and monitoring are taking place prior to the prescribing of medicines including high risk medicines.
- Ensure there is an effective system for acting on safety alerts and for the continued monitoring of historic alerts.

In addition, the provider **should**:

- Continue to recruit to the patient participation group (PPG).
- Embed new processes for recording prescription stationary serial numbers.

**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

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to The Homewell Practice

The Homewell (Curlew Practice) is in Havant, a town to the east of the city of Portsmouth near the south coast of England. The premises building is managed by NHS Property Services and is shared with another GP surgery as well as a pharmacy and various community services. The Homewell (Curlew Practice) is located at: Havant Health Centre Civic Centre Road Havant Hampshire PO9 2AY.

The local clinical commissioning group (CCG) is NHS South Eastern Hampshire CCG. The practice is registered with the Care Quality Commission to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Diagnostic and screening procedures
- Maternity and midwifery services
- Surgical procedures
- Family planning

The practice provides health services to approximately 14,437 patients. The practice has three GP partners, five salaried GPs and one retainer GP, (a retainer GP is a GP receiving support to help them remain in general practice). There is an advanced nurse practitioner, who is also a partner in the practice, four practice nurses, a phlebotomist and four healthcare assistants.

There is a practice manager, a business manager, and a facilities manager supported by a team of receptionists led by a reception manager, and an administrative and secretarial team. The practice also employs a clinical pharmacist.

The practice is a training practice and had one GP registrar attached to the practice at the time of inspection. The practice is open between 8am and 6.30pm Monday to Friday with a lunch time closure between 1pm and 2pm. The practice also has access to the local GP Extended Access based within the Havant Health Centre from 6.30pm to 8pm Monday to Friday as well as 8am to 4.30pm on Saturdays. Patients can obtain out of hours care using the NHS 111 service.

Information published by Public Health England shows that deprivation within the practice population group is in the third lowest decile (three of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 97% White and the remaining 3% made up by Asian, Black, Mixed and Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Assessments of the risks to the health and safety of service users of receiving care or treatment were not being carried out because:</p> <ul style="list-style-type: none"><li>• We found that some patients prescribed certain high-risk medicines had not received the appropriate reviews and or monitoring prior to prescribing.</li><li>• The practice did not have an embedded system in place for acting on safety alerts and continued monitoring of historic alerts.</li></ul> <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>