

Dr Rogers and Partners

Quality Report

The Baffins Surgery
St Cuthberts Church
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Portsmouth
PO3 6BH

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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



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an inspection of Dr Rogers and Partners on the 14 September 2016. This review was performed to check on the progress of actions taken following an inspection we made in January 2015. Following the inspection in January 2015 the provider sent us an action plan which detailed the steps they would take to meet their breaches of regulation. During our latest inspection on 14 September 2016 we found the provider had made the necessary improvements.

This report covers our findings in relation to the requirements and should be read in conjunction with the report published in January 2015. This can be done by selecting the 'all reports' link for Dr Rogers and Partners on our website at www.cqc.org.uk

Our key findings at this inspection were as follows:

The practice ensured the health and safety for patients by improving the arrangements for identifying and managing risks. This included the introduction of:

- A system to monitor and manage the risks associated with legionella.
- Records kept for fire safety management.

The practice had improved the policies and processes for recruitment. This included the introduction of:

- A number of organisational changes which included a designated member of staff responsible for staff recruitment.
- A recruitment policy, generic application forms and clear documentation associated with recruitment.
- A fail safe system to obtain written references, checks of nurses registration and criminal records checks by the disclosure and barring service, (DBS).
- A policy to perform DBS checks on all reception staff
- Structured induction for staff, including locum staff.

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 ensured the health and safety for patients by improving the arrangements for identifying and managing risks. This included the introduction of:

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- A number of organisational changes which included a designated member of staff responsible for staff recruitment.
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- A policy to perform DBS checks on all reception staff
- Structured induction for staff, including locum staff.

Good



Summary of findings

What people who use the service say

We did not speak to patients at this inspection.

Dr Rogers and Partners

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection was undertaken by a CQC Inspector.

Background to Dr Rogers and Partners

We inspected the practice in January 2015 and found improvements were needed in the area of safe patient care. The provider sent us an action plan which detailed the steps they would take to meet the breaches in regulation. During our latest inspection on 14 September 2016 we found the provider had made the required improvements.

Dr Rogers and Partners, also known as Baffins Surgery is situated in St Cuthberts Church, Hayling Avenue, Portsmouth, PO3 6BH. The practice has approximately 8500 patients registered with it. The male to female patient ratio is approximately 50%. The age range of patients is in line with national averages.

There are three partners at the practice who hold managerial and financial responsibility for running the business. The partners are supported by three additional GPs, two salaried GPs and one regular locum GP (There are two male and four female and a 3.7 whole time equivalent staff (WTE). In addition to this the practice have an advanced nurse practitioner (and independent prescriber) who is full-time, a practice nurse (outreach matron) and also a practice pharmacist whose role includes medicines management. Collectively the team provide a total of 5.75 WTE.

The GPs are supported by a business manager, operations manager, registered nurses and health care assistants and a team of administration staff who carry out reception, administration, scanning and secretarial duties.

The practice has opted out of GP out of hours services which are provided by Portsmouth CCG via the 111 service.

Why we carried out this inspection

We carried out this inspection at Dr Rogers and Partners on Wednesday 14 September 2016 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 is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, and to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014. We visited the practice and reviewed documentation to check on the progress of actions taken following the comprehensive inspection we completed in January 2015.

We inspected the practice, in part, against one of the five questions we ask about services, is the service safe. This is because the service had previously not met some regulatory requirements. At our previous inspection in January 2015 the effective, caring, responsive and well led domains were rated as good. Therefore, these domains were not re inspected at this inspection. As all five domains were not inspected we were not able to rate the population groups at this visit.

Are services safe?

Our findings

At our inspection in January 2015 we found that the registered person had not carried out appropriate employment checks. For example;

- We found that not all staff, including clinical staff, acting as chaperones had a risk assessment in place to determine whether they needed a criminal records check carried out via the disclosure and barring service (DBS)
- Staff files did not contain evidence that checks of conduct in previous employment or DBS checks had been carried out.
- There were no failsafe systems in place to ensure nursing staff were registered with the nursing and midwifery council.

At this inspection in September 2016 we found;

- A number of organisational changes which included a designated member of staff responsible for staff recruitment.
- A recruitment policy, generic application forms and documentation associated with recruitment had been introduced and were being used for staff recruited since our last inspection.
- A fail safe system was now in place to obtain written references, checks of nurses Nursing and Midwifery Council registration and criminal records checks by the disclosure and barring service (DBS).
- The provider had introduced a blanket policy to perform DBS checks on all reception staff so they could be used for chaperoning sessions.

- A structured induction procedure had been introduced for staff, including locum staff.

At the inspection in January 2015 we found that the registered person did not have suitable systems in place to identify and manage risks. For example:

- There were insufficient systems in place to identify and manage the risks associated with legionella.
- Records were not maintained of fire safety systems.
- Sharps bin lids had not been securely closed.

At this inspection in September 2016 we found the practice had improved the systems which reduced the risk of unsafe care and treatment. For example,

- A system to monitor and manage the risks associated with legionella had been introduced. This had included monthly checks of the system, six monthly testing of water samples and weekly management of unused water outlets.
- Fire safety management had been improved. This included the introduction of a detailed fire safety policy, clear instruction signage in each area of the practice and the introduction of fire wardens. The practice were currently working with and communicating with the landlord and other users within the building to coordinate fire alarm testing.
- A new clinical matron was now in post and had introduced a check list for staff to use. This list included ensuring sharps bins were available and secured appropriately.