

Brookside Group Practice

Quality Report

Brookside Close, Gipsy Lane, Earley, Berkshire, RG6

Tel: 0118 929 9469

Website: www.brooksidegrouppractice.co.uk

Date of inspection visit: 28 March 2017 Date of publication: 20/04/2017

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.

D ''		
レっti		α c
кан		とっ
1 10 0	w	57

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
Detailed findings from this inspection	
Our inspection team	4
Background to Brookside Group Practice	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

Our previous comprehensive inspection at Brookside Group Practice on 29 June 2016 found breaches of regulations relating to the safe delivery of services. The overall rating for the practice was good. Specifically, we found the practice to require improvement for provision of safe services. It was rated as good for providing caring, effective, responsive and well-led services. The full comprehensive report on the June 2016 inspection can be found by selecting the 'all reports' link for Brookside Group Practice on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 28 March 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation that we identified in our previous inspection on 29 June 2016. This report covers our findings in relation to those requirements and improvements made since our last inspection.

We found the practice had made improvements since our last inspection. On the 28 March 2017 we found the practice was meeting the regulations that had previously been breached. We have amended the rating for this

practice to reflect these changes. The practice is now rated good for the provision of safe services as well as the previous rating of good for effective, caring, responsive and well led services.

Our key findings were as follows:

- Issues with emergency medicine checks and stock had been addressed. This included ensuring that all emergency medicines required were in stock and that all medicines were in date and fit for purpose.
- All medicines and equipment was in date and fit for use.
- Blank prescription forms for use in printers and handwritten pads were handled in accordance with national guidance as these were securely stored and there were systems in place to monitor their use.
- Patient Specific Directions (PSD) were used appropriately and in accordance with national guidance.
- The practice had reviewed how they identify carers to ensure they can offer effective care and support (1.04% of the practice list); this was an improvement on the previous 0.87%.

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?

When we inspected the practice in June 2016 we found risks to patients and staff were assessed and well managed in most areas, with the exception of those relating to management of emergency medicines, date checks for on-site equipment, blank prescriptions and patient specific directives (PSD).

The practice had taken appropriate action and is now rated good for the provision of safe services

- Issues with emergency medicine checks and stock had been addressed. This included ensuring that all emergency medicines required were in stock and that all medicines were in date and fit for purpose.
- Blank prescription forms for use in printers and handwritten pads were handled in accordance with national guidance as these were securely stored and there were systems in place to monitor their use.
- Patient Specific Directions (PSD) were used appropriately and in accordance with national guidance.

Good





Brookside Group Practice

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was conducted by a CQC Lead Inspector.

Background to Brookside Group Practice

Brookside Group Practice was founded in 1977 from a single handed surgery and developed into a multi-site partnership (based across three sites). It is a large urban practice with 26,800 patients. Brookside Group Practice is based in area with low unemployment and has a higher than national average GP consulting rate.

The practice population has a higher proportion of patients aged 30-59 and lower aged 60 plus, compared to the national average. There is minimal deprivation according to national data. The prevalence of patients with a long standing health condition is 48% compared to the national average of 54%.

The practice has eight GP partners and 13 salaried GPs. It currently has nine practice nurses and three health care assistants. The practice also has three pharmacists and two paramedics. There are 57 members of staff employed by the practice as patient services, administration, reception and support staff, including a practice manager and business manager. The practice is a training practice for GP Registrars. GP Registrars are qualified doctors who undertake additional training to gain experience and higher qualifications in general practice and family medicine. The practice has a General Medical Services (GMS) contract.

Brookside surgery is open for booking appointments from 8.00am - 6.30pm Monday to Friday. The Chalfont site is

open from 8.30am - 5.30pm Monday to Friday but opens at 7am on Wednesdays for a walk-in blood testing clinic and extended hours appointments. The Winnersh site is open from 8.30am - 12.30pm and 2pm - 5.30pm Monday to Friday and is closed on a Thursday afternoon. There are extended hours appointments on Tuesday, Wednesday and Thursdaybetween 6.30pm - 7.30pm at the Brookside surgery and between 7am - 8am on a Wednesday at the Chalfont surgery. The Brookside surgery is open every other Saturday morning.

There is one phone line for all three sites and this is open from 8am to 6.30pm Monday to Friday.

The practice has opted out of providing out of hours services to their patients. The out of hours service is provided by Westcall service, which is accessed by calling NHS 111. Advice on how to access the out of hours service is also detailed in the practice leaflet, on the patient website and on a recorded message when the practice is closed.

Brookside Group Practice is registered to provide services from the following locations:

Brookside Close, Earley, Berkshire, RG6 7HG

Chalfont Surgery, Chalfont Close, Lower Earley, Reading, RG6 5HZ

Winnersh Surgery, 10 Melbourne Avenue, Winnersh, RG41 5EL

The inspection team visited one of the three sites (Brookside Surgery).

This inspection is part of the CQC comprehensive inspection programme and is the first inspection of Brookside Group Practice.

Detailed findings

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 29 June 2016 and we published a report setting out our judgements. These judgements identified one breach of regulation. 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 carried out a follow up focussed inspection on 28 March 2017 to follow up and assess whether the necessary changes had been made, following our inspection in June 2016. We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection. We followed up to make sure the necessary changes had been made. We found the practice was meeting all the conditions of regulations that had previously been breached.

This inspection was planned to check whether the provider is meeting the legal requirements and regulations

associated with the Health and Social Care Act 2008. (Regulated Activities) Regulations 2014, to look at the overall quality of the service, review the breaches identified and update the ratings provided under the Care Act 2014.

How we carried out this inspection

Before visiting on 28 March 2017 the practice confirmed they had taken the actions detailed in their action plan.

Prior to the inspection we contacted the Wokingham Clinical Commissioning Group, NHS England area team and the local Healthwatch to seek their feedback about the service provided by Brookside Group Practice. We also spent time reviewing information that we hold about this practice including the data provided by the practice in advance of the inspection.

The inspection team carried out an announced focused visit on 28 March 2017.

During our visit we undertook observations of the environment and spoke with clinical and non-clinical staff.

This report should be read in conjunction with the full inspection report of CQC visit on 29 June 2016.



Are services safe?

Our findings

When we inspected the practice in June 2016 we found risks to patients and staff were assessed and well managed in most areas, with the exception of those relating to management of emergency medicines, date checks for on-site equipment, blank prescriptions and patient specific directives (PSD).

Improvements had been made and at the March 2017 inspection we found:

Overview of safety systems and processes

- The practice had appropriate stock of suitable emergency medicines, including atropine (to treat reactions to intrauterine device fitting) and naloxone (a medicine to treat adverse effects of opiates), which were both missing at the previous inspection.
- All medicines and equipment was in date and fit for use. The practice had implemented a second checking process where a nurse manager completed an audit, every three months, of all medicines.
- Blank prescription forms for use in printers and handwritten pads were handled in accordance with national guidance as these were securely stored and there were systems in place to monitor their use.
- The policy for Patient Specific Directions (PSD) had been re-iterated with staff and all vaccines were found to be given written approval by a prescriber before being administered to patients.