

Ferry Road Health Centre Quality Report

Ferry Road Rye East Sussex TN31 7DN Tel: 01797223230 Website: www.ferryroadhealthcentre.net

Date of inspection visit: 11 January 2017 Date of publication: 16/02/2017

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.

Ratings



Summary of findings

Contents

Summary of this inspection Overall summary The five questions we ask and what we found	Page
	2
	3
Detailed findings from this inspection	
Our inspection team	4
Background to Ferry Road Health Centre	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

We carried out an announced comprehensive inspection at Ferry Road Health Centre on 19 August 2016. The overall rating for the practice was Good, but breaches of legal requirements were found in the safe domain. The practice were found to be good in the effective, caring, responsive and well-led domains but required improvement in the safe domain. The full comprehensive report on the August 2016 inspection can be found by selecting the 'all reports' link for Ferry Road Health Centre on our website at www.cqc.org.uk.

At the previous inspection of August 2016 our key findings were as follows:

 The practice were not ensuring the proper and safe management of medicines. Specifically refrigerators were not being monitored daily and controlled drugs were not handled in accordance with the legislation. Additionally staff had not ensured that they were aware of the identity of their CD (controlled drugs) accountable officer and authorised witnesses. These findings were in breach of the legal requirements.

Additionally we found that:

• The practice were not ensuring that near misses (identified dispensing errors) in the dispensary were recorded.

This inspection was an announced focused inspection carried out on 11 January 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 19 August 2016. This report covers our findings in relation to those requirements and also covers additional improvements the provider has made since our last inspection. The provider was now meeting all requirements and is rated as good under the safe domain.

Our key findings were as follows:

• The practice were now ensuring the proper and safe management of medicines. Refrigerators were being monitored daily and controlled drugs were handled in accordance with the legislation. Dispensary staff were aware of the identity of their CD (controlled drugs) accountable officer. The CD accountable officer informed the practice who the authorised witnesses would be on each occasion that they put in an application to have CDs destroyed.

Additionally we found that:

• The practice had ensured that near misses in the dispensary were being recorded.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

At our previous inspection on 19 August 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of medicines management required some improvements.

At this inspection on 11 January 2017 we found that:

- The maximum and minimum temperatures of all refrigerators were monitored daily.
- Controlled drugs (CDs) were handled in line with current legislation.
- Staff were aware of the identity of their CD accountable officer. The CD accountable officer would inform the practice who the authorised witnesses would be on each occasion that they put in an application to have CDs destroyed.
- A record of dispensary 'near misses' was available (dispensing errors that are identified before the medicines leave the dispensary).

Good



Ferry Road Health Centre Detailed findings

Our inspection team

Our inspection team was led by:

The team consisted of a CQC inspector.

Background to Ferry Road Health Centre

Ferry Road Health Centre offers general medical services to the people of Rye. There are approximately 3600 registered patients. The practice is able to dispense medicines to its patients living within a one mile radius of the practice. The practice also offers some appointments at three branch surgeries.

Ferry Road Health Centre is run by a single GP (male) with the support of two session GPs (long term locums, both female). The practice is also supported by an Advanced Nurse Practitioner, three practice nurses, two health care assistants, a dispensary manager, dispensary assistant and a team of receptionists, administrative staff and a practice manager.

The practice runs a number of services for its patients including asthma, diabetes and chronic heart disease clinics, child immunisation clinics, well women clinics, anti-coagulation medicine testing, new patient checks and National Health Service health checks for 40-75 year olds. Antenatal, post-natal and six week baby checks are available. The practice also carries out minor surgical procedures on the premises.

Services are provided at:

Ferry Road, Rye, East Sussex TN31 7DN

Opening hours are Monday to Friday 8.30am to 6pm

Consultations are available at the main surgery on: Monday 8.40am to 12.10pm and 2pm to 6.20pm.

Tuesday 8.10am to 10.50pm and 1.10pm to 4.20pm.

Wednesday 9.10am to 11.50pm and 1.10am to 3.30pm

Thursday 9am to 11.50pm and 2pm to 4.50pm

Friday 8.40am to 11.50pm and 1.10pm to 4.20pm

Saturday 9am to 10.20am alternate Saturdays by pre booked appointment only.

Consultations are also available at:

Brookland Surgery Wednesday 12.30pm to 1.30pm

Winchelsea Beach Surgery Wednesday 2.30pm to 3.30pm

Camber Surgery Thursday 12.30pm to 13.30pm

When the practice is closed patients are advised by telephone message to call the NHS 111 service. This service would direct the patient to the appropriate out of hours provider. Information on how to access out of hours care was also available on the practice web site.

The practice population has a slightly lower number of patients below the age of 19 than the national average. There is also a higher percentage than both the clinical commissioning group (CCG) and national averages of patients aged 65 or more. There is a higher than average number of patients with a long standing health condition and slightly higher than average number of patients with a caring responsibility. The percentage of registered patients who have health related problems in daily life is a higher than the CCG or national averages. The percentage of registered patients suffering deprivation affecting adults is similar to that for the CCG or the national average. The percentage of registered patients suffering deprivation affecting children is just above the CCG average and higher than the national average.

Detailed findings

Why we carried out this inspection

We undertook a comprehensive inspection of Ferry Road Health Centre on 19 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and good in the effective, caring, responsive and well-led domains, but requires improvement in the safe domain. The full comprehensive report following the inspection on August 2016 can be found by selecting the 'all reports' link for Ferry Road Health Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Ferry Road Health Centre on 11 January 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

We carried out a focused inspection of Ferry Road Health Centre on 11 January 2017. During our visit we:

- Spoke with the practice manager and the dispensary staff.
- Looked at vaccine fridges and temperature recordings.
- Examined records in relation to CDs (controlled drugs) and near misses in the dispensary.

Please note that when referring to information throughout this report, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 19 August 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of medicines management required some improvements.

These arrangements had significantly improved when we undertook a follow up inspection on 11 January 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

At our previous inspection in August 2016 we found that although fridge temperatures were monitored, they were not always recorded daily. Prescriptions for repeat medicines and for controlled drugs (CDs - medicines with potential for misuse, requiring special storage and closer monitoring) were signed before dispensing and the practice held a stock of CDs. However, we found that a CD, returned from a patient, had been placed back into the stock box and entered into the register as 'returned from patient.' Staff were aware that all medicines supplied to patients, including CDs, must not be reused and should be disposed of according to waste regulations. A CD destruction kit was available. Staff were not aware of the contact details for the current CD Accountable Officer and authorised witnesses who can help in the destruction of stock CDs. We saw a number of amendments in the CD register where entries had been made in error. A CD register is a legal document and any mistakes should remain legible; the correction made should be signed and dated in the margin, or linked to a footnote at the bottom of the

page. Additionally, we were told that there had been no dispensing errors and staff did not keep records of 'near misses' (dispensing errors that are identified before the medicines leave the dispensary).

At this focused inspection in January 2017 we found that:

The dispensary fridge had been replaced with a new one. Maximum, minimum and actual temperatures had been recorded by the dispensary staff every week day and all were within the safe range of two to eight degrees centigrade. It was recorded that the thermometer had been reset and the record was signed each day. We also examined the two vaccine fridges in the nurse's room and the findings were the same. The vaccine fridges were checked by the health care assistant, but additionally the reception staff had it written in to their end of day 'to do' list to check that a recording had been made.

We saw that the provider had produced a new standard operating procedure (SOP) covering the destruction of controlled drugs on the premises. This included the name and contact details of the accountable officer. The accountable officer would allocate an authorised witness to the practice whenever they put in a request to destroy controlled drugs. Dispensary staff had access to the SOP.

There was a small quantity of controlled drugs in the safe, which tallied with the recordings in the CD register. Controlled drugs were handled in line with current legislation.

A near miss log was now maintained. We saw that near misses were discussed at practice meetings and that the practice had set a date to review all near misses for the year.