

New Inn Surgery

Quality Report

New Inn Surgery
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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

New Inn Surgery was placed into special measures following an inspection in October 2014. In order to establish if the required improvements had been made we completed a further comprehensive inspection in October 2015. Improvements to the delivery of service were evident and the practice was rated as good overall, however was rated as requires improvement for delivering safe services.

After the October 2015 comprehensive inspection, the practice sent to us an action plan detailing what they would do to meet the legal requirements in relation to the following:-

- complete regular fire drills.
- record the appropriate action taken if fridge temperatures were recorded above the recommended temperature range.
- ensure that all medicines needed to deal with emergencies were readily available.
- ensure a child oxygen mask was available.
- ensure that safe processes were in place for the management of hand written blank prescriptions.
- ensure patients notes were securely stored.

In addition the provider should:

- record when the defibrillator has been checked

We undertook this announced focused follow up inspection on 14 October 2016 to check that the provider

had followed their action plan and to confirm that they now met legal requirements. The outcome of this inspection found tht the provider was now meeting all requirements and is rated as good under the safe domain.

This report only covers our findings in relation to those requirements. We found:

- the practice had completed a fire drill in November 2015 and October 2016 and new smoke detectors had been installed.
- there were processes in place to ensure fridge temperatures were monitored. All staff were aware of these and the actions to take should an error occur.
- medicines and equipment to use in an emergency were readily available including the availability of a child oxygen mask.
- safe processes were in place for the management of hand written blank prescriptions
- patient's notes were stored securely.

In addition we saw evidence that the provider had:

- undertaken and recorded monthly checks of to ensure the defibrillator was in good working order.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at www.cqc.org.uk

Summary of findings

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 is rated as good for providing safe services.

At our last inspection, undertaken on 20 October 2015, the practice was rated as requires improvement for providing safe services, as there were areas where it needed to make improvements.

Previously we found that:-

- Although risks to patients who used services were assessed, some systems and processes to address these risks were not implemented well enough to ensure patients were kept safe. For example, emergency medicine management, the tracking of blank prescription pads, fire prevention
- safe processes for medicines stored in the fridge and the secure storage of patient notes.

At this inspection, we found:-

- The practice had reviewed their emergency medicines and had assessed which were required for their practice. We saw that emergency medicines were adequate and were checked monthly to ensure they were in date.
- The practice had a system for storing and tracking the use of prescriptions used either within the practice or when undertaking home visits.
- Staff had undertaken a fire drill including an evacuation of the building in November 2015 and in October 2016. This had been reviewed to ensure that no changes were required to ensure patient safety. We also noted that new smoke detectors had been installed.
- The practice had re-enforced the cold chain policy and staff were aware of the procedures to follow if the fridge temperatures exceeded the minimum or maximum range. We saw that there was clear guidance to be followed when the temperature was recorded as not within normal limits. For example, an investigation had taken place after the temperature had been seen to have increased slightly. This had been due to the fridge being re-stocked with vaccines and the door needing to be open for a longer period.
- Patient notes were stored in lockable cabinets in a staff only area and were not accessible to patients.

Good



New Inn Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

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 in October 2014 as part of our regulatory functions. This

inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014

At the October 2014 inspection the practice was placed into Special measures. A second comprehensive inspection was completed in October 2015. The practice had showed improvement and was rated good overall but rated as required improvement in providing safe services. As a result, we undertook a focused, follow up inspection on 14 October 2016 to determine whether action had been taken to deal with the previous breaches found.

Are services safe?

Our findings

Overview of safety systems and processes

At our previous inspection, we found:

- The practice had up to date fire risk assessments but had not ensured staff had practiced how to evacuate the building in the event of a fire.
- Patients' individual records were written and managed in a way to help ensure safety. However, we noted that some written patient notes were not securely stored in either a lockable cabinet or in a locked room.
- We checked medicines stored in the treatment rooms and medicine refrigerators. We noted that whilst refrigerator temperature checks were carried out, records indicated that the refrigerator had been above the recommended temperature range. There was no evidence of investigations as to why there was a temperature change or the actions taken as a result.
- There were no safe processes in place for the tracking of blank prescription pads.

At this inspection, we found that

- Staff had practiced evacuating the building in the event of a fire in November 2015 and in October 2016. Smoke detectors had been installed and staff had received fire training from an independent company in April 2016.
- All patient notes were stored in lockable cabinets in a staff only area and were not accessible to patients. Keys to these cabinets were stored in a security box that could only be accessed by a number key lock.
- Fridge temperatures were monitored daily. We reviewed records from the last three months and found the actual temperature of the fridge was recorded as well as the minimum and maximum temperatures. We saw that any temperatures outside of the required range had been

investigated and the appropriate action taken. For example, the temperature had increased slightly when the practice had received new vaccines and the fridge was being re-stocked. We saw the practice manager signed to show these had been investigated and the correct procedures followed. Staff involved in the cold chain of vaccines had reviewed their training and the policy had been updated to ensure staff followed the correct procedure.

- The practice had a system for monitoring the use of all prescriptions used including those used within the practice or when completing home visits.

Arrangements to deal with emergencies and major incidents

At our previous inspection, we found:

- There was a defibrillator and oxygen available on the premises. The nurse told us they completed monthly checks on both however, the monthly check for the defibrillator was not recorded. We noted that there was no child's mask for the oxygen.
- Emergency medicines were available in a secure area of the practice and all staff knew of their location. However, some emergency medicines were not available. There was no evidence of a risk assessment to identify which medicines the practice should stock.

At this inspection, we found that

- Monthly checks were completed and recorded for both the defibrillator and oxygen. We noted there were both adult and child masks available.
- The practice had reviewed their emergency medicines and had assessed which were required for their practice. We saw that emergency medicines were adequate and were checked to ensure they were in date.