

Pinhoe Surgery

Quality Report

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Pinhoe

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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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Pinhoe Surgery	4
Why we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We carried out a desk top review of Pinhoe Surgery on 1 August 2016. This review was performed to check on the progress of actions taken following an inspection we made on 28 November 2015. Following that inspection 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 1 August 2016 we found the provider had made the required changes.

This report covers our findings in relation to the requirements and should be read in conjunction with the report published on 3 March 2016. This can be done by selecting the 'all reports' link for Pinhoe Surgery on our website at www.cqc.org.uk

Our key findings at this inspection were as follows:

- The practice had improved health and safety for patients by implementing robust arrangements for managing medicines, including vaccines, in regard of their recording, handling, storing and security.
- Improvements to patient safety had been made by ensuring robust arrangements were in place for Patient Group Directions. These had been adopted by the practice to allow nurses to administer medicines in line with legislation..
- The practice had improved health and safety for patients by implementing safe infection control procedures including an audit of all areas, updating the infection control policy and protocols. All clinical staff had training updates planned to reinforce the measures already taken.

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 previous inspection in November 2015 we rated the practice as requires improvement for providing safe services. We found that although risks to patients who used services were assessed, the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe. Areas of concern included, appropriate management of infection control and risks associated with medicines management.

At our follow-up review on 1 August 2016 we looked at areas the practice needed to respond to. Records and information reviewed demonstrated improvements had been made in all required areas including infection control and medicines management, specifically the management and storage of vaccines.

Good



Pinhoe Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our review was undertaken by a CQC inspector.

Background to Pinhoe Surgery

The Pinhoe and Broadclyst Medical Practice was inspected on Tuesday 28 November 2015. This was a comprehensive inspection. The practice operates across two sites, the main site being located in Pinhoe and the branch surgery being in The Hellings, Broadclyst.

The practice provided GP primary care services to approximately 11,000 people living in and around the area of Pinhoe on the outskirts of the city of Exeter.

The practice has a Primary Medical Service (PMS) contract and also offers Directed Enhanced Services, for example the provision of minor surgical procedures for patients and also offered local enhanced services which included full family planning for its patients.

There are seven GP partners, three male and four female. The practice is registered as a GP teaching practice for under graduate medical student's education. Partners hold managerial and financial responsibility for running the business. The team are supported by a practice manager, one nurse practitioner, two practice nurses, a health care assistant, a dispensary team and additional administration staff.

The practice has a dispensary at the Broadclyst surgery. A dispensing practice is where GPs are able to prescribe and

dispense medicines directly to patients who live in a rural setting. The Broadclyst practice dispensed to patients who did not have a pharmacy within a mile radius of where they lived.

Patients using the practice also had access to community nurses, midwives, community mental health teams and health visitors who visit the practice.

The practice is open from Monday to Friday 8am to 6.30pm. Appointments are available between 8am and 5.30pm Monday to Friday. Outside of these times there is a local agreement that the out of hours service (Devon Doctors Out of Hours Service) take phone calls and provide an out-of-hours service.

We inspected the practice in November 2015 and found improvements were needed in the overview of safety systems and processes. 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 1 August 2016 we found the provider had made the required improvements.

Why we carried out this inspection

We carried out this desk top follow up inspection at Pinhoe Surgery on 1 August 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 carried out this review of Pinhoe Surgery on 1 August 2016. We did not visit the practice on this occasion; instead

Detailed findings

we reviewed an action plan and documentation sent to us by the practice to check on the progress of actions taken following the comprehensive inspection we completed on 28 November 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 November 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

Overview of safety systems and processes

At our last inspection in November 2015 we found a clean and well maintained building. We observed the premises to be clean and tidy. The nurse manager nurse was the infection control clinical lead who liaised with the local infection prevention teams to keep up to date with current practice. There was an infection control protocol in place but this had not been reviewed since 2004. The infection control lead attended training when updates were available. They then disseminated the information to other clinical staff. There was no infection control audit in place.

At our inspection of 1 August 2016 we found that infection control was managed well with the all staff having update training. An infection control audit was completed in March 2016 and the infection control protocol had been updated.

At our last inspection in November 2015 we found blank prescription forms for use in printers, and also pre-printed forms, were not handled in accordance with national guidance as these were not tracked through the practice and kept securely at all times. At this inspection of 1 August 2016 we found the practice had adopted a much more auditable system whereby the blank prescriptions were stored securely and an audit trail of the handling of these forms within the practice was maintained in line with national guidance.

At our last inspection in November 2015 we found vaccines were not being kept in line with guidance from Public Health England on the storage of vaccines. The temperature range in the vaccines refrigerators were monitored daily, however, readings were regularly recorded that were outside of the recommended range for storing vaccines. The refrigerator at Broadclyst was over-filled and

not suitable for the number of products being stored in it. The practice told us that they would immediately check the suitability for use of current stocks of vaccines, and seek advice on the administration of vaccines already given. At this inspection we found following our inspection the practice had been in contact with NHS England with regard to seek advice. NHS England advised the practice should

- Replace the fridge (ensuring any new fridge was of an appropriate capacity to hold the number of vaccines required by the practice)
- Procurement of adequate fridge temperature monitoring equipment and ensuring staff were trained in correct use and reporting of temperatures, including escalation processes where these were out of range
- Ensuring that staff involved in the receipt, storage and administration of vaccines were updated and robust local policies, processes and fail safes were put in place to prevent a repeat of the incident
- Ensuring that all staff involved in the administration of vaccines received training in line with national minimum standards.

All of these recommendations were undertaken immediately by the practice.

At our last inspection in November 2015 we found the Patient Group Directions (PGDs) in use by the nurses in the practice had not been approved for use in the local clinical commissioning group (CCG) area, (instead they were ones adopted by other CCGs, for example Bristol) or authorised for use by the practice, to allow nurses to administer particular medicines (for example vaccines) in line with legislation. At this inspection we saw documentation that showed all PGDs were up to date and approved for use.