

# Tattenhall Village Surgery

## Quality Report

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Date of inspection visit: 4 July 2017

Date of publication: 20/07/2017

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

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 announced comprehensive inspection of Tattenhall Village Surgery on 7 February 2017. The overall rating for the practice was Good. However, the practice was rated as requires improvement for providing safe services. The full comprehensive report on the February 2017 inspection can be found by selecting the 'all reports' link for Tattenhall Village Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused review carried out on 4 July 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulation that we identified at our previous inspection on 7 February 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- The provider had improved safety systems in place to ensure that staff recruitment checks, monitoring of medication fridge temperatures and safety checks of the premises promoted the health, safety and welfare of patients.

The following improvements to the service had also been made:

- A system had been put in place to ensure that fire drills occurred at the recommended frequencies.
- A system to monitor the allocation of blank prescriptions was in place.
- A formal structure of supervision had been put in place for the advanced nurse practitioner.
- A record of verbal complaints was being maintained.
- A disability access audit had been undertaken.
- The systems for gathering patient feedback had been improved with the establishment of a patient participation group.
- The disciplinary procedure had been revised.

The areas where the provider should make improvements are:

# Summary of findings

- Where no references can be obtained during the recruitment process, clearly record the reason for this.

**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. The provider had introduced improved systems following the last inspection to ensure that staff were safely recruited, fridge temperatures appropriately monitored and necessary safety checks of the premises were undertaken. At this inspection we found that the systems introduced to improve safety were operating effectively.

**Good**



# Summary of findings

## Areas for improvement

### Action the service **SHOULD** take to improve

- Where no references can be obtained during the recruitment process, clearly record the reason for this.

# Tattenhall Village Surgery

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

The inspection was undertaken by a CQC inspector.

## Background to Tattenhall Village Surgery

Tattenhall Village Surgery is responsible for providing primary care services to approximately 7,914 patients. The practice is situated in Tattenhall in Cheshire. The practice has a branch practice called Farndon Village Surgery. Both practices share the same staff and patient list. The provider for the practice is Dr Melissa Siddorn and Dr Laura Freeman, however the practice and the branch are referred to as The Village Surgeries Group. Tattenhall Village Surgery was registered with CQC in November 2016.

The practice and the branch are based in an area with lower than average levels of economic deprivation when compared to other practices nationally. The number of patients with a long standing health condition is about average when compared to other practices nationally.

The staff team includes two partner GPs, six salaried GPs, one advanced nurse practitioner, two practice nurses, two health care assistants, practice manager, compliance manager, business manager, administration and reception staff. There are both male and female GPs. The nursing team and health care assistants are female.

Tattenhall Village Surgery and the branch practice at Farndon are open from 8am to 6.30pm Monday to Friday. An extended hour's service for routine appointments and an out of hour's service are commissioned by West

Cheshire CCG and provided by Cheshire and Wirral Partnership NHS Foundation Trust. Patient facilities are located on the ground floor. The practices have a car park for on-site parking.

The practice has a Personal Medical Service (PMS) contract. The practice offers enhanced services such as minor surgery, learning disability health checks and influenza and shingles immunisations.

## Why we carried out this inspection

We undertook a comprehensive inspection of Tattenhall Village Surgery on 7 February 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The overall rating for the practice was good. However, the practice was rated as requires improvement for providing safe services. The full comprehensive report on the February 2017 inspection can be found by selecting the 'all reports' link for Tattenhall Village Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook an announced focused review of Tattenhall Village Surgery on 4 July 2017. This inspection was carried out to review 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

The inspector :-

- Carried out a site visit.
- Spoke with the practice manager, compliance manager, business manager and the advanced nurse practitioner.

# Detailed findings

- Reviewed documents.

# Are services safe?

## Our findings

At our previous inspection on 7 February 2017 we rated the practice as requires improvement for providing safe services. The provider had improved systems following the last inspection to ensure that staff were safely recruited, fridge temperatures appropriately monitored and necessary safety checks of the premises were undertaken. We identified that the provider needed to monitor these systems to ensure that they continued to promote the health, safety and welfare of patients.

When we undertook a follow up inspection on 4 July 2017 we found that the systems implemented to improve safety were operating effectively. We checked the records relating to the monitoring of the vaccine fridges and found that a record was being made of the minimum, maximum and actual temperatures. A record of any occasions when the temperature was outside the recommended range had also been made and weekly checks of the data logger (a portable measurement instrument that is capable of autonomously recording temperature over a defined period of time)

records were carried out as a further safety measure. There were some occasions when a daily recording had not been made due to a nurse not being available at the premises. The procedure on these occasions was to check the data logger the next working day. This procedure was recorded for nursing staff to refer to.

We were provided with evidence that a health and safety assessment and a fire risk assessment had been carried out and that the action plans were being worked through. We were also provided with evidence that an emergency lighting test and service had been undertaken at Tattenhall

Village Surgery. This had recommended further emergency lighting be installed and the practice manager was taking further advice about this from the company that undertook the fire risk assessment.

We looked at the recruitment records of two staff employed since the last inspection. We found that overall all the necessary checks had been carried out including identity checks, evidence of information having been gathered about any physical or mental conditions which were relevant (after reasonable adjustments) to the role the person was being employed to undertake and Disclosure and Barring Service (DBS) checks. These checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable. We found that one record contained two references, however there were no written references for the second. This member of staff had been working for the practice on a temporary basis and they had only worked at the practice and privately for a person who had not provided a reference when requested. A record had not been made of this information. We found that the records covering induction had been improved and provided a clear record of the guidance, support and training provided to new members of staff.

In addition the provider had made other improvements. Systems had been put in place to ensure that fire drills occurred at the recommended frequencies and to monitor the allocation of blank prescriptions. Improvements had been made to the supervision arrangements for the advanced nurse practitioner. A record of verbal complaints was being maintained. A disability access audit had been undertaken. The systems for gathering patient feedback had been improved with the establishment of a patient participation group and the disciplinary procedure had been revised.