

The Gratton Surgery

Inspection report

Gratton Close
Sutton Scotney
Winchester
Hampshire
SO21 3LE
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Date of inspection visit: 9 Jan 2020
Date of publication: 11/03/2020

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 location

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We decided to undertake an announced focused inspection of The Gratton Surgery on 9 January 2020 following our annual regulatory review of the information available to us. This inspection looked at the following key questions:

- Are the services provided at this location safe?
- Are the services provided at this location effective?
- Are the services provided at this location well-led?

The practice's annual regulatory review did not indicate that the quality of care had potentially changed in relation to provision of Caring and Responsive services. As a result, the ratings from the practice's previous comprehensive inspection from 2014 still stand in those key questions.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as good overall but requires improvement for providing safe services. We have rated all population groups as good.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm but it had not fully addressed the identified risks to patients accessing their prescriptions remotely with alternative collection arrangements.
- Oversight of the monitoring and security of prescription stationery was not in line with national guidance.
- Patients received effective care and treatment that met their needs.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

- When issues relating to the oversight of systems and processes were identified on inspection, the practice was quick to act, to investigate and to implement new processes to prevent re-occurrences.
- The practice worked proactively with local initiatives, other local service providers and commissioning groups to support and provide continually improving services.

We saw one area of outstanding practice as follows:

- By working with local organisations, the practice had developed remote clinics to visit its local transient populations. By visiting and working with those families, the practice had worked to improve childhood immunisations uptake and chronic disease management. As a result of that work, the practice showed it had immunised seven out of nine identified children in line with the national childhood immunisation schedule, who had not been previously immunised.

The areas where the provider **must** make improvements are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements are:

- Provide sepsis awareness training or red-flag symptom information relating to sepsis to receptionists to support the early identification of sepsis in patients.
- Introduce a process for consistently monitoring consent seeking processes, to ensure patient consent is gained in accordance with legislation and guidance.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneworth BM BS BMedSci MRCGPChief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Good 
Working age people (including those recently retired and students)	Good 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor. The team had remote access to a member of the CQC Medicines team during the inspection.

Background to The Gratton Surgery

The Gratton Surgery is located at Gratton Close, Sutton Scotney, Winchester, Hampshire, SO21 3LE. The practice has a dispensary which serves patient who live more than mile away. Due to its rural location the practice has limited public transport links. The practice has a branch site located at South Wonston Surgery, 67 Downs Rd, South Wonston, Winchester, Hampshire SO21 3EW. The branch surgery was not open on the day of inspection so we did not visit this site.

The provider is registered with CQC to deliver the following Regulated Activities from both sites;

- Diagnostic and screening procedures,
- Family planning,
- Maternity and midwifery services,
- Surgical procedures,
- Treatment of disease, disorder or injury.

The Gratton Surgery is situated within the West Hampshire Clinical Commissioning Group (CCG) and provides services to approximately 6,750 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a partnership of five GP partners who registered with the CQC in February 2013. The practice

employs two practice nurses, two healthcare assistants/ phlebotomists, a practice manager and a team of administrative and receptionist staff. The dispensary was staffed by a dispensary manager and team of dispensers. A delivery driver for the dispensary service was self-employed but attached to the practice to provide this service. The practice is part of a local primary care network with five other GP practices as well as the local GP federation.

There are higher than the local average number of patients under the age of 18, and fewer patients aged over 65 than the local average, but more than the national average. The National General Practice Profile states that approximately 97% of the practice population is from a White background with the remaining 3% of the population originating from black, mixed or other non-white ethnic groups. Information published by Public Health England rates the level of deprivation within the practice population group as ten, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 83 years compared to the national average of 79 years. Female life expectancy is 87 years compared to the national average of 83 years.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems and processes established and operated effectively to ensure full oversight of good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• Oversight of the monitoring and actioning of test results not fully embedded.• Identified risks had not been appropriately addressed, particularly in relation to alternative methods for patients to access their prescriptions remotely.• Oversight of the monitoring and security of blank prescription stationery was not in line with national guidance.• Limited oversight to ensure full compliance with infection prevention and control staff training expectations. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>