

The Willow Surgery

Quality Report

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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

We carried out an announced comprehensive inspection at The Willow Surgery 28 July 2016. The overall rating for the practice was good however the safe domain was rated as requiring improvement. The full comprehensive report on the July 2016 inspection can be found by selecting the 'all reports' link for The Willow Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 27 April 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 28 July 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

We found in the areas where the provider must previously make improvement that:

- The provider had ensured that the blank prescriptions held by the practice were fully recorded and maintained an auditable record.

- The provider had ensured that the systems for monitoring and recording the stock of medicines and emergency equipment used at the practice provided an auditable record which ensured an in date supply was available.
- The provider had ensured that patient specific directives were explicit to the staff member who administered the medicine.
- The provider had ensured the new system for monitoring refrigerator temperatures was sustained by the staff team.
- The provider had ensured the appropriate Disclosure and Barring Service checks for GPs were undertaken as part of the recruitment process.
- The provider had reviewed the audit documentation used for infection control to ensure the tool used encompassed a whole audit of the practice and its environment.
- The practice had obtained a risk assessment of the premises which controlled any risks associated with Legionella.
- The provider had devised systems which ensured the processes for checking test results was robust and fail safe.

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 service is rated as good for providing safe services.

The practice now had good governance systems in place to assess, monitor and improve the quality of the service to ensure risks to patients' health and safety were minimised. For example, the processes for checking test results had been reviewed, the auditing and monitoring of infection control, emergency medicines and equipment, and security of prescriptions had now been improved.

Good



The Willow Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was undertaken by the lead inspector for the service.

Background to The Willow Surgery

The Willow Surgery is a suburban practice providing primary care services to patients resident in the Downend area of South Gloucestershire.

Hill House Road,
Downend,
Bristol,
BS16 5FJ

The practice owns the purpose built building which has two floors. All of the practice patient services are located on the ground floor of the building. The practice has a patient population of approximately 12,000 of which 36% are over 65 years of age which is higher than the clinical commissioning group average of 29%.

The practice has six GP partners, one of whom is also registered with the Care Quality Commission as the manager. In addition to this there are four salaried GP's, a practice management team, five practice nurses, and three health care assistants. Each GP has a lead role for the practice and nursing staff have specialist interests such as diabetes and infection control.

The practice is open Monday to Thursday 8am-7.30pm and until 6.30pm on Fridays.

The practice had a Personal Medical Services contract (PMS) with NHS England to deliver general medical services. The practice provided enhanced services which included facilitating timely diagnosis, support for patients with dementia and childhood immunisations.

The Willow Surgery, in line with other practices in the South Gloucestershire Clinical Commissioning Group, is situated within a less deprived area than the England average.

The practice is a teaching practice and takes medical students from the Bristol University and GP registrars from the Severn deanery; no students were available during the inspection.

The national GP patient survey reported that patients were satisfied with the opening times and making appointments. The results were comparable to local and national averages.

The practice has opted out of providing Out Of Hours services to their own patients. Patients can access NHS 111 or BrisDoc who provide the out of hours GP service.

Patient Age Distribution

0-4 years old: 6.3%

5-14 years old: 10.9%

Under 18 years old: 20.5%

65-74 years old: 21.3%

75-84 years old: 10.8%

85+ years old: 3.7%

The practice has more patients over 65 years old than the local and national average.

Patient Gender Distribution

Male patients: 48.7 %

Detailed findings

Female patients: 51.3 %

Other Population Demographics

% of Patients from BME populations: 3.57 %

Patients at this practice have a higher than average life expectancy for men at 81 years and women at 86 years.

The practice hosted a variety of services including:

NHS Community nurses

NHS Psychological services

Retinopathy screening

Other services available onsite included a pharmacy, pain management clinic and acupuncture.

Why we carried out this inspection

We undertook a comprehensive inspection of The Willow Surgery on 28 July 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement for the safe

domain. The full comprehensive report following the inspection on July 2016 can be found by selecting the 'all reports' link for The Willow Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of The Willow Surgery on 27 April 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

During our visit we:

- Spoke with the practice manager, the lead practice nurse and administrative staff.
- Looked at information the practice used to ensure the safety in the practice.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 28 July 2016, we rated the practice as requiring improvement for providing safe services as the arrangements in respect of blank prescription management, monitoring medicines and emergency equipment were not adequate.

We found that these arrangements had significantly improved when we undertook a follow up inspection on 27 April 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

Infection control

Previously, we found that the infection control audits completed did not encompass all areas of the practice and its environment. On this inspection we found a new process for infection control audits had been introduced for all areas of the practice by the infection control lead. We reviewed the audit which was in progress and observed actions had been addressed within reasonable timescales or were in progress.

Medicines management

Previously, we found the auditing of the security of blank prescriptions required improvement. Since the last inspection we saw the practice had secured the blank prescription pads and computer paper in a staffing area of the practice which was only accessible by authorised members of staff. We saw new prescription paper was signed in by staff and serial numbers logged. Stock of prescription paper was rotated and when clinical staff required new stock in treatment rooms this would be signed out by an authorised member of staff. This member of clinical staff was then responsible for ensuring they were kept secure. All consulting rooms were routinely locked when they were not being used.

At the last inspection the temperature records for the refrigerators showed that they were regularly checked but that there was no equipment or process in place to record maximum and minimum temperatures. This was rectified by the provider. On this inspection we found there was a new checking system in place. The lead practice nurse kept records of these checks and we reviewed the current record. We saw where there was an out of range

temperature recorded the practice noted the action that had been taken to review the reason why this had occurred. The practice was also using a temperature data logger as well as manually recording the temperature. The data logger had the ability to read the refrigerator temperature continually. This provided an accurate temperature range throughout the whole day rather than from the manual readings.

On our last visit it was noted that patient specific directives were not always explicit to the staff member who administered the medicine. This process had been reviewed and the process in place now ensured that the member of staff in the directive administered the medicine.

At the last inspection the systems for monitoring and recording the stock of medicines and emergency equipment used at the practice did not provide a fail safe system which ensured a usable stock was available at the practice. Since our last visit the provider had reviewed the system and introduced a weekly stock taking and date checking process for medicines and emergency equipment which provided an auditable record and ensured an in date supply was available. We spot checked the medicines stock sheet against stock held and found it was accurate

Monitoring risks to patients

We found at the last inspection that the provider had not always ensured the appropriate Disclosure and Barring Service checks for GPs were undertaken as part of the recruitment process. This system had been changed during our last visit and it now ensured that Disclosure and Barring Service checks were undertaken.

We also found that the systems to review results by GPs was informal and varied. On this visit we found the provider had implemented and reviewed systems which ensured the processes for checking patient test results was robust and fail safe.

On our last visit we found that although the practice had safe systems in place to monitor the water supply and prevent legionella (Legionella is a term for a particular bacterium which can contaminate water systems in buildings), the policy needed to be reviewed and the practice needed to have their risk assessment available. We found on this visit the practice had undertaken a new risk assessment of the premises which controlled any risks associated with Legionella.