

Benfleet Surgery

Quality Report

12 Constitution Hill Benfleet, Essex SS7 1ED Tel: 01268 566400 Website: www.benfleetsurgery.nhs.uk

Date of inspection visit: 22 September 2017 Date of publication: 13/10/2017

Good

Good

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

Are services safe?

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 Benfleet Surgery on 1 June 2016 to check on improvements made following the practice being placed into special measures in September 2015. The practice was taken out of special measures and was rated as good overall. However, the practice was found to be requires improvement for providing safe services. The full comprehensive reports on the September 2015 and the June 2016 inspections can be found by selecting the 'all reports' link for Benfleet Surgery on our website at www.cqc.org.uk.

This announced desk based review was carried on 22 September 2017 to confirm that the practice had made the improvements required that were identified in our previous inspection on 1 June 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

The practice is rated as good for providing safe services.

Our key findings were as follows:

• Since the previous inspection the practice had completed risk assessments in relation to the control of substances hazardous to health (COSHH). We were sent evidence of the risk assessments and safety

sheets for the products in use at the practice. The practice had also completed risk assessments for other substances used at the practice. For example, liquid nitrogen and oxygen. A health and safety risk assessment had also been completed in October 2016 which was due for review in October 2017.

- Smart cards that were previously stored in the practice had since the previous inspection been removed and therefore there was no risk to patient confidentiality in relation to this.
- The governance framework was implemented and we were sent evidence of practice meetings held to show the topics discussed such as significant events, complaints and audit.
- The practice had completed second cycle audits and changes had been implemented to drive quality improvement. We saw that where improvements had been made, searches on the electronic patient record system had been planned to ensure this was ongoing.
- The practice had tried to promote a virtual patient participation group. However, there had been minimal response from the patients. The practice had focussed on their renovation project and when completed would focus on the PPG. Feedback from

Summary of findings

patients was collected on the amended complaints and comments leaflet in addition to the friends and family test and comments on NHS Choices which was monitored.

• Patients with complex needs were identified and we saw from the minutes of the practice meetings that these patients were discussed. Patients were added

to the registers such as palliative and learning disabilities where appropriate. The practice had a low number of patients on the palliative care register. This was a true reflection of their patients that were appropriate for this care.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

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.

- Since the previous inspection the practice had completed risk assessments in relation to the control of substances hazardous to health (COSHH). We were sent evidence of the risk assessments and safety sheets for the products in use at the practice. The practice had also completed risk assessments for other substances used at the practice. For example, liquid nitrogen and oxygen. A health and safety risk assessment had also been completed in October 2016 which was due for review in October 2017.
- Smart cards that were previously stored in the practice had since the previous inspection been removed and therefore there was no risk to patient confidentiality in relation to this.

Good



Benfleet Surgery Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Benfleet Surgery

Benfleet Surgery is located in a residential area of Benfleet in Essex. There are good commuter links in the town, a small car park as well as on-road parking for patients.

The patient demographics show a larger than average population aged five to 24 years old and aged 40 to 55 years old. The practice has a lower than average deprivation score compared to the CCG and national average.

The practice has a General Medical Services (GMS) contract. At the time of our inspection the practice had a patient list size of approximately 3,500. There are two partner GPs; one male and one female. The practice also employs a practice nurse, a practice manager and four receptionists.

The practice is open from 8am to 6.30pm Monday to Thursday and from 8am to 2pm on Friday. Appointments are available from 8am to 1pm on Monday to Friday and from 3pm to 6.30pm Monday to Thursday.

When the practice is closed, patients are directed to 111 for out of hours services provided by integrated Care 24.

Why we carried out this inspection

We undertook a comprehensive inspection at Benfleet Surgery on 1 June 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This was to check on improvements made following the practice being placed into special measures in September 2015. The practice was taken out of special measures and was rated as good overall. However, the practice was found to be requires improvement for providing safe services. The full comprehensive reports on the September 2015 and the June 2016 inspections can be found by selecting the 'all reports' link for Benfleet Surgery on our website at www.cqc.org.uk.

We undertook a desk based review of Benfleet Surgery on 22 September 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care.

How we carried out this inspection

We carried out an announced desk based review of Benfleet Surgery on 22 September 2017. This involved reviewing evidence such as:

- Minutes of meetings
- Risk assessments
- Audits

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

What we found at our previous inspection

At our previous inspection on 1 June 2016, we rated the practice as requires improvement for providing safe services as risks associated to health and safety and the control of substances hazardous to health had not been assessed and smart cards were not stored securely putting patient confidentiality at risk.

These arrangements had significantly improved when we undertook a desk based review on 22 September 2017. The practice is now rated as good for providing safe services.

What we found at this inspection

Monitoring risks to patients

Risks to patients were assessed and well managed.

Since the previous inspection the practice had completed risk assessments in relation to the control of substances hazardous to health (COSHH). We were sent evidence of the risk assessments and safety sheets for the products in use at the practice. The practice had also completed risk assessments for other substances used at the practice. For example, liquid nitrogen and oxygen. A health and safety risk assessment had also been completed in October 2016 which was due for review in October 2017.

Smart cards that were previously stored in the practice had since the previous inspection been removed and therefore there was no risk to patient confidentiality in relation to this.

The practice had undertaken improvement work to the surgery since the previous inspection. Upgraded fire doors and integrated code locks had been fitted to ensure security of all rooms in the surgery when not in use.