

The Dower House

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 Dower House Surgery on 11 February 2016. The practice was rated as requires improvement for the safe domain and good for effective, caring, responsive and well led domains. Overall the practice was rated as good.

During that inspection we found that the practice was not compliant with the legislation in relation to safeguarding training for all staff. We found that not all nursing staff had up to date safeguarding training that was relevant and at a suitable level for their role.

During our last inspection we reviewed safety records, incident reports, national patient safety alerts and minutes of meetings. We found that some lessons had been shared to make sure action was taken to improve safety in the practice but not always; in particular, when there were unintended or unexpected safety incidents, we found that lessons learned were not always communicated widely enough to support improvement.

The report setting out the findings of the comprehensive inspection was published in April 2016. Following the inspection we received an action plan from the practice detailing how they would improve on the areas of concern.

Our previous key findings across the areas we had inspected were as follows:

The areas where the provider must make improvements are:

- Ensure all nursing staff had received up to date safeguarding training.

We carried out a desk based inspection of The Dower House on 5 September 2016. The purpose of this inspection was to follow up the requirements from the last inspection and to assess if the practice had implemented the changes necessary to ensure patients who used the service were protected against the risks associated with the report published in April 2016. Overall the practice is now rated as good.

We found the practice had made the required improvements since our last inspection on 11 February 2016. Following this desk based inspection we rated the practice as good for providing safe services. The overall rating for the practice remains good. For this reason we have only rated the location for the domain of safe. This report should be read in conjunction with the full inspection report of 11 February 2016. A copy of this report can be found on our website at www.cqc.org.uk.

At this inspection we found action had been taken by the provider, evidence supplied by them showed that;

Summary of findings

- All nurses had completed level 3 safeguarding children training.
- Systems were now in place to ensure all staff had undertaken refresher training at appropriate intervals

- The practice reviewed their Significant Events Analysis Process to effectively communicate lessons learnt to all relevant staff.

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?

When we inspected this practice in February 2016 we rated the practice as requires improvement for providing safe services. Overall the provider was rated as good.

Following publication of our report in April 2016, the practice sent us an action plan which informed us of the changes they were planning to implement to meet legislation requirements.

When we completed the desk based inspection 5 September 2016 we were given information from the provider which showed us that;

- Nursing staff had received up to date safeguarding training to a level suitable to their role.
- Records had improved to show when staff required refresher training for all training needs; The provider sent us a staff training record for all current staff which diarised when updates of training were required.
- Records received from the provider, showed significant events were communicated with relevant staff ; we looked at minutes from a Significant Event meeting 7 June 2016 which demonstrated how lessons learnt were shared with staff.

We found the practice had made improvement since our last inspection on 11 February 2016. Following this desk based inspection we have rated the practice as good for providing safe services.

Good



The Dower House

Detailed findings

Our inspection team

Our inspection team was led by:

Victoria Baker, Assistant Inspector, completed a desk based Inspection.

Background to The Dower House

Dower House Surgery, 27 Pyle Street, Newport, Isle of Wight. PO30 1JW also known as Pyle Street Surgery occupies a grade two listed building and is situated in Newport, Isle of Wight.

The practice has an NHS general medical services (GMS) contract to provide health services to approximately 12500 patients.

Surgeries are held daily between the hours of 8.30am and 6.30pm, Monday to Friday.

Early morning GP surgeries are held on Mondays from 7.15am and Saturdays between 8am and 10am. The practice has opted out of providing out-of-hours services to its patients and refers them to Beacon Health out-of-hours service via the 111 service.

The practice has a higher number of patients aged over 65 years old when compared to the England average.

The practice has a high number of patients who have a long term condition and those in receipt of disability related benefits when compared to the England average and is situated in an area of high deprivation.

The practice has four GP partners and three salaried GPs. In total there are three male and four female GPs. The practice also has two nurse practitioners, a lead nurse and

six practice nurses and three health care assistants. GPs and nursing staff are supported by a practice manager, assistant practice manager and a team of 17 administration staff. The practice administration team consists of receptionists, secretaries, a quality control assistant, a scanning clerk, an IT lead, an office manager and the practice manager. Dower House Surgery is also a training practice for doctors training to be GPs and medical students.

This practice was previously inspected by the Care Quality Commission in February 2016. At this inspection the practice was rated as good overall. It was rated as requires improvement in the domain of safe, it was rated as good in the domains of effective, caring, responsive and well-led.

The provider was asked to provide an action plan to meet the essential standards of the Care Quality Commission. The practice provided this information and we completed a desk based inspection on 5 September 2016, the purpose of this was to check that the action plan had been followed.

Why we carried out this inspection

We carried out a comprehensive inspection on 11 February 2016 and published a report setting out our judgements. We undertook a focused desk based inspection on 5 September 2016 to check that the practice had implemented changes to comply with the regulations that they were not meeting at the previous inspection.

We found that the necessary changes had been made and the provider was now meeting the fundamental standards included within this report.

This focused inspection also enabled us to update the ratings for the practice.

Detailed findings

How we carried out this inspection

We undertook a focused desk based inspection of The Dower House on 5 September 2016.

This was carried out to check that the practice had completed the changes in their action plan to comply with the regulations we found had been breached during the comprehensive inspection in February 2016.

To complete this desk based inspection we:

- Reviewed records relevant to staff training.
- Reviewed records relevant to Significant Event Analysis.

Because this was a desk based inspection we looked at one of the five key questions we always ask:

- Is it safe?

Are services safe?

Our findings

When we inspected in February 2016 we rated the practice as requires improvement for providing safe services.

Staff understood their responsibilities to raise concerns, and to report incidents and near misses. However, when there were unintended or unexpected safety incidents, reviews and investigations were not always thorough enough and lessons learned were not always communicated widely enough to support improvement.

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. An area of concern was found with regards to safeguarding. Not all nursing staff had received up to date safeguarding training.

Arrangements for managing medicines kept patients safe. This included obtaining, prescribing, recording, handling, storage and security, safe administration and disposal.

- Patient's individual records were written and managed in a way that kept them safe.
- Standards of cleanliness and hygiene were maintained.
- Reliable systems were in place to prevent and protect patients from a healthcare-associated infection.
- The design, maintenance and use of facilities and premises kept patients safe.

- The maintenance and use of equipment kept patients safe.

Following publication of our report in April 2016, the practice told us in their action plan of the changes they would complete and implement.

When we completed the desk based inspection 5 September 2016, the provider, upon our request, sent us evidence to support that they had met the required standard, from the information provided we found:

- The practice training matrix and copies of safeguarding certificates evidenced that nursing staff have now received up to date safeguarding training to a level suitable to their role.
- The practice have introduced a training matrix, this record shows when staff are due refresher training for all training needs; We looked at a staff training record for all current staff which diarises when updates of training are required.
- Records that evidence Significant Events are now being communicated within the practice with relevant staff members that promotes lessons learnt; We looked at minutes from a Significant Event meeting 7 June 2016 which demonstrated how lessons learnt are shared with staff.

We found the practice had made improvement since our last inspection on 11 February 2016. Following this desk based inspection we rated the practice as good for providing safe services.