

Baslow Road Surgery

Quality Report

148 Baslow Road

Sheffield

S17 4DR

Tel: 0114 236 9957

Website: www.baslowandshoreham.gpsurgery.net

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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 well-led?

Good



Summary of findings

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Baslow Road Surgery	4
Why we carried out this inspection	4
How we carried out this inspection	4

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Baslow Road Surgery on 13 December 2016. The overall rating for the practice was good with requires improvement for being well-led. The full comprehensive report from December 2016 inspection can be found by selecting the 'all reports' link for Baslow Road Surgery on our website at www.cqc.org.uk.

This inspection was a desk based review carried out on 18 July 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 13 December 2016. This report covers our findings in relation to those requirements.

Overall the practice is rated as good.

Our key findings were as follows:

- The provider submitted to us further evidence as part of this inspection to support the governance framework and the delivery of good quality care.
- The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions had been reviewed to include how actions taken or updates were recorded.
- The practice reviewed how it captured feedback from patients following our December 2016 inspection and implemented new methods to capture feedback.
- The provider reviewed the information available to patients to explain the complaints process and placed notices in each site.

In addition the provider should:

- Continue to review the opportunity for patient engagement, particularly provision of a patient participation group at the Baslow Road site.

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 well-led?

The practice is now rated as good for being well-led.

- The provider submitted to us further evidence as part of this inspection to support the governance framework and the delivery of good quality care. For example, policies and procedures had been updated.
- The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions had been reviewed to include how actions taken or updates were recorded.
- The practice reviewed how it captured feedback from patients following our December 2016 inspection and implemented new methods to capture feedback.
- The provider reviewed the information available to patients to explain the complaints process and placed notices in each site.

Good



Baslow Road Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector.

Background to Baslow Road Surgery

Baslow Road Surgery is located in Totley, Sheffield S17 4DR, on the boundary of Sheffield and North East Derbyshire. The practice has branch surgeries at York Road, Darnall, Sheffield, S9 5DH and at Shoreham Street, Sheffield, S1 4SS. The practice provides services for 12,265 patients under the terms of the NHS General Medical Services contract. Each of the three surgeries is situated in a different geographical and socio-economic area of Sheffield. The three sites have very different patient populations; varying from the more affluent at Totley; to Darnall which is classed as within the group of the fifth most deprived areas in England. The age profile of the practice population is similar to other GP practices in the local area. Half of the patient population are registered at Baslow Road, 30% at York Road and 20% at Shoreham Street.

The practice has four GP partners, two male and two female, three salaried GPs, two female and one male, a lead nurse, two advanced nurse practitioners (ANP), three practice nurses, two trainee practice nurses, three healthcare assistants, a practice manager and a team of reception and administrative staff.

The practice premises are open from 8am to 6.30pm Monday to Friday across all three sites. Telephone calls to each site between those hours are answered by practice staff. The smaller Shoreham Street site closes from 1pm to

2pm daily and telephone calls during this time are diverted to one of the other sites. Appointments with clinical staff are available throughout the day at all the sites. Extended hours appointments are offered with GPs on Monday and Tuesday evening until 8pm and with the practice nurses on Wednesday evenings until 8pm. In addition to pre-bookable appointments that could be booked up to four weeks in advance, urgent appointments are available same day with the ANP's or triaged by the duty GP. The practice participates in the Sheffield Extended Access scheme with pre-bookable appointments available daily 6pm to 10pm and on Saturdays and Sundays.

When the practice is closed calls are answered by the out-of-hours service which is accessed via the surgery telephone number or by calling the NHS 111 service.

Why we carried out this inspection

We undertook a comprehensive inspection of Baslow Road Surgery on 13 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good with requires improvement for being well-led. The full comprehensive report following the inspection from December 2016 can be found by selecting the 'all reports' link for Baslow Road Surgery on our website at www.cqc.org.uk.

We undertook a desk based focused inspection of Baslow Road Surgery on 18 July 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.

Detailed findings

How we carried out this inspection

We carried out a desk-based focused inspection of Baslow Road Surgery on 18 July 2017. This involved reviewing evidence the practice provided:

- Updates to policies and procedures.
- Review of patient feedback activity undertaken.

- Review of complaint information the practice provided to patients.
- Review of risk assessments undertaken since our last inspection.

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 well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At our previous inspection on 13 December 2016, we rated the practice as requires improvement for providing well-led services as we found that the provider did not always maintain accurate and contemporaneous records in respect of the management of regulated activities. The practice responded to the issues pointed out during the inspection and submitted updated evidence to us following the inspection. However these issues should have been dealt with more proactively and been under regular review.

We issued a requirement notice in respect of these issues and found arrangements had improved when we undertook a desk-based follow up inspection of the service on 18 July 2017. The practice is now rated as good for being well-led.

Governance arrangements

The provider submitted further evidence as part of this inspection to support the governance framework and the delivery good quality care. Following our December 2016 inspection the provider shared with us the significant event policy and changes made to others. For example, we saw the needle stick injury protocol had been dated (December 2016) and the local contact details for the communicable disease centre were added. The child safeguarding policy implementation date was added along with details of the practice safeguarding leads and we saw it was amended to reflect the practice disclosure and barring service (DBS) checking procedures. (DBS 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).

The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions had been reviewed to include how actions taken or updates were recorded. The provider shared with us copies of the fire risk assessments completed in February 2017 at Baslow Road and May 2017 at Shoreham Street and York Road sites. As a result of the fire risk assessment at Baslow Road the fire alarm panel was updated in June 2017. Fire equipment across all sites was maintained in May 2017.

The legionella risk assessments were shared with us for Shoreham Street and Baslow Road, completed in March 2017, and York Road site on 1 June 2017. (Legionella is a term for a particular bacterium which can contaminate water systems in buildings). Copies of water temperature checks for May 2017 were also submitted. The boiler at Baslow Road had been upgraded in early 2017 and the old water tanks removed.

The provider had more recently contracted an external company to provide advice and support for health and safety, recruitment and employment law. The practice manager informed us policies and procedures would be routinely reviewed and updated as part of the support provided.

Seeking and acting on feedback from patients, the public and staff

The practice reviewed how it captured feedback from patients following our December 2016 inspection. New computer software installed in June 2017 enabled NHS Friends and Family questions to be sent to patients via a text message following an appointment. Of the 3,800 text messages sent, 42 patients had responded. The results were yet to be themed. Patients were also able to cancel appointments using a similar text message system which was well used and generated between 10 to 30 responses a day freeing up unwanted appointments.

The practice were actively seeking new members to establish a patient participation group (PPG). Two patients had come forward to join since the posters were put up at the Shoreham Street site.

A patient survey had also been developed by practice staff in July 2017 to canvass patients using the Shoreham Street site as space was limited and the provider was considering a move to new premises. There had been 100 responses to the survey to date, the survey was programmed to close at the end of August 2017.

The provider reviewed the information available to patients about the complaints process. The complaint information leaflet had been updated to reflect when and how to contact the Parliamentary Health Service Ombudsman and a notice put up at each site explaining the complaints process.