

# NHS Yeovil Health Centre Quality Report

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Date of inspection visit: 8 August 2017 Date of publication: 17/08/2017

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



## Summary of findings

### Contents

Summary of this inspection	Page 2 3
Overall summary	
The five questions we ask and what we found	
Detailed findings from this inspection	
Our inspection team	4
Background to NHS Yeovil Health Centre	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	6

## **Overall summary**

## Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at NHS Yeovil Health Centre on 18 January 2017. The overall rating for the practice was good; however, the practice was rated as requires improvement for the provision of safe services. The full comprehensive report on the January 2017 inspection can be found by selecting the 'all reports' link for NHS Yeovil Health Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 8 August 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to breaches in regulations that we identified in our previous inspection in January 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection. Overall the practice is rated as good, including for providing safe services.

Our key findings were as follows:

- There was a safe system in place for medicines management, in particular the security of blank prescription stationery.
- We saw evidence of improvements in the arrangements for breast and bowel cancer screening resulting in increased percentages of eligible patients being screened.

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?

During our comprehensive inspection on 18 January 2017 the practice was rated as requires improvement for providing safe services. We found that:

• The practice had systems, processes and practices to minimise risks to patient safety. However, the arrangements for medicines management, including the security of blank prescription stationery, were not implemented effectively to keep patients safe.

During our focused inspection on 8 August 2017 the practice was rated as good for providing safe services. We found that:

• The practice had systems, processes and practices in place to minimise risks to patient safety. The arrangements for medicines management, in particular the security of blank prescription stationery, were implemented effectively to keep patients safe.

Good



# NHS Yeovil Health Centre Detailed findings

## Our inspection team

#### Our inspection team was led by:

The inspection was carried out by a CQC Lead inspector.

## Background to NHS Yeovil Health Centre

NHS Yeovil Health Centre is located in the centre of Yeovil. The practice has recently been taken over by Symphony Healthcare Services Ltd (SHS) which is one of the NHS England Vanguard schemes, known as South Somerset Symphony programme. The practice also participates in the Somerset Practice Quality Scheme (SPQS) (along with most other Somerset practices that have opted out of the QOF); and the South Somerset Healthcare Federation (SSHF). The SPQS allows GP practices to innovate new ways of integrated working with other providers and pilot new ways of working together across practice groups, whilst continuing to provide assurance of clinical quality.

The practice serves some 5,500 patients, including significant numbers of patients who do not have English as a first language; and significant numbers of patients who present with issues relating to misuse of drugs or alcohol; or who face other social challenges. The practice occupies premises above a retail pharmacy and there is no dedicated parking on site.

The address from which regulated activities are provided is:

NHS Yeovil Health Centre

37 Middle Street

Yeovil

Somerset

#### BA20 1LS

Patient Age Distribution (2015 data):

0 - 4 years old: 9.2% (higher than the national average of 5.9%).

5 - 14 years old: 9.7% (lower than the national average of 11.1%).

15-19 years old: similar to the national average.

20-39 years old significantly higher than the national average.

40-64 years old: lower than the national average.

Over 65 years old: 4.6% (significantly lower than the national average of 17.1%).

Over 75 years old: 1.8% (significantly lower than the national average of 7.8%).

Over 85 years old 0.5% (significantly lower than the national average of 2.3%).

The practiced has 45% (2014/15 data) of patients with a long standing health condition, which is lower than the Clinical Commissioning Group(CCG) average of 57% and national average of 54%.

Other Population Demographics

The percentage of patients in paid work or full time education:

67% (higher than the national average of 62%).

Index of Multiple Deprivation 2015 (IMD):

27 (higher than the national average of 21.8).

Income Deprivation Affecting Children (IDACI):

21.5% (higher than the national average of 19.9%).

Income Deprivation Affecting Older People (IDAOPI):

4 NHS Yeovil Health Centre Quality Report 17/08/2017

## **Detailed findings**

16.8% (similar to the national average 16.2%).

Average male and female life expectancy for the area is 78 and 82 years respectively, which are both one year less than the national averages and two years less than the Clinical Commissioning Group averages.

The practice has five salaried GPs, none of whom are partners (all employed by SHS); and are equivalent to 3.5 whole time employees. Between them they provide 108 hours of GP appointments each week. Four GPs are female and one is male. There are 14 practice nurses, whose working hours are equivalent to 5.75 whole time employees (WTE); including eight non-medical prescribers who offer the equivalent of 3.85 WTE per week. Nine Care Co-ordinators & Phlebotomists are also employed by the practice with combined hours of 3.1 WTE. The GPs and nurses are supported by over 20 management and administrative staff including a practice manager and assistant manager.

The practice is open seven days a week between 8am and 8pm, including Christmas Day and all other Bank Holidays. Appointments are available from 8am until 8pm. The practice operates a mixed appointments system with some appointments available to pre-book and others available to book on the day. The practice offers online booking facilities for non-urgent appointments and an online repeat prescription service. Patients need to contact the practice first to arrange for access to these services.

The practice has a Walk in Centre contract with the Clinical Commissioning Group; along with an Alternative Provider Medical Services (APMS) contract with NHS England to deliver health care services. The contract includes enhanced services such as childhood vaccination and immunisation scheme, facilitating timely diagnosis and support for patients with dementia and minor surgery services. Influenza and pneumococcal immunisations enhanced services are also provided. These contracts act as the basis for arrangements between the NHS Commissioning Board and providers of general medical services in England.

The practice provides out-of-hours services to their own patients who are offered bookable appointments with GPs outside of normal practice hours.

# Why we carried out this inspection

We undertook a comprehensive inspection of NHS Yeovil Health Centre on 18 January 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection in January 2017 can be found by selecting the 'all reports' link for NHS Yeovil Health Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of NHS Yeovil Health Centre on 8 August 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

We carried out a focused inspection of NHS Yeovil Health Centre on 18 January 2017. This involved reviewing evidence that:

- blank prescription stationery was managed and stored securely.
- procedures had been updated and were being implemented.

During our visit we:

- spoke with the practice manager and administrative staff;
- reviewed records relating to the receipt, recording, storage, issue and return of blank prescription stationery;
- reviewed data for screening patients for breast and bowel cancer and saw evidence of improvements.

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 18 January 2017, we rated the practice as requires improvement for providing safe services. The practice had systems, processes and practices in place to minimise risks to patient safety. However, arrangements for medicines management, in particular for the security of blank prescription stationery, were not implemented effectively to keep patients safe.

These arrangements had significantly improved when we undertook a follow up inspection on 8 August 2017. The practice is now rated as good for providing safe services.

#### **Overview of safety systems and process**

At the inspection in January 2017 we found blank prescription stationery was not securely stored and there were no systems to monitor their use. We found there were no arrangements to log and monitor blank prescription forms received or issued to prescribers; and blank forms were not securely stored when clinical rooms were not in use. For example, blank forms were left in printers in clinical rooms when unoccupied but the doors and printer drawers were not lockable. We spoke to the practice who, within 48 hours of the inspection, provided evidence that a new procedure was in place to ensure the recording of serial numbers of all blank prescription forms for nurse practitioner prescribers and GPs; and there were arrangements in place for secure storage when rooms were not in use.

At this inspection in August 2017 we found blank prescription stationery was securely stored and systems to monitor its use had been implemented. For example, we saw an updated policy, dated 28 January 2017, describing the process for the security of blank prescription forms. We examined records from January to August 2017 showing logs of the serial numbers of blank prescription forms received and issued to prescribers. Blank forms were stored securely in locked cabinets and keys were kept securely. We saw evidence that blank forms were kept securely until issued each day to each clinician in a folder for a specified room; and the serial numbers of blank forms issued and returned were recorded and signed for. We spoke to administrative staff who confirmed that at the end of each day they checked that the serial numbers of unused blank forms for each folder were recorded; and all sets of forms from all rooms had been returned to the cabinet which was then locked. This ensured the security of blank stationery when rooms were not in use. The practice told us they planned to further improve the arrangements by auditing the individual folders to ensure all sequentially numbered blank forms were present in the folder.