

Billingshurst Surgery

Quality Report

Roman Way Billingshurst **West Sussex RH149QZ**

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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?	

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

The practice is rated good overall and good for providing safe services.

We carried out an announced comprehensive inspection of this practice on 25 February 2016. The overall rating for the practice was good. However, a breach of legal requirements was found during that inspection within the safe domain. After the comprehensive inspection, the practice sent us an action plan detailing what they would do to meet the legal requirements. We conducted a focused inspection on 8 March 2017 to check that the provider had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

During our previous inspection on 25 February 2016 we found the following area where the practice must improve:

• Establish arrangements for the safe management of medicines within the practice.

Our previous report also highlighted the following areas where the practice should improve:

- The practice should continue to improve their appointments system and look at ways of improving the emergency appointments system to include seeking advice from outside of the practice.
- Ensure the registered manager is correctly registered with CQC.
- Review their policy for recruitment checks and ensure this is adhered to.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at www.cqc.org.uk

During the inspection on 8 March 2017 we found:

 Arrangements were in place for the safe management of medicines within the practice.

We also found the following in relation to the areas where the practice should improve:

• The practice was taking steps to improve the appointments system. There was now a duty team with an established nurse practitioner service, which increased the availability of emergency appointments. Patients were also able to book appointments up to six weeks in advance.

Summary of findings

- The practice had submitted the relevant forms to ensure the registered manager is correctly registered with CQC.
- The practice had reviewed and updated their policy for recruitment checks. There was a checklist detailing the documents and checks required prior the employment a new staff member.

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 practice is now rated good for delivering safe services.

At our last inspection on 25 February 2016 we found that risks to patients were not assessed and well managed. This was in relation to the safe management of medicines.

At this inspection, we found that the practice had implemented their action plan to ensure that these issues had been addressed and that arrangements for management of medicines were now safe.

Good





Billingshurst Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was conducted by a CQC inspector.

Background to Billingshurst Surgery

Billingshurst Surgery is located on Roman Way in Billingshurst, West Sussex. The practice provides services for approximately 13,200 patients living within the Billingshurst area. The practice holds a General Medical Services (GMS) contract and provides GP services commissioned by NHS England. A GMS contract is one between GPs, NHS England and the practice where elements of the contract such as opening times are standard. The practice patient population is higher than the national average amongst the 40-79 year olds. Deprivation amongst children and older people is low compared to the national averages. The local population is predominantly white British and life expectancy for men and women is similar to the national averages.

As well as a team of nine GP partners (four male and five female), the practice employs an advanced nurse practitioner, six practice nurses and three health care assistants. An executive manager is employed and supported by receptionists, administrative clerks and a dispensing team.

The practice is a training practice for GP trainees and foundation level 2 doctors.

The practice is open between 8am and 6.30pm on weekdays. GP and nurse appointments are available between 8am and 6.30pm. Extended opening is available from Monday to Thursday evenings until 8pm.

Patients are provided information on how to access the out of hours service by calling the surgery or viewing the practice website.

The practice is registered to provide the regulated activities of diagnostic and screening procedures; treatment of disease, disorder or injury; family planning, and surgical procedures. There is an on-site dispensary.

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 on 25 February 2016 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breach of legal a requirement was found. As a result, we undertook a focused inspection on 8 March 2017 to follow up on whether action had been taken to deal with the breach.

How we carried out this inspection

During our visit we spoke with the executive manager and the dispensing team.

Detailed findings

Please note that when referring to information throughout this report relates to the most recent information available to the CQC at that time.



Are services safe?

Our findings

At our previous inspection on 25 February 2016, we rated the practice as requires improvement for providing safe services as safety systems and processes were not always assessed and well managed. This was in relation to the safe management of medicines.

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

Medicines Management

At our last inspection we found that arrangements for managing medicines in the practice did not always keep patients safe. A liquid nitrogen container was located in a fire escape route to which the public could gain access and had not been risk assessed (liquid nitrogen can cause asphyxiation and burns). One of the cupboards used for storing controlled drugs (CDs) (medicines that require extra checks and special storage arrangements because of their potential for misuse) was not constructed to the required standards and the keys to this cupboard were not held securely. The practice was unable to provide assurance that regular CDs stock checks had been carried out in

accordance with their policies and whilst there were arrangements in place for the destruction of CDs they were not being followed in a timely manner. Blank prescriptions for use in printers were not tracked in accordance with national guidance.

During this inspection we found that the practice had addressed the issues we had identified. The liquid nitrogen container was now secured in a metal cage along with the necessary personal protective equipment. CDs were appropriately stored and disposed of in a timely manner and regular checks were in place. Blank prescriptions were tracked in accordance with national guidance.

Overview of safety systems and processes

At our last inspection we found that the practice did not always adhere to its policy for recruitment checks which stated that two satisfactory references were required prior to employment.

During this inspection we saw that the practice had introduced a checklist which detailed the documents and checks that needed to be completed as part of the recruitment process. This ensured that required checks were completed prior to employment as set out in the practice's policy.