

# Ouse Valley Practice

## Quality Report

Dumbledore Primary Care Centre  
Haywards Heath  
West Sussex  
RH17 6HB  
Tel: 01444 405750  
Website: [www.ousevalleypractice.nhs.uk](http://www.ousevalleypractice.nhs.uk)

Date of inspection visit: 7 December 2016  
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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 of this practice on 1 February 2016. Breaches of Regulatory requirements were 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 regulatory responsibilities in relation to the following:

- Ensure that systems for the management and security of medicines are robust and safe:
- Ensure the actions taken as a result of the infection control audit are documented.
- Ensure that they have a record of hand written and computerised prescription serial numbers to monitor their use. This must be maintained and kept up to date.
- Maintain a record of equipment and room cleaning to assist with maintaining the cleanliness of the environment and informing future audits.

We undertook this focused inspection on 7 December 2016 to check that the provider had followed their action plan and to confirm that they now met regulatory requirements.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ouse Valley Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This report should be read in conjunction with the last report published in August 2016.

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

- We saw evidence to confirm that the practice had ensured all medicines were stored securely.
- Fridge temperature records demonstrated regular monitoring of medicine fridges at the main practice and branch surgery
- We saw evidence to demonstrate that the practice had a system for monitoring both hand written and computer generated prescriptions.
- Systems were in place to check and ensure all prescriptions were authorised prior to dispensing.
- The infection control audit had been updated and the action plan completed. Systems were in place to demonstrate room and equipment cleaning took place to maintain the cleanliness of the practice and reduce the risk of infection.

# Summary of findings

**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 rated as good for providing safe services.

Good



- At our previous inspection on 1 February 2016, we found that the practice could not demonstrate that temperatures of medicine fridges were monitored consistently. At this inspection on 7 December 2016 we found that the practice had employed a pharmacist to oversee the medicine management practices and dispensary service. We saw that all fridge temperatures were monitored and recorded regularly.
- At our inspection on 1 February 2016 we found that the practice did not have a system to monitor and keep track of computer generated prescription forms and hand written prescription pads. At this inspection we saw evidence that the provider had introduced a system that included a tracking record and audit system to monitor the stock and use of both types of prescription forms.
- At our inspection on 1 February 2016 we found that medicines were not always held securely. At this inspection we checked and found that medicine fridges were locked and all medicines were held securely.
- The practice provided evidence at this inspection to demonstrate that they had updated their infection control audit and had an action plan in place. We found the practice had taken steps to address the remedial actions set out in the action plan. Records were seen to demonstrate regular cleaning of clinical areas including the cleaning of equipment.

# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The practice was rated as good for the care of older people on 1 February 2016. This rating remains unchanged.

Good



### People with long term conditions

The practice was rated as good for the care of people with long-term conditions on 1 February 2016. This rating remains unchanged.

Good



### Families, children and young people

The practice was rated as good for the care of families, children and young people on 1 February 2016. This rating remains unchanged.

Good



### Working age people (including those recently retired and students)

The practice was rated as good for the care of working-age people (including those recently retired and students) on 1 February 2016. This rating remains unchanged.

Good



### People whose circumstances may make them vulnerable

The practice was rated as good for the care of people whose circumstances may make them vulnerable on 1 February 2016. This rating remains unchanged.

Good



### People experiencing poor mental health (including people with dementia)

The practice was rated as good for the care of people experiencing poor mental health (including people with dementia) on 1 February 2016. This rating remains unchanged.

Good



# Ouse Valley Practice

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

## Background to Ouse Valley Practice

Ouse Valley Practice offers primary medical services via a general medical services (GMS) contract to approximately 6,525 registered patients. The practice provides services to a higher number of patients who are aged between 35 and 54 and over 85, when compared with the local clinical commissioning group (CCG) and England average. The practice is in an area with lower deprivation levels compared to the nation average.

The practice clinical staff comprises of four GP Partners (all female), a nurse practitioner, two practice nurses and four health care assistants.

The Practice is supported by a pharmacist, a team of dispensary staff, administration staff including an office manager, reception and secretarial team. Day to day management is undertaken by a practice manager.

The practice runs a number of services for its patients including minor surgery, asthma clinics, child immunisation clinics, diabetes clinics, new patient checks, and weight management support. The practice also supports patients who have been excluded.

Services are provided from:

Ouse Valley Practice (Main Surgery)

Dumbledore Primary Care Centre

Haywards Heath

West Sussex

RH17 6HB

And

Balcombe Surgery (Branch)

Deanland Road

Balcombe

West Sussex

RH17 6PH

## Why we carried out this inspection

We undertook a focused inspection of Ouse Valley Practice on 7 December 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 1 February 2016 had been made.

We inspected the practice against one of the five questions we ask about services: is the service safe?

This is because the service had not been meeting some legal requirements.

## How we carried out this inspection

We reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We carried out a focussed inspection on 7 December 2016.

## Detailed findings

- We reviewed the system in place to monitor blank hand written prescription and computer generated prescription pads.
- We reviewed the systems for ensuring prescriptions were authorised before dispensing to patients or their representatives.
- We reviewed the systems for carrying out infection control audits and the monitoring of cleaning clinical areas and equipment.
- We reviewed the security and temperature monitoring of medicines fridges.

# Are services safe?

## Our findings

### Overview of safety systems and processes

- At our previous inspection on 1 February 2016, we found that the practice could not demonstrate that temperatures of medicine fridges were monitored consistently. At this inspection on 7 December 2016 we found that all fridge temperatures at the main practice and the branch were monitored and recorded regularly.
- At our inspection on 1 February 2016 we found that the practice did not have a system to monitor and keep track of computer generated prescription forms and hand written prescription pads. At this inspection we saw evidence that the provider had introduced a system that included a tracking record and audit system to monitor the stock and use of both types of prescription forms.
- At our inspection on 1 February 2016 we found that medicines were not always held securely. At this inspection we checked and found that medicine fridges were locked and all medicines were held securely.
- The practice provided evidence at this inspection to demonstrate that they had updated their infection control audit and had an action plan was in place. We found the practice had taken steps to address the remedial actions set out in their plan. For example we saw that eye protection identified as being unavailable in the practice had now been put in place. Records were seen to demonstrate that regular cleaning of clinical areas took place including the cleaning of equipment.
- At our inspection on 1 February 2016 we were told that the practice had recently identified discrepancies within their controlled drug registers. The practice explained the investigations they had undertaken and the involvement of the Controlled Drugs Accountable Officer from the NHS Area Team. At the time of the inspection the investigations was on going. Whilst there were arrangements in place for the destruction of controlled drugs they were not being followed in a timely manner. At this inspection on 7 December 2016 we found the practice had employed a pharmacist to manage the dispensary services and review the management arrangements in place. We saw that systems were in place ensure safe practice including the review of medicine stock, management of controlled medicines including their safe disposal, security of medicines and the processing of prescriptions. The practice provided evidence before our inspection to demonstrate they had taken action to fully investigate the discrepancies in records involving the Accountable Officer and local police in this process. Spot checks had been carried out and the records we saw demonstrated that regular audits had taken place.