

Willow Tree Surgery

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 a comprehensive inspection on 18 March 2015. Overall the practice was rated as good with requires improvement for the safe domain. Following that inspection we issued a requirement notice. This notice was due to a breach of Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment. The requirement notice was for the practice to implement the necessary changes to ensure patients who used the service were protected. A copy of the report detailing our findings can be found at www.cqc.org.

Our previous key findings across the areas we had inspected that needed to improve were as follows:

The provider must:

- Ensure the security of blank prescriptions at all times.
- Ensure the safe storage of combustible items and toxic chemicals.
- Maintain the premises to a safe standard at all times.
- To ensure all aspects of infection control are maintained. The provider must ensure there are suitable arrangements in place for the management

of clinical waste and ensure all areas of the practice are maintained in a way to reduce the risk of cross infection. In addition, they must ensure there are suitable arrangements for the safe handling of and management of bodily fluids taken as specimens.

The provider should:

- Ensure that non-medical electrical equipment is maintained.
- Check the water supply to ensure there is no risk of legionella.

At the previous inspection in March 2015 we had also noted that there were gaps in the prescription paper management at the practice and that the practice did not have a sufficiently detailed business continuity plan.

At the inspection undertaken in June 2016 we found:

- Changes had been put in place for prescription paper management, however, minor amendments were made during the inspection for greater security, it is the practices responsibility to ensure these measures are sustained.
- The provider had implemented safe systems for the storage of combustible items and toxic chemicals.

Summary of findings

- The provider had implemented changes to the fabric and fittings of the building and facilities to ensure that it is safe and fit for purpose.
- Safe systems were in place for infection control, the management of clinical waste and safe handling and management of bodily fluids taken as specimens.
- We also found that changes had been put in place for non- medical electrical equipment checks, assessment of the risks of legionella and fire safety assessments at the practice. It is the practices responsibility to ensure these measures are sustained.

The provider should:

- The provider should ensure that the new system of prescription paper security is sustained.
- The provider should ensure the storage of clinical stores for specimen collection is assessed to reduce the risk of cross infection from droplet infection.
- The practice should ensure that the learning from the staff fire drills is acted upon, reviewed and updated when required.

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.

- Risks to patients were assessed and well managed specifically those relating to infection control
- There was an improved system to ensure that portable electrical equipment had the required safety checks in place.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

The provider should:

- The provider should ensure that the new system of prescription paper security is sustained.
- The provider should ensure the storage of clinical stores for specimen collection is assessed to reduce the risk of cross infection from droplet infection.
- The practice should ensure that the learning from the staff fire drills is acted upon, reviewed and updated when required.

Willow Tree Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Willow Tree Surgery

The Southmead and Henbury Family Practice provides services across two sites. The main practice is in Ullswater Road in Southmead and the other practice known as the Willow Tree Surgery in Trevelyan Walk in Henbury.

The practice register lists in excess of 11,300 patients with a higher than average number of children registered. Approximately 3,270 patients are registered at the Willow Tree surgery. There are eight partners and two salaried GPs comprising of six females and two males. There is a practice business manager and assistance practice business manager. The nursing team are managed by a senior nurse manager. There is also a business support team.

Information from Public Health England indicates the practice provides services in areas of high deprivation with higher than national rates for child poverty, older people living in poverty and long term unemployment. The practice told us the average life expectancy for people living in this area is 9.4 years less than neighbouring Henleaze.

The practice provides services under the standard personal medical services contract. These being essential, additional and enhanced services. The core (essential) services

include GP consultations, asthma clinics, coronary heart disease clinics and diabetes clinics. Additional services include contraceptive services, maternity services and child health surveillance.

Enhanced services include dementia identification and management, diabetes management and learning disability management. The practice also provides a range of other services including minor surgery. There is an independent pharmacy within the Willow Tree Surgery.

We inspected both locations within this organisation. This report relates to the regulatory activities being carried out at:

1 Trevelyan Walk,
Bristol,
BS10 7NY

Why we carried out this inspection

We carried out a focused inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is 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.

Detailed findings

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice. We carried out an announced visit on 23 June 2016. During our visit we:

- Spoke with a range of staff including the practice manager, deputy practice manager, senior practice nurse and administration and reception staff.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

We also looked at how well services were provided for specific groups of people and what good care looked like for them. The population groups are:

- Older people
- People with long-term conditions
- Families, children and young people
- Working age people (including those recently retired and students)
- People whose circumstances may make them vulnerable
- People experiencing poor mental health (including people with dementia).

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

Overview of safety systems and processes

The location Willow Tree Surgery is wholly owned by the GP partnership and so they have a total responsibility for ensuring a safe and suitable environment is provided.

At the previous comprehensive inspection in March 2015 we carried out an audit of infection control arrangements using a recognised infection prevention and control audit tool. We found whilst most of the arrangements for hand hygiene were in place, hand hygiene did not feature as an integral part of staff induction. There were some hand washing facilities where there was no liquid soap. At this focussed, follow up inspection completed in June 2016 we found the whole practice approach to infection control had been reviewed. This included carrying out regular hand hygiene audits with all staff and ensuring liquid soap was provided at all handwashing facilities at the practice.

In March 2015 we found areas of the practice were not maintained in a way to reduce the risk of cross infection. There were areas around the building where paint had chipped which meant there was a risk to maintaining cleanliness at the practice. We also identified that the risks for legionella (Legionella is a term for a particular bacterium which can contaminate water systems in buildings) had not been fully assessed. During this inspection we saw evidence of the updated policies and procedures for infection control had been implemented, including the audit processes carried out in the practice. We saw information and copies of a legionella risk assessment carried out in July 2015 by a professional provider which ensured the water systems were tested and found to be safe.

We also found in March 2015 the arrangements for the disposal of clinical waste were not satisfactory. We found bins were dirty and were not of the foot pedal opening type, required to reduce the risk of cross contamination. At this inspection in June 2016 we saw these had been replaced and checks of these bins were now included in the infection control audit processes.

At our inspection in March 2015 we saw there were arrangements for the safe handling of specimens. However, there were no records to show staff had been trained in the safe use of equipment used for handling specimens. At this inspection we found training had been implemented and

protocols updated. We saw Willow Tree Surgery had suitable hand washing facilities in place in the sluice room. However, the sluice room was also partially used for storage of clinical supplies for collection of specimens and there was a potential of cross infection from droplet infection.

Since the last inspection in March 2015 the provider had engaged a commercial company to provide cleaning services at the practice. We saw evidence of the cleaning contract, the audit checks and the good communication between the provider and the company. We saw that the cleaning company had implemented new systems that were in accordance to guidance. They had also implemented safety measures for the management of chemicals hazardous to health such as cleaning fluids. These were now secured safely or brought in by the cleaning company when they attended the practice and removed when they left.

Since the last inspection the practice had continued with a system of prescription paper security logging. During this previous inspection we had found that prescription paper was left unsecured in computer printers. The new measures the practice had put in place included including removing prescription paper at the end of a working day and replacing prescription paper back in the printers at the start of the day. At this inspection in June 2016 we looked at this process to check its effectiveness in keeping the prescription stationery secure. We found that although prescription paper was removed from printers at the end of the day, rooms were left unsecure during the day when staff were not in attendance. This meant that prescription paper could be tampered with or removed without staff knowledge. Before the end of this inspection we saw that prescription paper from unoccupied rooms was removed immediately and returned to safe storage. Following the inspection were also provided with a copy of a new room security policy and procedure to ensure a more robust process had been implemented.

During the previous inspection in March 2015, the systems used by the practice for the safe management and testing of non- medical equipment did not ensure that they were tested regularly. The items we saw had not had electrical safety checks within the previous 12 months. At this

Are services safe?

inspection in June 2016 the provider had evidence to show that the safety checks had been carried out by an appropriate professional. We saw corresponding safety check inspection labels on equipment within the practice.

Monitoring risks to patients

At the last inspection in March 2015 we identified that the provider had some systems in place for health and safety but had gaps in the fire risk assessment information held at the practice. The provider had submitted a fire risk assessment at the end of this inspection in June 2016.

During this inspection in June 2016 we were shown the new health and safety policies and procedures and some of the updated fire safety assessment documents. Although the provider had improved the quality of information available to support fire safety systems were in place such as a policy, procedures and risk assessment there was little evidence that regular fire drills had been carried out during the last 12 months. Following this inspection in June 2016 we were provided with an updated version of a fire risk assessment specific to the practice and associated fire policies and procedures. We were also provided with a copy of a recent fire drill and the learning points from the drill had been identified. These had included staff actions, roles and responsibilities and possible changes to the current facilities.

At this inspection in June 2016 the provider had reviewed the facilities at the Willow Tree Surgery and had implemented some changes to improve the environment. We saw that the rucked carpet in the reception area had been removed so that there was no longer a trip hazard. Changes had also been made to other flooring to ensure that it was safe and appropriate for use. The provider had risk assessed the clear roof and windows above the porch entrance hall to the practice. They had also recently had the roof replaced to ensure that it was not a safety hazard for patients and others entering and leaving the building. Repairs to the exposed wires had been made to the electric light fitment where the computer server was housed.

We saw an updated copy of the practice business contingency plan should the service delivery be halted through fire, power shortage or access to building be prohibited. We found this new updated document clear and provided staff with good instruction of how to respond should such an event occur. There was a system in place to review and update on a regular basis all policies and procedures relating to health and safety.