

# The Glebeland Surgery

## Inspection report

The Glebe  
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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 location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at The Glebeland Surgery on 27 April 2018 as part of our inspection programme. The overall rating for the practice was Good. The full comprehensive report on the April 2018 inspection can be found on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on 14 September 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation we identified in our previous inspection on 27 April 2018. 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.

At our previous inspection the areas where the provider needed to make improvements were:

- Ensure care and treatment is provided in a safe way to patients. The practice did not have a proper and safe system for the management of medicines. Prescriptions were not produced and signed in accordance with the relevant regulations.

The areas where the provider were advised to make improvements were:

- Review their system for maintaining effective oversight of staff training.
- Review their system to identify and provide support to carers.

During our desk-based review our key findings were as follows:

- The practice now had a proper and safe system for the management of medicines. Prescriptions were produced and signed in accordance with the relevant regulations.
- There was now a system in place for the effective oversight of staff training.
- There was a system in place to identify and provide support to carers.

**Professor Steve Field** CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

## Population group ratings

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

## Our inspection team

This inspection was carried out by a CQC Lead Inspector.

## Background to The Glebeland Surgery

The Glebeland is situated in a residential area in the Worcestershire village of Belbroughton near Bromsgrove. It has 4,650 patients. There has been a GP practice called The Glebeland in Belbroughton since the 1960s. The Glebeland is a dispensing practice, which provides dispensing services to patients on their practice list who live more than one mile away from their nearest pharmacy.

The practice is an area with low social and economic deprivation. The practice provides care to patients in two large care homes, a large residential home, a community home for adults with Down syndrome and a large residential school for children with learning and behavioural difficulties. The practice has one male and one female partner and one male and one female

salaried GP. The practice has two nurses. The clinical team are supported by a practice manager and a team of three administrative and reception staff. The practice dispensary is staffed by three qualified dispensers.

The practice is a teaching practice which provides placements for medical students who have not yet qualified as doctors.

The practice has a General Medical Services (GMS) contract with NHS England. The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities. The practice does not provide out of hours services to their own patients. Patients are provided with information about local out of hours services which they can access by using the NHS 111 phone number.

# Are services safe?

**At our previous inspection on 27 April 2018, we rated the practice as requires improvement for providing safe services as there was no proper and safe management of medicines. Prescriptions were not produced and signed in accordance with the relevant regulations.**

**These arrangements had significantly improved when we undertook a follow up inspection on 14 September 2018. The practice is now rated as good for providing safe services.**

## **Safe and appropriate use of medicines**

At the previous inspection on 27 April 2018 we found that repeat prescriptions were not produced and signed in accordance with Schedule 6 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and

paragraph 39(3) of Schedule 6 to the GMS Regulations. They were not reviewed and signed by a doctor until after the medicines had been handed out to the patient. The Standing Operating Procedure (SOP) for dispensing items did not specify that the prescriptions should be signed before being dispensed to the patient. The practice had carried out a risk assessment to justify the rationale for not signing prescriptions before they were dispensed to the patient.

During our desk-based review carried out on 14 September 2018 we found that the practice was now producing and signing prescriptions in accordance with the relevant regulations. The practice now had a SOP in place which specified that the prescriptions should be signed by a GP before being dispensed to the patient.