

Stonecross and West Drive Surgery

Quality Report

25 Street End Road
Chatham
Kent.
ME5 0AA

Tel: 01634 842334

Date of inspection visit: 7 April 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 well-led?

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 at Stonecross and West Drive Surgery on 23 June 2015. Breaches of the legal requirements were found in relation to:

The management of safety, of infection prevention control, fire risks and the governance of the practice.

Therefore, a Requirement Notice was served under Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Following the comprehensive inspection, the practice wrote to us to tell us what they would do to meet the legal requirements in relation to the breaches.

We undertook this focussed inspection on 7 April 2016, to check that the practice had followed their plan and to confirm that they now met the legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting 'all reports' link for Stonecross and West Drive Surgery on our website at www.cqc.org.uk.

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 well-led?

At our previous comprehensive inspection on 23 June 2015 the practice had been rated as requires improvement for providing well-led services.

- It had a statement of purpose and had developed a business plan that had been shared with all staff, who were aware of their responsibilities in relation to it.
- There was a clear leadership structure and staff felt supported by management and knew who to approach with issues.
- The practice had a number of policies and procedures to govern activity and these had been reviewed.
- Staff meetings were held, but the GP partners did not attend these.
- Governance / management meetings were not held to clearly identify how governance decisions were made and agreed amongst the GP partners.
- The practice governance arrangements did not include a system to audit all areas of safety.
- The practice had mechanisms to seek feedback from patients, although an active patient participation group (PPG) had not been established.

At our focussed follow-up inspection on 7 April 2016, the practice provided records and information to demonstrate that the requirements had been met.

- Whole staff meetings had been held and these were attended by one or more of the GP partners.
- The practice had introduced a system to manage general and clinical governance.
- There had been a comprehensive review of all the areas of safety and a system to help ensure they were regularly audited.
- The practice showed how they received and acted on patient feedback. They had recruited some PPG members and were continuing to try and do so.

Good



Stonecross and West Drive Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

a CQC Inspector

Background to Stonecross and West Drive Surgery

Stonecross and West Drive Surgery provides medical care from 8am to 12pm and from 3pm to 6.30pm each week day. Practice staff are available to take telephone calls throughout the day, except between 12pm and 2pm, when the 'out of hours' service takes calls from patients. The practice is situated in the town of Chatham in Kent and provides a service to approximately 7,400. The practice has a branch surgery within the same town.

Routine health care and clinical services are offered at the practice, led and provided by the GPs and nursing team. The practice has the highest number of patients registered between the ages of 15 and 44. There are fewer patients over the age of 65 registered at the practice than the national average, although the practice is in line with the local average for this age group. The number of patients recognised as suffering deprivation for this practice, including income deprivation affecting children, is higher than both the local and national averages.

The practice has three GP partners, two of whom are male. There are two part-time female practice nurses, and two part-time female health care assistants. There are a number of administration staff and a practice manager at each practice.

The practice does not provide out of hours services to its patients and there are arrangements with another provider Medway On Call Care to deliver services to patients when the practice is closed. The practice has a general medical services (GMS) contract with NHS England for delivering primary care services to local communities.

Services are delivered from:

Stonecross and West Drive Surgery

25 Street End Road

Chatham

Kent. ME5 0AA

and:

and a branch surgery:

West Drive Surgery

West Drive

Chatham

Kent. ME5 9XG.

The branch surgery was not visited as part of this inspection.

Why we carried out this inspection

We undertook an announced focused inspection of Stonecross and West Drive Surgery on 7 April 2016. This

Detailed findings

inspection was carried out to check that improvements had been made to meet the legal requirements planned by the practice, following our comprehensive inspection on 21 and 28 April 2015.

We inspected this practice against one of the five questions we ask about services that is: is the well-led? This is because the service was not meeting some of the legal requirements in relation to this question.

How we carried out this inspection

Before visiting, we reviewed information sent to us by the practice that told us how the breaches identified during the comprehensive inspection had been addressed. During our visit we spoke with the practice manager and administration staff. We reviewed information, documents and records kept at the practice.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

Governance arrangements

The practice had undertaken a systematic review of governance. We looked at 11 folders of documents relating to different aspects of governance. Effective clinical governance systems had been introduced:

- There had been clinical governance meetings. We saw that the meetings had discussed, and made changes in areas such as, the system of telephone appointments, anti-biotic prescribing and greater use of generic medicines.
- There had been other clinical meetings such as those with the community pharmacy team and to discuss and action significant events.

There was a systematic approach to general governance within the practice:

- There had been whole staff meeting which had been attended by one or more of the GP partners. Staff said that this had increased the value that staff placed on such meetings.
- There were regular checks of emergency medicines and equipment. We saw that out of date medicines had been returned to the pharmacy and replaced.

- There were audits of infection control and the practice had implemented the resultant actions. There had been changes for example more hazard signs, additional sharps boxes and the introduction of a specimen handling policy.
- Training had been reviewed and additional training delivered in areas such as fire safety and safeguarding of adults and children. Appropriate staff had undergone checks with the Disclosure and Barring Service (DBS). (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).
- There was a building security process that included records of clinical waste, Legionella testing, records of checking of fire safety equipment and testing of portable electrical equipment.

Seeking and acting on feedback from patients, the public and staff

The practice was able to demonstrate that they encouraged and valued feedback from patients, the public and staff. They sought patients' feedback and engaged patients in the delivery of the service.

- The practice recruited two new members for their Patient Participation Group, a chair had been appointed and there was work was underway to recruit further members to the group. A meeting of the group was planned.