

Gosford Green Surgery Quality Report

Clay Lane Health Centre 5 Clay Lane Coventry CV2 4LJ Tel: 024 7643 7080 Website: www.gosfordgreensurgery.nhs.uk

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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



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 Gosford Green Surgery on 16 May 2017. As a result of our inspection the practice was rated as good overall but required improvement for providing safe services. The full comprehensive report on the May 2017 inspection can be found by selecting the 'all reports' link for Gosford Green Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based focused inspection carried out on 16 August 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulations that we identified in our previous inspection on 16 May 2017. 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.

Our key findings were as follows:

• The practice had introduced a pathway and written guidance to ensure that all staff were aware of the correct procedure to follow when reviewing letters

from the hospital that indicated changes in medicines. They had also carried out an audit to evidence that all staff had correctly adhered to the process since its implementation.

- The practice had a system and policy for reporting significant events but had reviewed and enhanced this to encourage staff to consider more topics for significant event reporting.
- The practice had replaced missing items and ensured that emergency medicines and equipment included all necessary items recommended for use in an emergency.
- The National Patient Survey results published in July 2017 showed that the patient satisfaction was higher in most areas than the previous survey had reported and indicated improvement had been made. Generally the practice results were now comparable to the Clinical Commsioning Group (CCG) and national averages.
- The practice had obtained posters advertising national screening and had placed these in the waiting area to encourage patient uptake. Bowel screening was also promoted on the practice health promotion television

Summary of findings

screen in the waiting area. The practice told us that clinical staff were also reminding eligible patients opportunistically during consultations of the importance of screening. Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

During our comprehensive inspection on 16 May 2017, we identified a breach of legal requirement. The practice needed to take action to ensure that all proposed changes to medicines proposed by the hospital were viewed by a GP prior to prescriptions being issued. During our desk based focused inspection on 16 August 2017 we found that the practice had taken action to improve this area. They had introduced a system and process to appropriately manage changes in prescriptions following hospital consultations. They had also enhanced the policy for responding to significant events to include more topics for consideration and encourage staff to report events. Missing items from emergency equipment had been replaced and the practice's emergency equipment contained the recommended items for use in an emergency.

The practice is now rated as good for providing safe services.

Good

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 Following our comprehensive inspection on 16 May 2017 we rated the practice as good for the population group of older people. We did not review any evidence during our desk based focused inspection to alter this rating.	Good
People with long term conditions Following our comprehensive inspection on 16 May 2017 we rated the practice as good for the population group of people with long-term conditions. We did not review any evidence during our desk based focused inspection to alter this rating.	Good
Families, children and young people Following our comprehensive inspection on 16 May 2017 we rated the practice as good for the population group of families, children and young people. We did not review any evidence during our desk based focused inspection to alter this rating.	Good
Working age people (including those recently retired and students) Following our comprehensive inspection on 16 May 2017 we rated the practice as good for the population group of working age people (including those recently retired and students). We did not review any evidence during our desk based focused inspection to alter this rating.	Good
People whose circumstances may make them vulnerable Following our comprehensive inspection on 16 May 2017 we rated the practice as good for the population group of people whose circumstances may make them vulnerable. We did not review any evidence during our desk based focused inspection to alter this rating.	Good
People experiencing poor mental health (including people with dementia) Following our comprehensive inspection on 16 May 2017 we rated the practice as good for the population group of people experiencing poor mental health. We did not review any evidence during our desk based focused inspection to alter this rating.	Good



Gosford Green Surgery Detailed findings

Our inspection team

Our inspection team was led by:

The desk based focused inspection was completed by a CQC Lead Inspector.

Background to Gosford Green Surgery

Gosford Green Surgery is a GP practice located close to Coventry city centre. It operates under a General Medical Services (GMS) contract with NHS England. A GMS contract is one type of contract between general practices and NHS England for delivering primary care services to local communities. The practice operates from modern accessible premises it has occupied since 2013. It is operated by an individual GP (a practice with one GP who has managerial and financial responsibility for running the business) and has a patient list size of 3,001.

The catchment area for Gosford Green Surgery experiences higher than average levels of ethnic diversity and social deprivation, and a significantly larger than average proportion of the population belong to young family age groups. The practice has expanded its contracted obligations to provide enhanced services to patients. An enhanced service is above the contractual requirement of the practice and is commissioned to improve the range of services available to patients. For example, the practice offers extended hours access, minor surgery, and rotavirus and shingles immunisation.

The clinical team includes one male GP, one female practice nurse and one female healthcare assistant. The practice also uses two regular locum GPs (one male and

one female) to support continuity of care for patients. The clinical team is supported by a practice manager, an assistant manager, and five reception and administrative staff.

Gosford Green Surgery is open from 8.30am to 6.30pm on weekdays. The practice also offers appointments to patients during extended hours from 6.30pm to 8pm every Monday. From 8am to 8.30am there are arrangements to divert calls to a service provided by West Midlands Ambulance Service which refers urgent cases to the on-call GP. Outside of the practice's core opening hours of 8am to 6.30pm there are arrangements in place to direct patients to out-of-hours services provided via NHS 111.

Why we carried out this inspection

We undertook a comprehensive inspection of Gosford Green Surgery on 16 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement in the provision of safe services. The full comprehensive report following the inspection in May 2016 can be found by selecting the 'all reports' link for Gosford Green Surgery on our website at www.cqc.org.uk.

We undertook a desk based focused inspection of Gosford Green Surgery on 16 August 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Detailed findings

How we carried out this inspection

Before we carried out this desk based focused inspection, we asked the provider to submit information and evidence to demonstrate the actions they had taken to address the breach of regulatory requirement that we identified during our comprehensive inspection on 16 May 2017. We carried out a desk based focused inspection of Gosford Green Surgery on 16 August 2017. This involved reviewing evidence that: • Demonstrated the practice had introduced a system and process, which ensured that changes in medicines proposed by the hospital were made by a GP.

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

At our previous inspection on 16 May 2017, we rated the practice as requires improvement for providing safe services as the provider did not ensure that all proposed changes to prescriptions directed by the hospital were reviewed by the GP prior to prescriptions being issued.

These arrangements had significantly improved when we undertook a desk based focused inspection on 16 August 2017 and the provider had implemented measures to address this. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

The practice had reviewed their process for dealing with hospital letters. They had developed and submitted a Clinical Post Management Pathway document which clearly outlined the actions staff were required to take when receiving and reviewing hospital letters. The practice had also submitted an audit document which demonstrated that this process had been implemented and actions had been taken by the appropriate staff as indicated in the guidance.

At our previous inspection we saw that the practice had a system and policy for reporting significant events. However, they had reviewed and enhanced this to encourage staff to consider more topics for significant event reporting and shared with staff at a practice meeting. They submitted documentary evidence of this policy.

During our previous inspection we noted that one of the recommended items of medicine was missing and that airways were out of date. The practice had replaced missing items immediately following our inspection and ensured that emergency medicines and equipment included all the necessary items recommended for use in an emergency. They provided documentary evidence to demonstrate this.