Frimley Park Hospital (Frimley Primary Care Service)

Quality Report

Frimley Park Hospital
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Website: www.nhuc.co.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

Overall rating for this service	Good
Are services safe?	Good

Summary of findings

Contents

Overall summary

Letter from the Chief Inspector of General Practice

This service is rated as Good overall. (Previous inspection 21 February 2017 to 23 February 2017 – Good)

The key questions that we looked at on this occasion were rated as:

Are services safe? – Good

We carried out an announced focused inspection at Frimley Primary Care Service on 7 November 2017 to follow up on breaches of regulations identified at the previous inspection of 21 February 2017 to 23 February 2017. We looked at aspects of the safe domain.

The full comprehensive report on the 21 February 2017 to 23 February 2017 inspection can be found by selecting the 'all reports' link for Frimley Primary Care Service on our website at www.cqc.org.uk.

At our inspection of 21 February 2017 to 23 February 2017, we found that:

- Medicines were not always provided to patients with an appropriate patient information leaflet.
- Processes in place for checking medicines, including those held at the base and in the out of hours vehicles were not sufficient to ensure that stock levels were appropriate.
- Contrary to guidelines some medicines supplies held in vehicles used for visiting patients had been split leaving only a few tablets inside the box and fewer than the number stated on the box.
- Lockable boxes held in each vehicle containing prescriptions for stock medicines and all medical records were only emptied every few days.
- Some boxes held in the out of hours vehicles for the safe storage and disposal of used sharps were being used longer than best practice guidelines and were incompletely labelled.

At this inspection we found that:

- All patients received an appropriate patient information leaflet when medicines were dispensed to them.
- A system of daily stock checks had been introduced that ensured that there were appropriate stocks of medicines stored at the base and available for the vehicles.
- Systems had been introduced to ensure that small quantities of medicines could be dispensed to patients and accurately recorded without splitting boxes containing full courses of medicines.
- The effectiveness of the new systems had been audited by the service.
- Lockable boxes in each vehicle containing prescriptions for stock medicines and all medical records were now emptied daily.
- Sharps boxes were being correctly used and labelled.

Additionally we saw that:

Summary of findings

- The service had reviewed the practice of clinicians providing their own personal equipment and was going to provide all the equipment themselves.
- Vehicle checklists had been revised and the levels of oxygen in the oxygen canisters held in the vehicles were checked daily.
- The complaints system had been revised, complaints were correctly identified and copies of communications were retained for an appropriate period of time.

Professor Steve Field CBE FRCP FFPH FRCGPChief Inspector of General Practice

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Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a CQC lead inspector and a second CQC inspector.

Background to Frimley Park Hospital (Frimley Primary Care Service)

The Frimley Primary Health Care Service is run by North Hampshire Urgent Care (NHUC) which is a not for profit, community benefit society, run by a membership. North Hampshire Urgent Care's head office is based at:

The Meads Business Centre, 19 Kingsmead, Farnborough, Hants GU14 7SR

NHUC also runs another service from the same head office based at Basingstoke Hospital, which is the subject of a separate report. The two locations have a total catchment of about 640,000 patients.

Frimley Primary Care Centre is located in the out patients department of:

Frimley Park Hospital, Portsmouth Rd, Frimley, Camberley GU16 7UJ

The service sees approximately 43,000 primary care patients per year and is open from 6.30pm to 8am Monday to Friday and 24 hours a day on Saturdays, Sundays and bank holidays. Approximately 41% of patients receive self-care advice over the phone, 51% are seen at the primary care centre and 8% receive visits at their home. The service is commissioned by three clinical commissioning groups (CCGs). These are North East Hampshire; Farnham and Surrey Heath; and Ascot and Bracknell CCGs.

Patients can access the service via the NHS 111 service.

NHUC employs a total of 185 staff across the Frimley Park and Basingstoke locations including 60 nurses, 38 drivers and 25 receptionists. GPs are self-employed and therefore not included in the employee numbers.

The clinical workforce is made up almost entirely of local GPs and nurses and there is a low use of locum staff. Of the nursing staff 74% are advanced nurse practitioners with prescribing rights.

Two medical directors, one GP elected to the NHUC council, a chief nurse and lead nurse all work at the Frimley service clinically as well as at a senior level behind the scenes.

Good

Are services safe?

Our findings

We rated the service as good for providing safe services.

At our previous inspection on 21 February 2017 to 23 February 2017, we rated the practice as requires improvement for providing safe services.

We found deficiencies in the arrangements for the management of medicines. Medicines were not always provided to patients with an appropriate patient information leaflet. Processes in place for checking medicines, including those held at the base and also in the medicines storage boxes for the out of hours vehicles were not sufficient to ensure that stock levels were appropriate. Guidelines indicated that only full courses of medicines should be prescribed yet in the medicines boxes in the vehicles used for home visits, some boxes had been split, leaving only a few tablets inside the box and fewer than the number stated on the box. Guidelines in the medicines boxes for the vehicles stating that the box should be checked before going out on a visit to ensure there was sufficient stock were not being followed.

Lockable boxes in each vehicle where completed prescriptions for stock medicines and medical records were kept after use were only emptied every few days. Sharps safes used for disposal of sharp clinical waste had been open for longer than the best practice guidelines advised and had not been correctly labelled.

At this inspection we found that the practice had implemented a number of improvements:

Safety systems and processes

Sharps safes used for disposal of sharp clinical waste were now checked daily and replaced if necessary. All sharp safes in the vehicles were being used within best practice guidelines and were correctly labelled. Oxygen cylinders were also checked as part of the daily vehicle checks by the drivers and replaced if less than half full.

Safe and appropriate use of medicines

The provider had employed a member of staff to monitor and replenish stock levels of medicines both at the base and in the vehicles. Stock for the vehicles was checked, recorded and replenished on a daily basis during the week and on Fridays sufficient medicines were stocked to allow for the weekend. The main stock cupboard was refilled weekly. The provider had recently employed two pharmacists who were going to assist with checking stock so that stock could be checked at the weekends as well. Systems were in place to replenish medicines at short notice should there be an unexpected increase in requirements. All stock use was recorded by clinicians and an audit trail allowed cross checking of use against stock remaining.

Systems had been put in place to allow small quantities of medicines for urgent use to be dispensed without opening boxes containing complete courses of medicines. Supplies of full courses of medicines were also kept at the base and taken out in the vehicles. These were sealed so that the contents could not be removed without it being obvious. All medicines dispensed were recorded and could be traced to the dispensing clinician. Audits of the systems were carried out regularly. There were sufficient supplies of photocopied patient information sheets for each medicine dispensed to ensure that all patients received one.

The lockable boxes kept in each vehicle for the safe storage of completed prescriptions for stock medicines and medical records were now brought in and emptied daily. At the weekend they were brought in, emptied and the contents locked in a cupboard until they could be processed on the next weekday.