

Heathfield Surgery

Inspection report

96-98 High Street Heathfield TN21 8JD Tel: 01435864999 www.heathfieldsurgery.co.uk

Date of inspection visit: 8 September 2021 Date of publication: 20/12/2021

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	Requires Improvement	
Are services safe?	Requires Improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced inspection at Heathfield Surgery on 8 September 2021. Overall, the practice is rated as Requires improvement.

Safe – Requires improvement

Effective – Good

Caring – Not inspected

Responsive - Not inspected

Well-led – Requires improvement

Following our previous inspection between 9 to 19 November 2020, the practice was rated as requires improvement overall and for providing well-led services. The practice was rated inadequate for providing safe services. The practice was rated good for providing caring and responsive services.

The full reports for previous inspections can be found by selecting the 'all reports' link for Heathfield Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a focused inspection looking at the safe, effective and well led domains, with the previous ratings for caring and responsive carried forward.

We reviewed the breaches identified at the last inspection, carried out between 9 and 19 November 2020:

We previously rated the practice as inadequate for providing safe services because:

• Although there had been improvement since our last inspection to address concerns raised, this inspection identified areas of medicines management that were not sufficient to keep patients safe.

We previously rated the practice as requires improvement for providing well-led services because:

- Although there had been significant improvement to address concerns and leaders had demonstrated that they had a credible strategy to develop sustainable care.
- We identified significant concerns around clinical governance.

We also reviewed the areas where the previous inspection identified that the provider should make an improvement:

- Review and improve how the overview of staff vaccination status is recorded.
- Complete the implementation of a system for recording near misses in the dispensary.
- Review and strengthen the system for ensuring policies contain up to date information and are practice specific.

How we carried out the inspection

Overall summary

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using telephone and video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit
- A staff questionnaire emailed to all staff.

Our findings

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as Requires improvement overall.

We found that:

- The practice had made improvements in how near misses in the dispensary were recorded and integrated into the practice significant events process.
- The practice had made improvements in the specific areas identified at our November 2020 inspection.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- There were still areas of medicines management and clinical governance that could be improved.
- Significant event reporting and recording was well established but learning was not always disseminated effectively to drive improvement.

We found two breaches of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

The provider **should**:

- Review and improve how medication reviews are coded within the clinical system.
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Overall summary

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using telephone and video conferencing facilities and completed clinical searches and records reviews. The team also included two additional CQC inspectors who undertook site visits.

Background to Heathfield Surgery

Heathfield Surgery is a semi-rural practice which offers general medical services to the population of the Wealden area. At the time of our inspection there were approximately 12,500 patients registered with the practice. Services are provided from the following sites and we visited both sites as part of this inspection activity:

Heathfield Surgery

96-98 High Street

Heathfield

TN218JD

The practice has a branch surgery at:

The Firs Surgery

Little London Road

Cross in Hand

RN21 OLT

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

The practice offers services from the main practice and a branch surgery. Patients can access services at both surgeries.

The practice has six GP partners and one salaried GP (male and female), four nurses, three health care assistants and a phlebotomist. They are supported by a practice manager, deputy practice manager and a team of reception and

administration staff. The practice also has a dispensary at each surgery which are run by a team of dispensers and dispensary assistants. Heathfield Surgery is a training practice, so it takes supernumerary registrars who are qualified doctors completing their specialist training as GPs. At the time of our inspection there was one registrar attached to the practice.

The practice is registered with CQC to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Family planning services
- Maternity and midwifery services
- Surgical procedures
- Diagnostic and screening procedures

For further details please see the practice website www.heathfieldsurgery.co.uk.

The practice is situated within the High Weald Lewes Havens Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of approximately 21,500. This is part of a contract held with NHS England.

The practice is part of a primary care network of four local GP practices. This network employs a clinical pharmacist, care co-ordinator team and a physician associate who work in this practice.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments are telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgeries.

Extended access is provided locally by the primary care network and through a GP federation, where late evening and weekend appointments are available. Out of hours services are provided through NHS 111.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	 Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment There was a lack of proper and safe management of medicines. In particular: Patients prescribed medicines, including high risk medicines, medicines used in the treatment and prevention of blood clots and strokes and the treatment of high blood pressure, were not always monitored in line with current prescribing guidance. The practice was not always prescribing in line with medicines and healthcare products regulatory agency safety alerts. Test results were not always followed up appropriately in order to diagnose long term conditions.

This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk.

There was additional evidence of poor governance. In particular:

- Learning was not always shared effectively to drive improvement.
- GPs were not always aware of the full monitoring requirements for the medicines they were prescribing.

Requirement notices

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.