

Upton Village Surgery

Quality Report

Wealstone Lane

Upton

Chester

Cheshire

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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	
Are services effective?	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 of Upton Village Surgery on 21 June 2016. The overall rating for the practice was Good. However, the practice was rated as Requires Improvement for providing safe services. The full comprehensive report on the June 2016 inspection can be found by selecting the 'all reports' link for Upton Village Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 14 February 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified at our previous inspection on 21 June 2016. This report covers our findings in relation to those requirements, additional improvements made since our last inspection and further improvements that should be made.

Overall the practice is rated as Good.

Our key findings were as follows:

• Action had been taken to ensure that a record of the required staff recruitment information was maintained.

The following improvements to the service had also been made:

- A system had been introduced to ensure a record was made of the receipt and allocation of printable prescriptions.
- A review of the system for monitoring staff training needs had taken place.
- The complaint procedure had been revised to reflect the alternative complaint pathways advertised on the practice website.

We identified an area of practice where the provider should make improvements:

• The provider should ensure that the training plan is followed so that staff receive the training they require for their roles.

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 safe?

The practice is rated as good for providing safe services. Action had been taken to ensure that a record of the required staff recruitment information was maintained. We also found that further improvements had been made to the safety of the practice. A system had been introduced to ensure a record was made of the receipt and allocation of printable prescriptions.

Good



Are services effective?

The practice is rated good for providing effective services. The service had put a system in place for recording staff training that would enable them to monitor and plan for staff training needs. This identified shortfalls in mandatory training and a plan was in place to demonstrate how these shortfalls would be met.

Good



Summary of findings

What people who use the service say

The inspection was undertaken by a CQC inspector.

Areas for improvement

Action the service SHOULD take to improve

• The provider should ensure that the training plan is followed so that staff receive the training they require for their roles.



Upton Village Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was undertaken by a CQC inspector.

Background to Upton Village Surgery

Upton Village Surgery are responsible for providing primary care services to approximately 6,500 patients. The practice is situated in Wealstone Lane, Upton, Chester. The practice is based in an area with lower levels of economic deprivation when compared to other practices nationally. The age profile of the practice is about average when compared to other practices locally and nationally. The number of patients with a long standing health condition is lower when compared to other practices nationally.

The staff team includes three partner GPs, one salaried GP, three practice nurses, a health care assistant, practice manager and administration and reception staff. The practice is a training practice.

The practice is open 8am to 6.30pm Monday to Friday. An extended hour's service for routine appointments and an out of hour's service are commissioned by West Cheshire CCG and provided by Cheshire and Wirral Partnership NHS Foundation Trust.

The practice has a General Medical Services (GMS) contract. The practice offers a range of enhanced services including flu and shingles vaccinations, timely diagnosis of dementia and minor surgery.

Why we carried out this inspection

We undertook a comprehensive inspection of Upton Village Surgery on 21 June 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as Good. The full comprehensive report following the inspection on 21 June 2016 can be found by selecting the 'all reports' link for Upton Village Surgery on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Upton Village Surgery on 14 February 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.

How we carried out this inspection

We carried out a desk-based focused inspection of Upton Village Surgery on 14 February 2017. This involved reviewing evidence that:

- Processes had been put in place to ensure a record was maintained of the required staff recruitment information.
- Improvements had been made to the complaint procedure and records relating to staff training and prescription security.

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 21 June 2016 we rated the practice as requires improvement for providing safe services. Improvements were needed to the records of recruitment to demonstrate that the staff employed were suitable for their roles.

When we undertook a follow up inspection on 14 February 2016 we found that improvements had been made. We looked at the recruitment records and found that references had been undertaken and a proforma had been introduced to ensure Nursing and Midwery registration checks were undertaken prior to employment of nursing staff. A Disclosure and Barring Service (DBS)

check had either been received or applied for the clinical staff who had not received these checks at the last inspection. Disclosure and Barring Service 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.

At our previous inspection on 21 June 2016 we identified that a record was not made of the receipt and allocation of printable prescriptions. At this inspection we were provided with a record which showed a system to enable this had been introduced



Are services effective?

(for example, treatment is effective)

Our findings

At the last inspection on 21 June 2016 we found that the system for identifying staff training requirements needed to be improved to assist with the planning and monitoring of staff training. Staff told us they had completed training in a number of areas however there was no overall record to show the dates of completion or when training refreshers were due. At this inspection training protocols had been updated which demonstrated how the training needs of

staff were to be met by the provider. The appraisal system had been reviewed to ensure training needs were identified. The records of staff training had also been updated. This identified training shortfalls. For example not all staff had completed or were due for refresher training in fire safety, information governance, adult safeguarding, child safeguarding or infection control training. A training plan was in place which showed how these shortfalls were to be addressed and the practice manager informed us how this was to be monitored.