

Triangle Surgery

Quality Report

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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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Triangle Surgery on 26 August 2016. The overall rating for the practice was good, with the rating for providing safe services requires improvement. The full comprehensive report on the August 2016 inspection can be found by selecting the 'all reports' link for Triangle Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 20 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 in our previous inspection on 26 August 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as Good, with the rating for providing safe services now Good.

Our key findings were as follows:

- The provider had purchased and installed an automatic external defibrillator (AED).
- Staff at the practice had been trained in the use of the AED.

- The provider had reviewed how patients with caring responsibilities were identified and recorded on the clinical system. The provider introduced a carer's policy which defined the role of the carer, how to identify carers, including young carers, and what support should be offered. Support for carers included written information and signposting to relevant local services, priority and flexibility in appointment length and time, and an annual health and social care review and support under the local clinical commissioning group scheme. The provider had now identified 65 patients as carers which was 1.3% of the practice population, compared to 33 patients (0.7%) at our last inspection.
- The provider had introduced a range of information leaflets, DVDs and posters for patients in languages and subjects appropriate to the practice population. The subjects included diabetes, fasting during Ramadan, smoking cessation and health screening, and leaflets were printed in Urdu, Arabic, Spanish, Gujarati, Hindi, Tamil, Punjabi, Somali and Polish.

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?

At our previous inspection on 26 August 2016, we rated the practice as requires improvement for providing safe services as the practice was not equipped with an automatic external defibrillator (AED) for use in medical emergencies.

When we undertook a follow up inspection on 20 February 2017 we found the practice had purchased and installed an AED and that all staff had been trained in its use. The practice is now rated as good for providing safe services.

Good



Triangle Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Lead inspector carried out this desk based review.

Background to Triangle Surgery

Triangle Surgery provides primary medical services in Wandsworth to approximately 4,800 patients and is one of 44 member practices in the NHS Wandsworth Clinical Commissioning Group (CCG). The practice operates under a Personal Medical Services (PMS) contract and provides a number of local and national enhanced services (enhanced services require an increased level of service provision above that which is normally required under the core GP contract).

Wandsworth has 50% more 20 to 40 year olds, but 33% fewer older people than other south west London boroughs, reflected in the patient demographics for the practice with 11% of patients aged 65 or over, 69% of patients aged 18-65 years old and 20% aged 18 or younger.

The practice population is in the fourth least deprived decile, with income deprivation affecting children and adults in line with local averages. Ethnicity data for the practice shows that 51% of patients are from minority ethnic backgrounds.

The practice operates from a purpose built property with three floors. There are patient facilities including reception and waiting area on the ground floor with further treatment

and consultation rooms on the first floor. There are practice management and staff facilities on the second floor, all of which are accessible by lift or stairs. The building is wheelchair accessible with disabled access facilities.

The practice clinical team is made up of two male GP partners, two female nurses and one female healthcare assistant who is also a trained receptionist. The practice also has a regular female locum GP who provided three sessions per week. The practice doctors together provide 20 sessions per week. The non-clinical team consists of one practice manager and two receptionists.

The practice opens between 8.15am and 1.30pm and 3.00pm and 8.00pm Monday to Friday.

Morning surgery times are between 8.20am and 1.30pm. On a Monday, Tuesday, Thursday and Friday, afternoon surgery times are between 4.20pm until 6.30pm. On Wednesdays, afternoon surgery times are between 5.00pm and 6.30pm. Prebookable appointments during extended hours are available between 6.30pm and 8.00pm Monday to Friday.

Practice telephone lines and reception are operational between the hours of 8.15am and 1.30pm and 3.00pm and 6.30pm. Between 1.30pm and 3.00pm, patients are asked to contact the locally agreed out of hours provider who will assess the needs of the patient and where necessary contact the on duty GP from the practice who will in turn contact the patient.

The provider has opted out of providing out-of-hours (OOH) services to their own patients between 6.30pm and 8.15am when the practice directs patients to seek assistance from the locally agreed out of hours provider.

The practice is registered with the Care Quality Commission to provide the regulated activities of treatment of disease, disorder or injury, maternity and midwifery services, family planning, surgical procedures and diagnostic and screening procedures.

Detailed findings

Why we carried out this inspection

We undertook a comprehensive inspection of Triangle Surgery on 26 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and requires improvement for providing safe services. The full comprehensive report following the inspection on 26 August 2016 can be found by selecting the 'all reports' link for triangle surgery on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Triangle Surgery on 20 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 Triangle Surgery on 20 February 2017. This involved reviewing evidence that:

- The practice had purchased and installed an automatic external defibrillator (AED).

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 26 August 2016, we rated the practice as requires improvement for providing safe services as the practice was not equipped with an automatic external defibrillator (AED) for use in medical emergencies.

This issue had been addressed when we undertook a follow up inspection on 20 February 2017. The practice is now rated as good for providing safe services.

Arrangements to deal with emergencies and major incidents

- The practice had purchased and installed an automatic external defibrillator (AED) on the premises, and had reviewed and assessed its location within the practice, positioning it in the most accessible and practical location.
- We saw evidence the practice had introduced an AED policy which outlined storage, use and maintenance of the AED, including regular checks by a named member of staff.
- We saw evidence the whole practice team had attended a training session on how to use the AED which included a basic life support refresher and demonstration.