

South Saxon House Surgery

Quality Report

Whatlington Way
St Leonards On Sea
East Sussex
TN38 9TE

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Website: www.southsaxonhousesurgery.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

Overall rating for this service

Good



Are services safe?

Good



Summary of findings

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Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at South Saxon House Surgery on 27 September 2017. The overall rating for the practice was good. The practice was also rated good for the effective, caring, responsive and well-led domains and all of the population groups. It was however rated as requires improvement for the safe domain. The full comprehensive report on the September 2017 inspection can be found by selecting the 'all reports' link for South Saxon House Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 8 February 2018 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 27 September 2017. 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.

At our inspection of 27 September 2017, we found that:

- The system for recording and monitoring Medicines & Healthcare products Regulatory Agency (MHRA) alerts did not ensure that clinical action was always taken.
- Not all external storage bins containing clinical waste were kept locked at all times.

- Batch numbers, expiry dates and amounts used were not always recorded when local anaesthetic was used during minor surgical procedures.

At this inspection our key findings were as follows:

- The systems for recording MHRA and other alerts ensured that the alerts and actions were recorded and acted upon.
- All external clinical waste storage bins were locked at all times.
- Batch numbers, expiry dates and amounts used were always recorded when local anaesthetic was used during minor surgical procedures.

Additionally we saw that:

- The system for tracking and auditing histology specimens ensured that results were received and acted upon appropriately.
- Alerts denoting a child at risk were also placed on family and other household members' computer records as appropriate.
- The practice had discussed areas in the GP national survey where results were below the local and national averages and were considering ways of addressing them.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice

South Saxon House Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a lead inspector.

Background to South Saxon House Surgery

South Saxon House Surgery is a GP practice that provides medical services to the people of St Leonards on Sea and the surrounding area under a General Medical Services contract. The practice had approximately 3375 patients at the time of the inspection. Patient numbers had risen from around 2,700 since the move to the current location in April 2016.

The practice is run by a single (female) GP who is covered by regular locums when not available. The clinical team also consists of a practice nurse and an advanced nurse practitioner (a second is due to start later in February 2018), a healthcare assistant (HCA) and a phlebotomist (all female). The clinical team are supported by a practice manager, an office manager and a team of reception and administrative staff.

The practice address is:

4 Whatlington Way

St Leonards on Sea

East Sussex

TN38 9TE

The practice is open Monday to Friday from 8am to 6pm. Appointments are available with the GP from 8.30am to 11.30 am Monday to Friday and from 3.30pm to 5.30pm on

Monday, Tuesday, Thursday and Friday afternoons and on Wednesday afternoon from 1pm to 2.30pm. On Wednesday afternoons and between 6pm and 6.30pm the GP can be contacted in an emergency via the practice. Appointments with the nurse are available on Tuesdays, Thursday afternoon and Fridays. The HCA is available on Monday and Thursday. Appointments with the nurse are also available on Thursday evening from 5pm to 8pm.

When the surgery is closed the Out of Hours provider IC24 can be contacted via the 111 provider.

Five morning GP appointments and two afternoon appointments each day are pre-bookable, the rest are book on the day. Appointments with the nurse can be booked up to three months in advance.

The practice population has a higher number of patients between the ages of 10 and 24 and 35 to 64 than the national average. There is also a lower than average number of patients aged 65 or more. There is a lower than average number of patients with a long standing health condition and slightly higher than average number of patients with caring responsibility or who have health related problems in daily life. The percentage of registered patients suffering deprivation (affecting both adults and children) is higher than average for the Clinical Commissioning Group (CCG) or the average for England.

Why we carried out this inspection

We undertook a comprehensive inspection of South Saxon House Surgery on 27 September 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall. The practice was also rated good for the effective, caring, responsive and well-led domains and all of the

Detailed findings

population groups. It was however rated as requires improvement for providing safe services. The full comprehensive report following the inspection on September 2017 can be found by selecting the 'all reports' link for South Saxon House Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of South Saxon House Surgery on 8 February 2018. 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.

Are services safe?

Our findings

At our previous inspection on 27 September 2017, we rated the practice as requires improvement for providing safe services as:

- **Although Medicines & Healthcare products Regulatory Agency (MHRA) alerts were recorded and staff informed, there wasn't a system for ensuring that clinical alerts were actioned.**
- **An external clinical waste bin could not be locked because the lock was broken.**
- **Batch numbers, expiry dates and amounts used were not always recorded when local anaesthetic was used during minor surgical procedures.**

These arrangements had significantly improved when we undertook a follow up inspection on 8 February 2018. The practice is now rated as good for providing safe services.

Safety systems and processes

There were two external clinical waste bins in place. Both were locked at all times.

We saw that a new system for recording and checking batch numbers, expiry date, type, strength and amount of local anaesthetic used when carrying out minor surgery had been introduced. These were incorporated in to a spreadsheet where details were recorded about any

samples that were taken during surgery. This included the date the results were reviewed by a GP and the date the patient was informed. Additionally they recorded whether there was any post-operative infection and if antibiotics were required.

The practice also carried out minor surgery for patients from other local practices. We saw that it was recorded when the patient's registered GP was informed that the procedure had taken place and the date that they were sent any test results.

Safe and appropriate use of medicines

We saw that the new system for recording all the details of any anaesthetic used in minor surgery was working effectively. On the occasions that local anaesthetic was given all of the relevant details were recorded.

Lessons learned and improvements made

We saw that the system for receiving and acting on MHRA safety alerts had been updated and improved. We looked at four recent medicine alerts and saw that the practice had run searches on the computer for patients on the medicines, contacted the patients and recorded in their notes the results of the discussion. We saw that in the case of these four alerts, no action had been required following the searches and patient follow up. The GP was made aware of the alerts and search results and we were told would have acted on the results if action was indicated.