

Hillcrest Surgery

Quality Report

Hillcrest Surgery
Wellow Lane
Peasedown St John
BA2 8JQ
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Website: www.hillcrestsurgery.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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Hillcrest Surgery on 3 August 2016. We found that the practice required improvement for the provision of safe services because breaches of regulation were identified. The full comprehensive report on the 3 August 2016 inspection can be found by selecting the 'all reports' link for Hillcrest Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 6 July 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 3 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 rated as good.

Our key findings were as follows:

- The practice had ensured that identified risks relating to infection control and fire safety had been actioned and managed.
- Systems and processes for the safe management of medicines had been reviewed and improved.
- Policies relating to the maintenance of patient confidentiality had been implemented.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

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 the last comprehensive inspection on the 3 August 2016, we found the practice was not meeting legal requirements for providing safe services. Since our last inspection, the practice had made a number of improvements to address the breaches in regulations we previously identified.

Specifically:

- Systems and processes for ensuring the infection control prevention (IPC) had improved. A new IPC lead had been identified and collaborative working had taken place with the clinical commissioning group IPC lead. An updated IPC policy was in place and being adhered to within the practice.
- Processes for the checking of medicine expiry dates had been improved to ensure all medicines due for expiry were identified and replaced.
- Blank prescription forms and pads were monitored and securely stored
- Patient specific prescriptions (PSD) or directions from a prescriber were now being produced appropriately. PSDs are written instructions, from a qualified and registered prescriber for a medicine including the dose, route and frequency or appliance to be supplied or administered to a named patient after the prescriber has assessed the patient on an individual basis.
- The practice had implemented a policy for the safety of “NHS smart cards” (cards issued to health professionals for secure access to confidential information) in order to ensure patient confidentiality was maintained.
- Equipment checks and fire drills had been documented and we saw that fire drills were planned to take place on a bi-annually.
- Emergency medicines kept within a patient accessible area were now secured in a locked drawer within the emergency trolley.

Good



Hillcrest Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was undertaken by a CQC Inspector.

Background to Hillcrest Surgery

Hillcrest Surgery is situated in Peasedown St John, near Bath. The practice supports approximately 6,800 patients from Wellow to the northern edge of Radstock, including the areas of Turley, Camerton and Rockly Ford. The practice is all on one level with consulting rooms and treatment rooms situated off corridors from the central waiting and reception area. There is parking for a small number of vehicles at the front of the practice. The practice has recently completed new build additions to the premises which have included changing the layout internally and creating new consulting rooms, treatment rooms and staff areas.

The practice provides surgeries five days a week and consists of five GP partners, two male, three female. There are two practice nurses and two healthcare assistants, practice manager who is shared with another local practice, deputy practice manager, and secretary, reception and administration team. The practice is a GP training practice.

The practice is open each day from 8am until 6pm and there is extended hour access from 7.30am until 8am on variable mornings during the week.

The practice has a Personal Medical Services contract with NHS England. The practice is contracted for a number of

enhanced services including extended hours access, improving patient's online access, timely diagnosis and support for patients with dementia and unplanned admission avoidance.

When the practice is closed patients are advised, via the practice website and telephone answer machine that all calls will be directed to the NHS 111 service. Out of hours services are provided by Bath and North East Somerset Doctors Urgent Care (BDUC)

The practice is registered to provide services from:

Hillcrest Surgery, Wellow Lane, Peasedown St John, Bath. BA2 8JQ

Prior to the inspection we noted that the provider did not have a Registered Manager in place and the partners listed on the practices registration certificate was different to those within the practice. The provider informed us that they had had problems using the Care Quality Commission provider portal and believed that these issues had been resolved. The provider told us they were taking immediate action to resolve these issues.

Why we carried out this inspection

We undertook a comprehensive inspection of Hillcrest Surgery on 3 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement for providing safe services. The full comprehensive report following the comprehensive inspection in August 2016 can be found by selecting the 'all reports' link for Hillcrest Surgery on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up focused inspection on 6 July 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

During our visit we:

- Spoke with a range of staff including the practice manager, the deputy practice manager and two practice nurses.
- Reviewed a selection of practice policies and procedures
- Looked at minutes of practice meetings
- Reviewed risk assessments and actions completed by the practice.

Are services safe?

Our findings

At our previous inspection on 3 August 2016, we rated the practice as requires improvement for providing safe services as during that inspection we found:

- Although risks to patients who used services were assessed, the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe. For example in relation to fire safety and infection control.
- The arrangements for the safe management of medicines were not consistently applied.
- The protocol to maintain patient confidentiality was not being adhered to.

These arrangements had significantly improved when we undertook a follow up inspection on 6 July 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- Since the previous inspection a nurse who was new to the practice had been and identified as the infection control lead for the practice. She attended link meetings with the infection prevention control (IPC) lead from the clinical commissioning group. The practice had updated the IPC policy to reflect improvements made, for example protocols for the decontamination of equipment. We also saw that the policy had been updated to reflect the building changes that had taken place. For example, a shower had been installed and the changes to the legionella risk assessment included the need to run the shower weekly. Water temperatures had been regularly tested and documented. An IPC audit had been undertaken and identified actions had been completed. We saw that the cleaning company did monthly audits and that the practice manager had oversight of these.

- Processes for the checking of medicine expiry dates had been improved to ensure all medicines due for expiry were identified and replaced.
- The practice no longer held controlled drugs.
- Blank prescription forms and pads were monitored and securely stored.
- Health care assistants were trained to administer vaccines and medicines and patient specific prescriptions (PSD) or directions from a prescriber were now being produced appropriately to enable them to carry out this role. PSDs are written instructions, from a qualified and registered prescriber for a medicine including the dose, route and frequency or appliance to be supplied or administered to a named patient after the prescriber has assessed the patient on an individual basis.
- The practice had updated their policy for the safety of “smart cards” used for access to the patient record system in order to ensure patient confidentiality was maintained. The practice had discussed responsibilities regarding this with all staff. On the day of the inspection we saw that appropriate security of the “smart cards” was being adhered to.

Monitoring risks to patients

- We saw evidence that a new fire risk assessment had been implemented and actions completed following the building works. Equipment checks and fire drills had been documented and we saw that fire drills were planned to take place on a bi-annually

Arrangements to deal with emergencies and major incidents

- Emergency medicines kept within a patient accessible area were now secured in a locked drawer within the emergency trolley. Access was easily accessible as nurses held the keys and all staff knew the location of an alternative key as well.