

Dr Thompson and Partners

Quality Report

Strand Medical Group
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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

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	5
Background to Dr Thompson and Partners	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

Overall summary

Letter from the Chief Inspector of General Practice

The practice is rated good overall and good for providing safe services.

We carried out an announced comprehensive inspection of this practice on 31 May 2016. The overall rating for the practice was good. However, a breach of legal requirements was found during that inspection within the safe domain. After the comprehensive inspection, the practice sent us an action plan detailing what they would do to meet the legal requirements. We conducted a focused inspection on 22 February 2017 to check that the provider had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

During our previous inspection on 31 May 2016 we found the following area where the practice must improve:

- Ensure the safe storage of vaccines.

Our previous report also highlighted the following areas where the practice should improve:

- Continue to improve exception reporting figures.
- Continue to improve patient satisfaction with accessing the practice by phone and with practice opening hours.

- Continue to improve the patient satisfaction with helpfulness of the reception team.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at www.cqc.org.uk

During the inspection on 22 February 2017 we found:

- Arrangements were in place for the safe storage of vaccines.

We also found the following in relation to the areas where the practice should improve:

- The practice was taking steps to improve the exception reporting. There was now a dedicated phone line for patients to call to book their annual review and patients received a reminder call from the nursing team for patients who did not attend. Data to show the progress made since our last inspection was not yet available.
- The practice was taking steps to improve their satisfaction scores on helpfulness of the reception team. All reception staff had received training on managing challenging conversations.

Summary of findings

- The practice had a comprehensive action plan to increase patients' access to the practice by phone and to appointments. There was a new phone system in place and improvements to procedures for making appointments.

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 now rated good for delivering safe services.

At our last inspection on 31 May 2016 we found that risks to patients were not assessed and well managed. This was in relation to the safe storage of vaccines.

At this inspection, we found that the practice had implemented their action plan to ensure that these issues had been addressed and that arrangements for storage of vaccines were now safe.

Good



Dr Thompson and Partners

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was conducted by a CQC inspector.

Background to Dr Thompson and Partners

Dr Thompson and Partners (also known as Strand Medical Group) is situated on The Strand in Goring-by-Sea, West Sussex. The practice provides services for approximately 13,800 patients living within the sea side town of Goring-by-Sea and the surrounding area. The practice holds a General Medical Services (GMS). (A GMS contract is one between the practice and NHS England and the practice where elements of the contract such as opening times are standard). The practice has relatively large numbers of people aged 65 and older compared to the national average. Deprivation amongst children and older people is below average when compared to the population nationally.

As well as a team of four GP partners and one salaried GP (four male and one female), the practice also employs two GP registrars, a head of nursing, a nurse assessor, six practice nurses, two health care assistants and two phlebotomists. A practice business manager and a deputy practice manager are employed and there is a team of receptionists, medical secretaries and administrative clerks. The local midwifery and health visitor team also offer appointments from the practice.

The practice is a training practice for GP trainees and foundation level two doctors and pre-registration student nurses.

The practice is open between 8am and 6.30pm on weekdays and appointments are available throughout these times. There are phone appointments available with GPs throughout the day according to patient need. Extended hours appointments are available between 7am and 8am and from 6.30pm to 7.30pm from Monday to Friday. Routine appointments are bookable up to three weeks in advance. Patients are able to book appointments by phone, online or in person.

Patients are provided with information on how to access the duty GP or the out of hours service by calling the practice or by referring to its website.

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

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 on 31 May 2016 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breach of legal a requirement was found. As a result, we undertook a focused inspection on 22 February 2017 to follow up on whether action had been taken to deal with the breach.

Detailed findings

How we carried out this inspection

During our visit we:

- Spoke with the practice business manager and the head of nursing.
- Reviewed practice documentation.

Please note that when referring to information throughout this report relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 31 May 2016, we rated the practice as requires improvement for providing safe services as safety systems and processes were not always assessed and well managed. This was in relation to the safe management of medicines.

These arrangements had significantly improved when we undertook a follow up inspection on 22 February 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

At our last inspection we found that arrangements for managing vaccines in the practice did not always keep patients safe. Although fridge temperatures had been recorded on a daily basis, we had noted one fridge had recorded temperatures which were outside of specified parameters but no action had been taken as a result. This

meant the practice could no guarantee the safety of the vaccines stored in the fridge. The practice responded to the issue on the day of inspection by decommissioning the fridge, disposing of the vaccines and ordering a replacement fridge. Public Health were informed to obtain advice on the safety of the vaccines stored.

During this inspection we found that the practice had addressed the issues we had identified. We saw that the nursing team had undertaken training on appropriate storage of vaccines and that a comprehensive policy for managing vaccines was in place. We saw a temperature record for recording fridge temperatures was in situ on each fridge with instructions for actions to take if the temperature was outside of specified parameters. The temperature record was completed daily, cross checked by the head of nursing on a weekly basis and by the practice business manager on an ad hoc basis.