

Title of Report:	Care Quality Commission Report May 2019	
Status:	TO NOTE	
Committee:	Primary Care Commissioning Committees in Common Part One	Date: 10/05/2019
Venue:	Cedar and Hazel Room, First Floor, SD CCG, Cedar Court, Guildford Road, Leatherhead, Surrey, KT22 9AE	

Presented by:	Helen Snelling, Head of Primary Care Contracting Surrey Heartlands CCGs	
Executive Lead sign off:	Rachael Graham, Deputy Director of Contracts Non Acute and Primary Care	Date: 03/05/2019
Author(s):	Glynis McDonald, Primary Care Contract Support Officer	

Governance:

Conflict of Interest: The Author considers:	None identified	✓
Previous Reporting: (relevant committees/ forums this paper has previously been presented to)	N/A	
Freedom of Information: The Author considers:	Open – no exemption applies	✓

Executive Summary:

Summary of Surrey Heartlands CCGs GP Practices CQC report outcomes – Updated in order by inspection date and updated colour legends/charts

Implications:

What is the health impact/ outcome and is this in line with the CCG's strategic objectives ?	<ul style="list-style-type: none"> • Objective 1: Achieving a sustainable system • Objective 2: Development of collaborative working • Objective 3: Developing Integrated Care at a local level • Objective 4: Primary Care development • Objective 5: Safe, effective care providing the best possible health and care outcomes and patient experience
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What is the financial/ resource required?	N/A
What legislation, policy or other guidance is relevant?	NHSE directive/policy CCG constitution Statutory duty
Is an Equality Analysis required?	N/A
Any Patient and Public Engagement/ consultation required?	N/A
Potential risk(s) ? (including reputational)	Potential reputational risk to the practice and CCG. Potential risk of Primary Care Services not being delivered.

Recommendation(s):

The Committee is asked to note the report.

Next Steps:

Primary Care Contracting team to continue reviewing CQC outcomes and following up with practices regarding their action plans recommended by CQC.

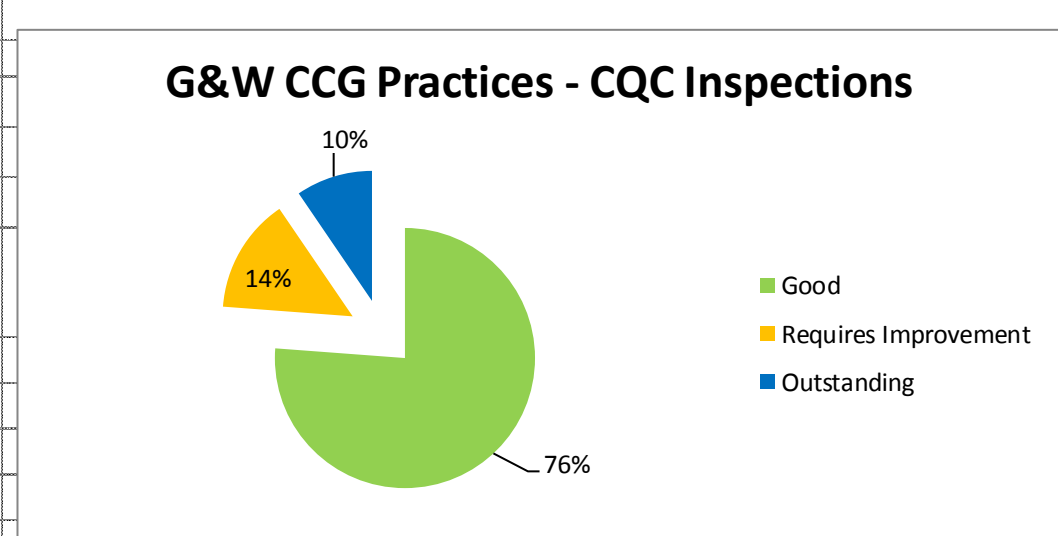
GUILDFORD & WAVERLEY Primary Care CQC Report March 2019

Provider	Practice Code	Overall Rating	Treating people with respect and involving them in their care	Providing care, treatment and support that meets people's needs	Caring for people safely and protecting them from harm	Staffing	Quality and suitability of management	Inspection Publication Date	Date of Inspection Visit	Action Plan recommended by CQC	Current Status	Historic CQC Overall Rating	Historical Inspection Report Date
Austen Road Surgery	H81006	Requires improvement	Requires improvement	Requires improvement	Good	Good	Inadequate	14/09/2018	14/06/2018	<p>The areas where the provider must make improvements as they are in breach of regulations are:</p> <ul style="list-style-type: none"> Ensure care and treatment is provided in a safe way to patients. A protocol has been put in place to cover the monitoring of prescription blank sheets and pads The following professional assessments have been actioned: Legionella risk assessment, Fire Risk assessment, Electrical installation report, Surrey Fire and Rescue survey, Revised COSHH policies & procedures Health & Safety assessment is in the process of being finalised. Ensure staff employed in the provision of regulated activities receive the appropriate training and professional development necessary to enable them to carry out their duties. CCG and the LMC have provided information and resource for staff training to the practice. They have subscribed to Blue Stream academy who provide a comprehensive online line training service. All staff have undergone Sepsis training Ensure that there are effective systems and processes to ensure good governance in accordance with the fundamental standards of care. <p>New system detailing actions for medicine and safety alerts.</p> <p>The system dealing with significant events and complaints has been revised to ensure learning is shared as appropriate. The complaints procedure has also been revised to ensure all final response letters to complainants contain signposting information.</p> <p>The areas where the provider should make improvements are:</p> <ul style="list-style-type: none"> Take action to review their complaints procedure so that the information within the final response contains signposting information should the complainant remain dissatisfied and thus complies with the NHS complaints procedure. Take action to provide awareness training for all staff on the 'red flag' sepsis symptoms that might be reported by patients and how to respond appropriately. <p>Where a service is rated as inadequate for one of the five key questions or one of the six population groups, it will be re-inspected no longer than six months after the report is published. If, after re-inspection, the service has failed to make sufficient improvement, and is still rated as inadequate for any key question or population group or overall, we will place the service into special measures. Being placed into special</p>	05/02/2019 - Under review with Primary Care contract manager 05/12/2018 - Re-inspection by CQC with report due by mid-January 17/10/2018 - Action Plan received from practice 15/10/2018 - Requested for Action Plan practice 30/11/2018 - Update required	Good	07/10/2014
Witley Surgery	H81031	Requires improvement	Requires improvement	Requires improvement	Outstanding	Good	Good	13/08/2018	24/05/2018	<p>The areas where the provider must make improvements as they are in breach of regulations are:</p> <ul style="list-style-type: none"> Ensure care and treatment is provided in a safe way to patients. In particular risk assessments and action plans in relation to Legionella, fire and health and safety. 18/06/18 The follow assessments and audits have been carried out by the practice: 1. Legionella risk assessment 2. Health and safety audit (with necessary actions) 3. Fire & Safety risk assessment 4. Disability Access audit Ensure the management of medicines keeps patients safe. In particular, in relation to the security of blank prescription stationery for use in computers, controlled drugs and emergency medicines. Purchase & installation of secure cupboard for storage of blank prescriptions, new prescription signing out procedure. In addition, all clinical rooms locked overnight. New protocol for emergency bag medicines checking with 2 clinical staff in quiet uninterrupted designated time. Provision of separate emergency drugs supply to be kept on site at all time. Clear protocol for a log to check date of drugs used for home visits (out and in) Ensure staff employed in the provision of regulated activities receive the appropriate training and professional development necessary to enable them to carry out their duties. Training system has been redesigned with a focus on training by role, linked with own policies & procedures. This is tied to learning events through bimonthly team safety meetings. <p>The areas where the provider should make improvements are:</p> <ul style="list-style-type: none"> Take action to review their complaints procedure so that the information within this complies with the NHS complaints procedure. 	05/02/2019 - Under review with Primary Care contract manager 27/11/2018 - Action Plan received from practice 15/10 - Action Plan requested from Practice 9/11/2018 - Follow up email sent to Practice for action plan	Good	17/02/2016
Fairlands Medical Practice	H81064	Good	Requires improvement	Good	Good	Good	Good	21/03/2018	05/12/2017			Good	21/03/2018 NHS England management prior to delegated commissioning (01/04/2018)
Chiddingfold Surgery	H81022	Good	Good	Good	Good	Good	Good	14/02/2019	05/12/2018			Good	22/12/2017 NHS England management prior to delegated commissioning (01/04/2018)
Woodbridge Hill Surgery	H81090	Good	Good	Good	Good	Good	Good	10/08/2017	05/07/2017				
Guildowns Group Practice Wodeland Surgery	H81010	Good	Good	Good	Good	Good	Good	05/07/2017	29/06/2017			Requires improvement	24/02/2016
New Inn Surgery	H81647	Good	Good	Good	Good	Good	Good	11/11/2016	14/10/2016				
Grayshott Surgery	H81076	Good	Good	Good	Good	Good	Good	21/10/2016	05/10/2016				
The Mill Medical Practice	H81021	Outstanding	Good	Outstanding	Good	Good	Outstanding	20/07/2016	12/04/2016				
St.Luke's Surgery	H81085	Good	Good	Good	Good	Good	Good	13/06/2016	23/03/2016				
Springfield Surgery	H81044	Good	Good	Good	Good	Good	Good	23/05/2016	17/03/2016				
Haslemere Health Centre	H81062	Good	Good	Good	Good	Good	Good	10/05/2016	09/03/2016				
Marrow Park Surgery	H81035	Good	Good	Good	Good	Good	Good	29/03/2016	09/02/2016				
Villages Medical Ctr	H81053	Good	Good	Good	Good	Good	Good	16/03/2016	26/01/2016				
Binscombe Medical Centre	H81026	Outstanding	Good	Good	Outstanding	Good	Outstanding	22/12/2017	05/01/2016				
Shere Surgery/Dispensary	H81077	Good	Good	Good	Good	Good	Good	10/12/2015	16/10/2015				
Guildford Rivers Practice	H81132	Good	Good	Good	Good	Good	Good	24/09/2015	13/08/2015				
The Horsley Medical Practice	H81084	Good	Good	Good	Good	Good	Good	17/09/2015	10/08/2015				
Wonersh Surgery	H81043	Good	Good	Good	Good	Good	Good	22/01/2015	14/10/2014				
Dapdune House Surgery	H81029	Good	Good	Good	Good	Good	Good	23/04/2015	07/10/2014				
Cranleigh Medical Practice	H81052	Good	Good	Good	Good	Outstanding	Good	24/12/2015	07/10/2014				

21 Practices

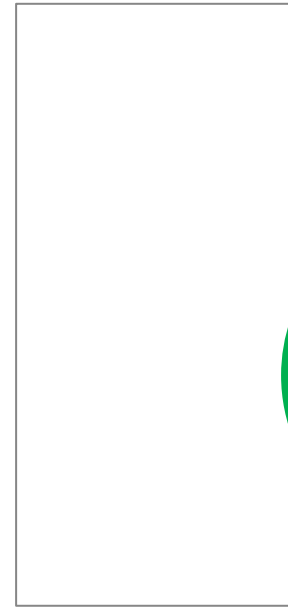
Outstanding	10%
Good	76%
Requires Improvement	14%
Inadequate	0%

G&W CCG Practices - CQC Inspections	
Good	16
Requires Improvement	3
Inadequate	0
Outstanding	2
Total	21

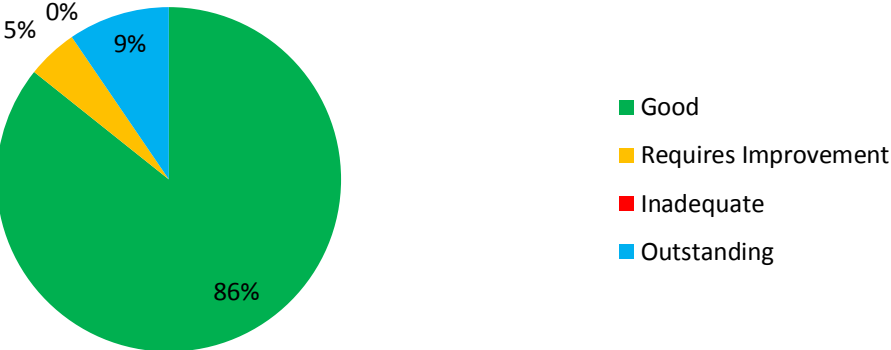


G&W CCG Practices - CQC Inspections

Good	17
Requires Improvement	2
Inadequate	0
Outstanding	2
Total	21



G&W CCG Practices CQC Inspections



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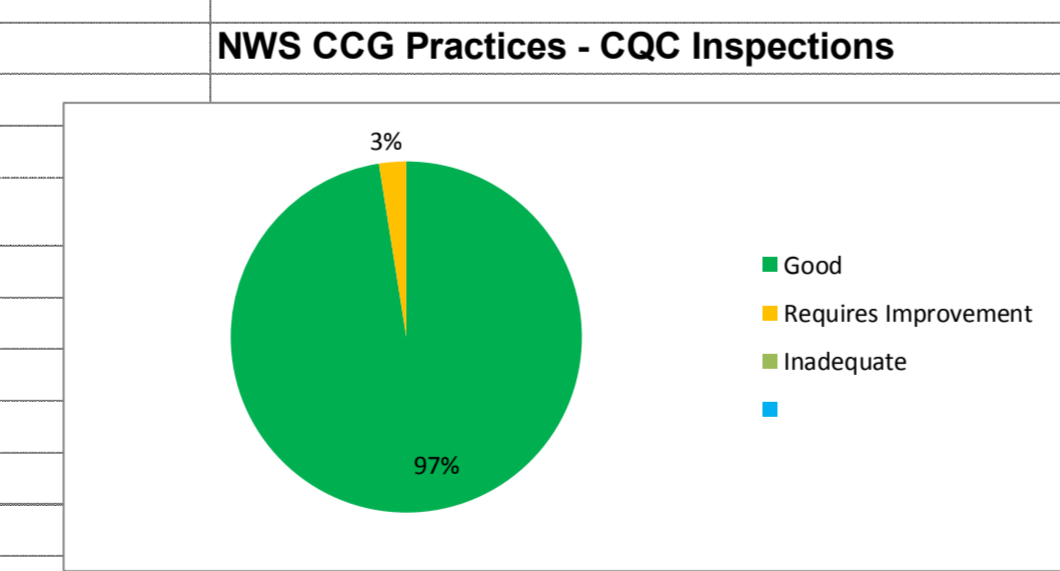
Provider	Practice Code	Overall Rating	Treating people with respect and involving them in their care	Providing care, treatment and support that meets people's needs	Caring for people safely and protecting them from harm	Staffing	Quality and suitability of management	Inspection Publication Date	Inspection Report Date	Action Plan recommended by CQC	Current Status	Historic CQC Overall Rating	Historical Inspection Report Date
Chertsey Health Centre	H81033	Good	Requires Improvement	Good	Good	Good	Good	07/03/2019	05/04/2019	The areas where the provider must make improvements are: • Ensure that care and treatment is provided in a safe way. The areas where the provider should make improvements are: • Improve the system for reviewing pathology results to reduce reliance on the laboratory alerting the practice of urgent results. • Improve the recording and monitoring of where palliative patients would prefer to die. • Improve the recording patient safety alerts to include completed actions. • Review formal clinical supervision for the nursing team. • Improve the process for signed consent forms being attached to the clinical record. Whilst we found no breaches of regulations, the provider should : • Take action to ensure that the system for monitoring prescriptions within the practice becomes embedded.	10/04/2019 Email sent asking for copy of action plan sent to CQC.	Good	12/07/2016
Greenfields Surgery	H81664	Good	Good	Good	Good	Good	Good	06/12/2018	22/01/2019	The areas where the provider should make improvement are: • Continue to take action to improve uptake for national cancer screening programmes. • Strengthen the oversight of safeguarding arrangements, including to formalise cover for the safeguarding lead role, and regular internal meetings. • Take action to provide annual medication reviews for patients prescribed more than one medicine.	07/02/2019 Email sent asking for any action plan that may have been put together	Requires Improvement	22/01/2018
College Road Surgery	H81641	Good	Good	Good	Good	Good	Good	14/11/2016	14/12/2018	The areas where the provider should make improvement are: • Continue to take action to improve uptake for national cancer screening programmes. • Strengthen the oversight of safeguarding arrangements, including to formalise cover for the safeguarding lead role, and regular internal meetings. • Take action to provide annual medication reviews for patients prescribed more than one medicine.	18/12/2018 Email sent asking for any action plan that may have been put together.	Requires Improvement	17/11/2016
Maybury Surgery	H81643	Good	Good	Good	Good	Good	Good	16/10/2018	15/11/2018	The areas where the provider should make improvements are: - Develop a system for maintaining oversight of patient safety alerts and the actions taken in respect of these. - Improve recording of health and safety actions and the shared learning from incidents and significant events. - Develop a system to ensure that the practice follows its own recruitment policy.	07/02/2019 Email sent asking for any action plan that may have been put together.	Inadequate	26/09/2017
Dr J Sillick & Partners (Red Practice)	H81094	Good	Good	Good	Good	Good	Good	17/08/2017	28/07/2017	The areas where the provider should make improvement are: • Continue to take action to resolve their concerns about the cleaning service they receive and ensure an adequate standard is maintained on a day by day basis. - Please see attached our repeated emails to chase this with NHS Property services on H & S issues. - still have ongoing issues with NHS Property services, copies of emails received - Please see attached cleaning standards emails being reported repeatedly via email but there is also an internal book, - cleaning issues dealt with on a day to day basis and internal book, copy of emails sent to cleaning company with issues - Infection control action plan for clinicians - - Infection control walkabout done in October 2017 and another one will be due in Feb / March 2018 – walkabouts carried out on 15/03/18 and 01/03/19 - 2 x quarterly minutes of meetings with Cleaning company – Copies attached for your information. - quarterly meetings held (copies of mins received). • Continue to monitor, review and take steps to improve patient telephone access to the service. - I am delighted to let you know as promised a new telephone system was installed in the practice on 29th November 2017. There is a monitoring tool attached with this, which allows us to look at access. Patient feedback til date has been excellent as it is a far superior system to our previous one.	12/03/2019 Email from PM recently returned from Maternity leave with answers to issues in red 24/09/2018 Emailed practice again asking for the information below. 03/08/2018 Emailed asking for answer to mail on 09/07/2018 09/07/2018 Emailed asking if improvements in cleaning and if an infection control walkabout had been completed.	Requires Improvement	09/08/2016
Staines & Thameside Medical	H81079	Good	Requires Improvement	Good	Good	Good	Good	15/01/2019	06/01/2019	The areas where the provider must make improvements as they are in breach of regulations are: • Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.	01/04/2019 Practice Manager has left. New practice manager starting on 3 May. Emailed practice asking that this be looked at as soon as possible. 25/03/2019 Further request sent asking practice for action plan. 23/01/2019 Request sent to practice asking for action plan	Requires Improvement	04/10/2017
Dr Samy Morcos (White practice)	H81131	Good	Requires Improvement	Good	Good	Good	Good					Good	24/08/2017
Shepperton Medical Practice	H81004	Good	Good	Good	Good	Good	Requires Improvement					Good	12/10/2017
The Grove Medical Centre	H81066	Good	Good	Good	Good	Good	Good					Good	16/04/2018
St John's Health Centre The Family Practice	H81025	Good	Good	Good	Good	Good	Good					Good	15/03/2018
The Orchard Surgery	H81632	Good	Good	Good	Good	Good	Good					Good	02/02/2017
The Fort House Surgery	H81020	Good	Requires Improvement	Good	Good	Good	Good					Good	26/01/2016
Wey Family Practice	H81050	Good	Good	Good	Good	Good	Good					Good	24/02/2016
Sheerwater Health Centre	H81123	Good	Good	Good	Good	Good	Good					Good	02/02/2016
The Yellow practice	H81095	Requires Improvement	Good	Requires Improvement	Good	Good	Requires Improvement			inspection carried out under contract with Dr Nguyen - waiting for new inspection under new registration		Requires Improvement	03/05/2016
Fordbridge Medical Centre	H81057	Good	Good	Good	Good	Good	Good					Good	04/02/2016
Madeira Medical	H81034	Good	Good	Good	Good	Good	Good					Good	19/04/2016
Studholme Medical Centre	H81009	Good	Good	Good	Good	Good	Good					Good	14/04/2016
Stanwell Road Surgery	H81104	Good	Good	Good	Good	Good	Good					Good	28/04/2016
The Crouch Oak Practice	H81042	Good	Good	Good	Good	Good	Good					Good	18/05/2016

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St David's Health Centre	H81087	Good	Good	Good	Good	Good	Good					Good	11/05/2016
Staines Health Group	H81134	Good	Good	Good	Good	Good	Good					Good	19/05/2016
The Hythe Medical Centre	H81122	Good	Good	Good	Good	Good	Good					Good	09/06/2016
Hillview Medical Practice	H81061	Good	Good	Good	Good	Good	Good					Good	19/01/2016
Southview Surgery	H81041	Good	Good	Good	Good	Outstanding	Good					Good	24/05/2016
Ottershaw Surgery	H81658	Good	Good	Good	Good	Good	Good					Good	21/06/2016
Packers	H81111	Good	Requires Improvement	Good	Good	Good	Good					Good	07/06/2016
Sunbury Health Centre Group Practice	H81003	Good	Good	Good	Good	Good	Good					Good	14/07/2016
Sunny Mead	H81019	Good	Good	Good	Good	Good	Good					Good	24/11/2016
Chobham & West End Medical Practice	H81015	Good	Good	Good	Good	Good	Good					Good	07/02/2017
Knowle Green Medical	H81002	Good	Good	Good	Good	Good	Good					Good	07/03/2017
Parishes Bridges Medical Practice	H81036	Good	Good	Good	Good	Good	Good					Good	05/07/2016
The Hersham Surgery	H81065	Good	Good	Good	Good	Good	Good					Good	20/09/2016
Upper Haliford Medical Centre	H81642	Good	Good	Good	Good	Good	Good					Good	06/07/2017
Pirbright Surgery	H81129	Good	Good	Good	Good	Good	Good					Good	06/10/2016
Rowan Tree Practice	H81007	Good	Good	Good	Good	Good	Good					Good	05/09/2018
Church Street Practice	H81073	Good	Requires Improvement	Good	Good	Good	Good					Good	23/08/2018
Ashley Medical Practice	H81663	Good	Good	Good	Good	Good	Good					Good	29/01/2018
Goldsworth Medical Practice	H81024	Good	Good	Good	Good	Good	Good					Good	09/10/2018
Heathcot Medical Practice	H81032	Good	Good	Good	Good	Good	Good					Good	09/10/2018

Outstanding	
Good	
Requires Improvement	
Inadequate	

NWS CCG Practices - CQC Inspections	
Good	39
Requires Improvement	1
Inadequate	0
Total	40



SURREY DOWNS Primary Care CQC Report											Current Status	Historic CQC Overall Rating	Historical Inspection Report Date
Provider	Practice Code	Overall Rating	Are services safe	Are services effective	Are services caring	Are services responsive to people's needs	Are services well-led	Inspection Publication Date	Date of Inspection Visit	Action Plan recommended by CQC			
Littleton Surgery	H81038	Good	Good	Good	Good	Good	Good	02/04/2019	27/02/10'9	<p>Whilst we found no breaches of regulations, the provider should:</p> <ul style="list-style-type: none"> Review and continue to monitor cervical smear screening. After reviewing the system we used we have decided to run a monthly report to enable the implementation of AccRx messages to be sent to our patients as a means of contact as we do find the letters and phone calls do not reach them. On registration all new patients from USA are specifically requested to give us details of their cervical smears/dates etc... To be reviewed in 6 months. (October 2019) by the practice nurse. Review and continue to monitor child immunisation rates. We have reviewed the child imm rates and unfortunately a number of our children due immunisations have been vaccinated in the US before arrival in the UK. We will focus on new registrations and are developing a child registration questionnaire which will include a question for (imms already have been done in USA) our staff can ensure these questions and full details given to the practice nurse at time of registration To be reviewed in 6 months. (October 2019) by our practice nurse Ensure the process for prescription monitoring when blank scripts are used in the different rooms is embedded. We have embedded the process of safety of the scripts in different rooms and all blank scripts are lifted from printers, numbered and put in a folder and locked securely away each night 	12/04/2019 Received action plan from Practice Manager Emailed PM ou 10/04/2019 for a copy of any action plan put together.	Good	02/06/2017
The Molebridge Practice	H81618	Good	Good	Good	Good	Good	Good	07/03/2019	07/03/2019			Good	21/03/2018
The Vine Medical Centre	H81128	Good	Good	Good	Good	Good	Good	01/03/2019	06/02/2019	<p>Whilst we found no breaches of regulations, the provider should:</p> <ul style="list-style-type: none"> Review and continue to monitor cervical smear screening to meet Public Health England screening targets. Review the storage of patient notes. Review reception staff safety. 	Emailed PM ou 10/04/2019 for a copy of any action plan put together.	Good	13/04/2017
The Grove (formerly The Lantern Surgery)	H81672	Good	Good	Good	Good	Good	Good	28/02/2019	15/01/2019	<p>Whilst we found no breaches of regulations, the provider should:</p> <ul style="list-style-type: none"> Review and continue to monitor cervical smear screening to meet Public Health England screening targets. 	Emailed PM ou 10/04/2019 for a copy of any action plan put together.	Good	27/09/2017
Brockwood Medical Practice	H81068	Good	Good	Good	Good	Good	Good	25/10/2016	13/09/2016				
Dorking Medical Practice	H81028	Good	Good	Good	Good	Good	Good	14/04/2016	03/03/2016				
Leith Hill Practice	H81113	Good	Good	Good	Good	Good	Good	24/02/2017	01/02/2017				
Medwyn Surgery	H81072	Outstanding	Good	Good	Outstanding	Outstanding	Outstanding	10/03/2016	09/12/2015				
Capelfield Surgery	H81109	Good	Good	Good	Good	Good	Good	27/03/2017	10/03/2017				
Esher Green Surgery	H81099	Good	Good	Good	Good	Good	Good	14/10/2016	08/09/2016				
Glenlyn Medical Centre	H81078	Good	Good	Good	Good	Good	Good	10/01/2017	08/12/2016				
Thorkhill Surgery	H81086	Good	Good	Good	Good	Good	Good	08/02/2017	20/12/2016				
Ashlea Medical Prractice	H81077	Good	Good	Good	Good	Good	Good	31/05/2018	25/04/2018				
Ashley Centre Surgery	H81071	Good	Requires improvement	Good	Good	Good	Good	15/01/2018	05/12/2017				
Cobham Health Centre	H81067	Good	Good	Good	Good	Good	Good	02/07/2018	06/06/2018				
Derby Medical Centre	H81051	Good	Good	Good	Good	Good	Good	26/06/2018	23/05/2018				
Eastwick Park Medical Practice	H81103	Good	Good	Good	Good	Good	Good	31/01/2017	13/12/2016				
Fairfield Medical Centre	H81016	Good	Good	Good	Good	Good	Good	28/06/2018	30/07/2018				
Fountain Practice	H81644	Good	Good	Good	Good	Good	Good	29/06/2016	25/05/2016				
Heathcote Medical Practice	H81070	Good	Good	Good	Good	Good	Good	22/02/2018	17/01/2018				
Integrated Care Partnership	H81133	Good	Good	Good	Good	Good	Good	19/08/2016	01/08/2016				
The Longcroft Clinic	H81080	Good	Good	Good	Good	Good	Good	12/11/2015	10/09/2015				
Nork Clinic	H81011	Good	Good	Good	Good	Good	Good	14/06/2016	05/04/2016				
Oxshott Medical Practice	H81107	Good	Good	Good	Good	Good	Good	09/06/2016	15/03/2016				
Shadbolt Park House Surgery	H81656	Requires improvement	Requires improvement	Requires improvement	Good	Good	Requires improvement	10/08/2018	05/07/2018				
Spring Street Surgery	H81091	Inadequate	Inadequate	Inadequate	Good	Good	Inadequate	22/10/2018	18/07/2018				
St Stephen's House Surgery	H81613	Good	Good	Good	Good	Good	Good	22/02/2018	06/02/2018				
Stoneleigh Surgery	H81074	Good	Good	Good	Good	Good	Good	17/0/2016	04/02/2016				
Tadworth Medical Centre	H81081	Good	Good	Good	Good	Good	Good	29/12/2016	03/11/2016				
Tattenham Health Centre	H81126	Good	Good	Good	Good	Good	Good	25/10/2016	21/09/2016				

SURREY DOWNS CQC REPORT

30 Practices													
Outstanding													
Good													
Requires improvement													
Inadequate													

Surrey Downs CCG Practices - CQC Inspections	
Good	27
Requires improvement	1
Inadequate	1
Outstanding	1
Total	30

