

# Barn Surgery

## Quality Report

The Barn Surgery,  
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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
The six population groups and what we found	5

### Detailed findings from this inspection

Our inspection team	8
Background to Barn Surgery	8
Why we carried out this inspection	8
Detailed findings	9

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of this practice on 23 February 2016. Breaches of legal requirements were 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. As a result, we undertook a desk based focused inspection on 6 December 2016 to follow up on whether action had been completed to deal with the breaches.

During our previous inspection on the 23 February 2016 we found the following areas where the practice must improve:-

- Ensure that all relevant staff has criminal record checks with the Disclosure and Barring Service (DBS).
- Ensure that all staff receive up to date safeguarding training.

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

- Review patient feedback on the difficulties with access to the service and monitor changes in this area alongside action taken.

- Continue with the programme of annual appraisal for all staff, ensuring that this is embedded in practice for future years.

We conducted a desk based focused inspection on 6 December 2016 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. (A desk based focused inspection means the provider was able to send us evidence of the action taken to address the issues previously found rather than visiting the practice).

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

During this inspection we found:-

- The practice had updated their DBS records to ensure that all staff identified as requiring a check had received one.
- That all staff had attended safeguarding training at a level relevant to their role.

We also found the following in relation to the areas where we had told the practice they should improve:-

- The practice had installed a second phone line to improve access to the phone system for patients and

# Summary of findings

to make improvements to appointment access. This had included an upgrade to the phone system to improve call quality. In addition, the practice had worked to improve the uptake of online access to the appointment system and 45% of patients now accessed appointments this way. The practice had also changed their walk in service to an appointment service and had introduced a nurse triage system.

- The practice had implemented an appraisal system where all staff would receive their appraisal annually in March. We saw that the practice manager had an alert in place to ensure that this was embedded in 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?**

The practice is rated as good for delivering Safe services.

- At our last inspection we found that four staff including a healthcare assistant and administrative staff had not yet received safeguarding training and a further six staff had not attended a training update in the last five years. At this inspection, we found that all staff including clinical and non-clinical staff had attended safeguarding training.
- At our last inspection, we found there was no record of a criminal record check through the DBS (disclosure and barring service) for one of the nurses and one of the healthcare assistants. At this inspection, we found that this had been addressed and the DBS checks had been carried out.

**Good**



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The practice is rated as good for the care of older people.

- The practice offered proactive, personalised care to meet the needs of the older people in its population.
- The practice was responsive to the needs of older people, and offered home visits and urgent appointments for those with enhanced needs.

The practice worked closely with district nurses and the local proactive care team to promote independent living for older people, including attendance at monthly multi-disciplinary team meetings to address the needs of patients identified as at risk.

Good



### People with long term conditions

The practice is rated as good for the care of people with long-term conditions.

- Nursing staff had lead roles in chronic disease management and patients at risk of hospital admission were identified as a priority.
- Performance for diabetes related indicators at 99.9% was better than national average of 89.2%.
- The practice had worked to identify patients with diabetes and as a result had a higher than average precedence of the disease. This had led to them developing a dedicated diabetes service in the practice, including access to a mobile phone line of patients who required additional support.
- Longer appointments and home visits were available when needed.

All these patients had a named GP and a structured annual review to check their health and medicines needs were being met. For those patients with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.

Good



### Families, children and young people

The practice is rated as good for the care of families, children and young people.

Good



# Summary of findings

- There were systems in place to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of A&E attendances. Immunisation rates were relatively high for all standard childhood immunisations.
- Patients told us that children and young people were treated in an age-appropriate way and were recognised as individuals, and we saw evidence to confirm this.
- The practice's uptake for the cervical screening programme was 77%, which was comparable to the CCG average of 76.5% and the national average of 74%.
- Appointments were available outside of school hours and the premises were suitable for children and babies.
- The practice offered immediate access to appointments for young children and parents were able to arrive at the practice without an appointment.
- We saw positive examples of joint working with midwives, health visitors and school nurses.

## **Working age people (including those recently retired and students)**

The practice is rated as good for the care of working-age people (including those recently retired and students).

- The needs of the working age population, those recently retired and students had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care.
- The practice was proactive in offering online services as well as a full range of health promotion and screening that reflects the needs for this age group.

Good



## **People whose circumstances may make them vulnerable**

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

- The practice held a register of patients living in vulnerable circumstances including homeless people, travellers and those with a learning disability.
- The practice offered longer appointments for patients with a learning disability.
- The practice regularly worked with other health care professionals in the case management of vulnerable patients.
- The practice informed vulnerable patients about how to access various support groups and voluntary organisations.

Good



# Summary of findings

- Staff knew how to recognise signs of abuse in vulnerable adults and children. Staff were aware of their responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.

## **People experiencing poor mental health (including people with dementia)**

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia).

- Performance for mental health related indicators at 100% was better than the national average 92.8%.
- The practice regularly worked with multi-disciplinary teams in the case management of patients experiencing poor mental health, including those with dementia.
- The practice carried out advance care planning for patients with dementia.
- The practice had told patients experiencing poor mental health about how to access various support groups and voluntary organisations.
- The practice had a system in place to follow up patients who had attended accident and emergency where they may have been experiencing poor mental health.

Staff had a good understanding of how to support patients with mental health needs and dementia.

**Good**



# Barn Surgery

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

The inspection was led by a CQC inspector.

### Background to Barn Surgery

Barn Surgery provided general medical services to people living and working in Ferring.

Barn Surgery has two partner GPs (male and female) and one female salaried GP. There are two practice nurses and two healthcare assistants, as well as a practice manager and a range of reception and administrative staff. There are approximately 3966 registered patients.

The practice was open between 7.45am and 5.00pm on a Monday, Wednesday and Friday, between 7.45am and 6.30pm on a Tuesday and between 7.45am and 12.00pm on a Friday. Telephone access was available until 6.30pm Monday to Friday. The practice was covered by a neighbouring practice on a Thursday afternoon. Morning appointments were from 08.00 to 11.00 on a Monday and Wednesday, 08.00 to 10.30 on a Tuesday and Thursday and from 08.00 to 11.30 on a Friday. An open surgery was available on a Monday, Wednesday and Friday between 2.00pm and 4.00pm and on a Tuesday between 4.00pm and 6.00pm.

The practice runs a number of services for its patients including asthma clinics, child immunisation clinics, diabetes clinics, new patient checks, and weight management support.

Services are provided from:

The Barn Surgery,

22 Ferring Street

Ferring

Worthing, West Sussex

BN12 5HJ

The practice has opted out of providing Out of Hours services to their patients. There are arrangements for patients to access care from an Out of Hours provider via NHS (111.).

The practice population has a significantly higher proportion of patients over the age of 65 and over the age of 85 at more than three times the national average. They had higher than average number of patients being cared for in nursing homes and a higher number of patients with a long standing health condition. They had a smaller percentage of patients under the age of 18 and a lower level of unemployment.

### 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 23 February 2015 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

Breaches of legal requirements were found. As a result, we undertook a focused inspection on 6 December 2016 to follow up on whether action had been taken to deal with the breaches.

# Are services safe?

## Our findings

### **Reliable safety systems and processes including safeguarding.**

At our last inspection we found that four staff including a healthcare assistant and administrative staff had not yet received safeguarding training and a further six staff had not attended a training update in the last five years.

At this inspection, we found that all staff including clinical and non-clinical staff had attended safeguarding training. For example, we viewed certificates that demonstrated all

administrative staff had completed level one child safeguarding training and that all clinical staff including healthcare assistants had completed level three safeguarding training.

### **Staffing and recruitment**

At our last inspection, we found there was no record of a criminal record check through the DBS (disclosure and barring service) for one of the nurses and one of the healthcare assistants.

At this inspection, we found that this had been addressed and that DBS checks had been carried out. The practice manager sent us copies of DBS certificates for all clinical staff.