

Statement of purpose

Health and Social Care Act 2008

Probus Surgical Centre

Service provider

Full name, business address, telephone number and email address of the registered provider:

Name	Probus Surgery
Address line 1	Tregony Road
Address line 2	Probus
Town/city	Truro
County	Cornwall
Post code	TR2 4JZ
Email	enquiries@probus.cornwall.nhs.uk
Main telephone	01726 885104
ID numbers <i>Where this is an updated version of the statement of purpose, please provide the service provider and registered manager ID numbers:</i>	
Service provider ID	1-239265751
Registered manager ID	

Statement of purpose

Health and Social Care Act 2008

Version	3	Date of next review	1 st April 2012
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Aims and objectives

What do you wish to achieve by providing regulated activities?

How will your service help the people who use your services?

Please use the numbered bullet points:

1. Probus Surgical Centre aims to deliver a range of high quality patient centred, community based surgical procedures, under local anaesthesia.

2. We aim to deliver all of our services in under 13 weeks from GP referral, with our average wait time being 8 weeks.

3. We undertake to deliver the highest possible level of care to all patients attending the centre. Patients will benefit from shorter waiting times for treatment and GP's will save money due to our charges being below the national tariff.

4. We will strive to maintain our place as a national leader in Primary Care Surgery as recognised by the Department of Health in the Care Closer to Home pilots.

5. We will maintain our high clinical standards to ensure that infections remain below 1%. We will meet regularly as a team and ensure that we continue to learn from patient feedback.

6. We will ensure that our staff are friendly, approachable and able to help all patients taking into account everyone's individual needs.

7. We will apply the latest techniques and technology to ensure that our patients receive the very best care available.

Legal status <i>Tick the relevant box and provide the information requested for the type of provider you are:</i> Use <input checked="" type="checkbox"/>	
Individual	<input type="checkbox"/>
Partnership	<input checked="" type="checkbox"/>
List the names of all partners	1. Dr Keith Round 2. Dr Vicky Bridger 3. Dr Howard Ball 4. Dr Emma Campbell 5. Dr Simon Purchas 6. Dr Guy Lin (Clinical Director)
Limited liability partnership registered as an organisation	<input type="checkbox"/>
Incorporated organisation	<input checked="" type="checkbox"/>
Company number	745036
Are you a charity?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Charity number:
Group structure (if applicable)	Please see the organisational chart contained later in this document.

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1. The aims and objectives of Probus Surgical Centre

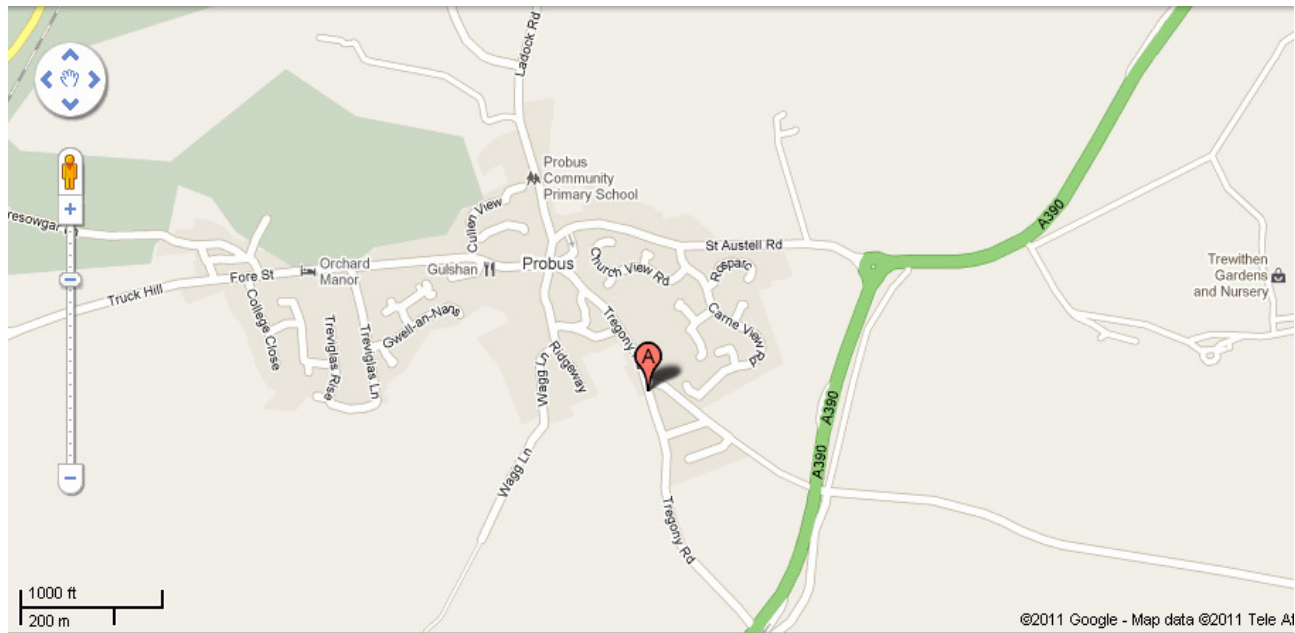
Probus Surgical Centre aims to deliver high quality, accessible and patient informed low risk surgery in a community / primary care based setting. An example of the surgical procedures offered are – vasectomy, carpal tunnel (and associated hand surgery), surgical dermatology, gynecology, ophthalmology and hernia surgery.

As a GP Practice the centre has successfully delivered a range of these services over the last 17 years with exceptionally high levels of patient satisfaction and low infection rates. Our latest patient surveys found that across the surgical specialties, our patients were reporting levels of satisfaction in the high 90% range. In line with the new “any willing provider” contracting nationally the centre currently operating under a “community services contract” it transferring services across, at which time CQC registration will now be required.

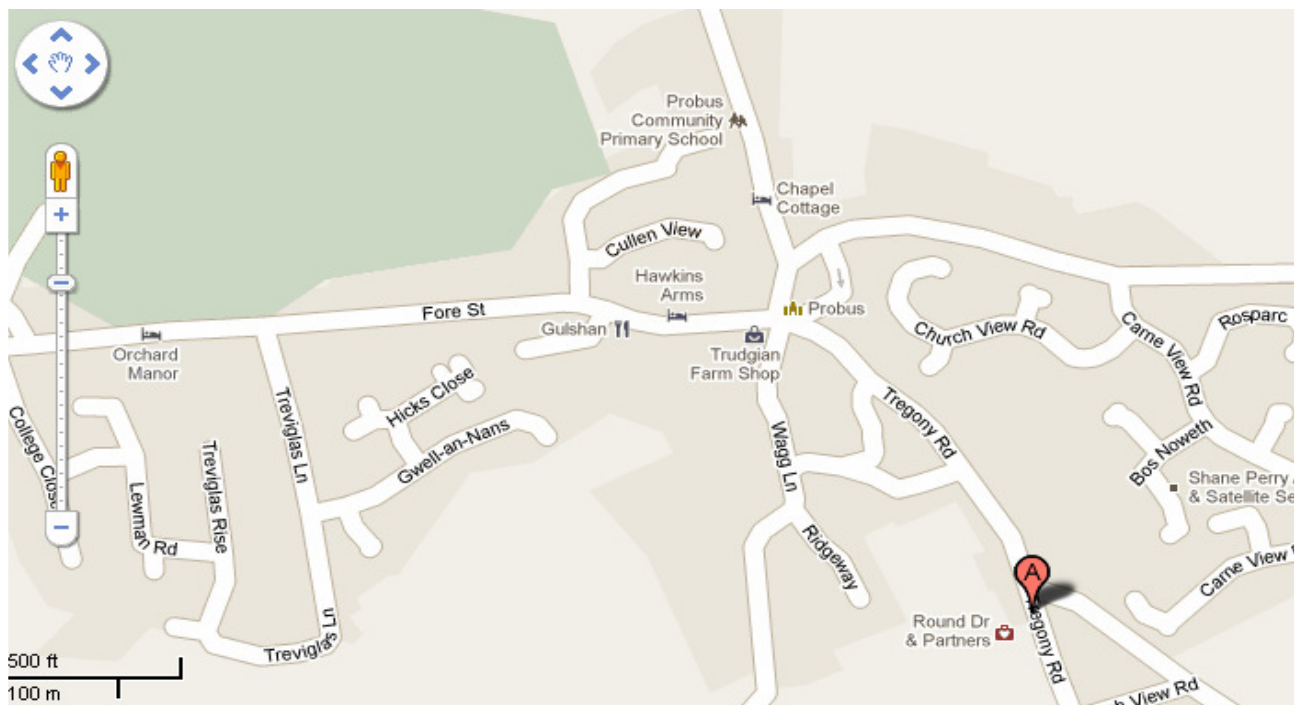
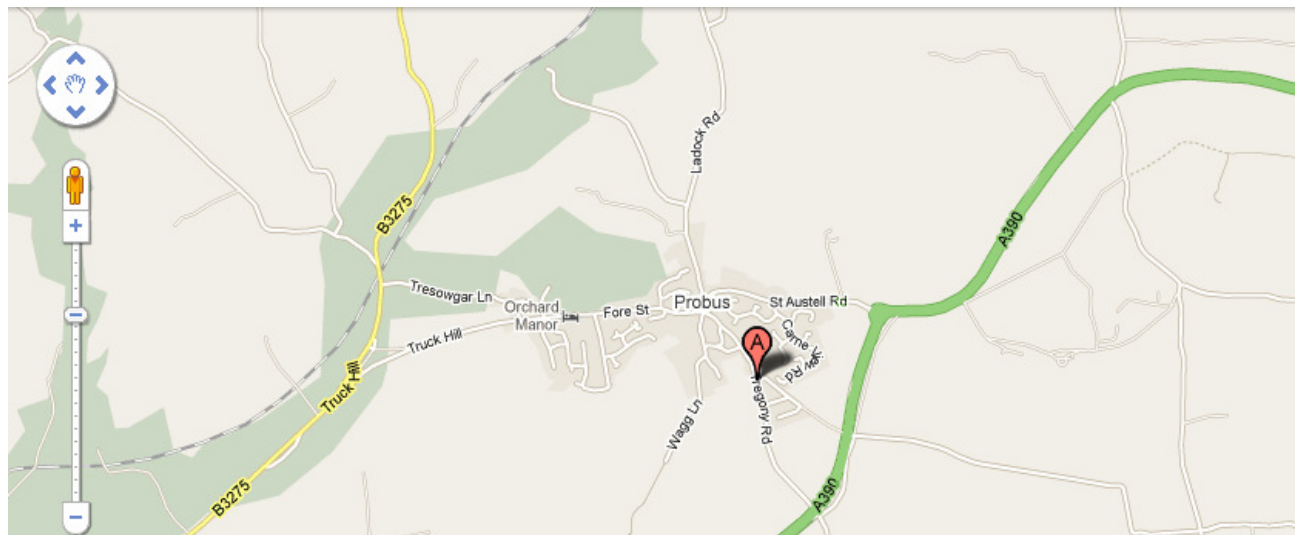
The Surgery / Surgical Centre share a building, but each of the two services within it has exclusive operational rights over the estate. The surgery is currently working on its own CQC registration for the March 2012 requirements. Further to this, the Surgical Centre has constituted itself as a limited company. This is mainly to facilitate the delivery of this new surgical contract, but also with GP commissioning in mind, to allow a degree of “distance” between both provider and commissioner. To further compliment this, from the 1st April 2011 all referrals to providers of elective surgical and medical services will all be handled through the Cornwall Referral Management Service, this being a delivery company of Kernow Health CIC. The centre currently delivers its services through a community services contract, but due to this coming to an end, the “any willing provider” contract was bid for an has been successfully awarded. To hold this contract CQC registration is also required.

Quality systems in the business have been evolved over the years, but the “Investors in People” award is not currently held by the organisation, although this is an area the business would like to consider in the near future. The Eefo kite mark is currently held and the centre employees Mr Raj Dhumale (a former surgical partner) who is the current president of the Association of Surgeons in Primary Care. His book entitled “Standards and Recommendations for Surgery in Primary Care” focuses in on the high level of quality and expected standards for primary care surgery.

The Surgical Centre is 8 miles east of Truro within the village of Probus. It is on a public transport route and has its own twin free public care parks. The village has a range of local services and it offers a tranquil and relaxing environment.



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The Centre comprises of two purpose built and high specification treatment rooms, a linked sluice, two pre and post operative rooms, sterile stores, theatre nurse reception and waiting area and 3 consulting rooms. The surgical unit was added just over three years ago in its current form and it boasts a modern, spacious and highly equipped unit which is well suited to day case surgery.

With easy access from the main road, our centre offers fully DDA compliant access and being all on one level all areas are easily reached. From the shared waiting room, patients are taken to the nurse reception area where they are introduced to the nursing team and surgeons and then taken to their single sex accommodation to get changed. Single sex toilets are also available along with disabled access. Next the patient walks from the sterile pre and post operative area after final preparations to the treatment room. During the course of the day, each treatment room dependant upon the types of operation, would typically see between 6/8 patients. Out-patient services are higher and consultation clinics normally hold approximately 12 patients. However, one area which has made this centre a national leader in the area is the fact that a large proportion of our patients with minor skin and carpal tunnel presentations, have access to a “one stop service” should they wish to access this.

Lisa Johnson the PCT Consultant Infection Control Nurse has recently inspected the facilities and has written a very comprehensive and complimentary report on the centre.

All surgery conducted at the centre involves low risk day case surgery. There are no wards or beds and only local anesthesia is used, with no other sedation. Patients are carefully selected to ensure suitability and typically patients are discharged within 30 minutes of surgery to their waiting chaperone who takes them home. Thorough patient information is given both prior to and after surgery, along with informed consent and a full patient discharge summary to the patient and referring GP. MRSA screening takes place for all of our patients, although the clinical director is currently considering applying the latest Department of Health guidance which suggests carpal tunnel surgery is now excluded.

2. The name and address of the Registered Provider and the Registered Manager

Mr Guy Lin (Nominated Individual / Clinical Director)
(Registered Manager application pending)

guy.lin@probus.cornwall.nhs.uk

01726 885104

Probus Surgery Ltd
Probus Surgical Centre
Tregony Road
Probus
Truro
TR2 4JZ

3. The relevant qualifications and experience of the registered provider and any registered manager

Probus Surgical Centre has provided surgical services for over 17 years throughout Cornwall and has been recognized by the Department of Health as an early implementer of the “care closer to home” model.

During this period of time considerable experience has been gained and also shared. The centre has over this time trained doctors and surgeons from all over the country to allow them to work with their own PCT's in the development of similar services and the centre is currently still linked with the Peninsula Medical School in Truro and regularly accepts training doctors and surgeons at all stages of their careers to help in their holistic training programme.

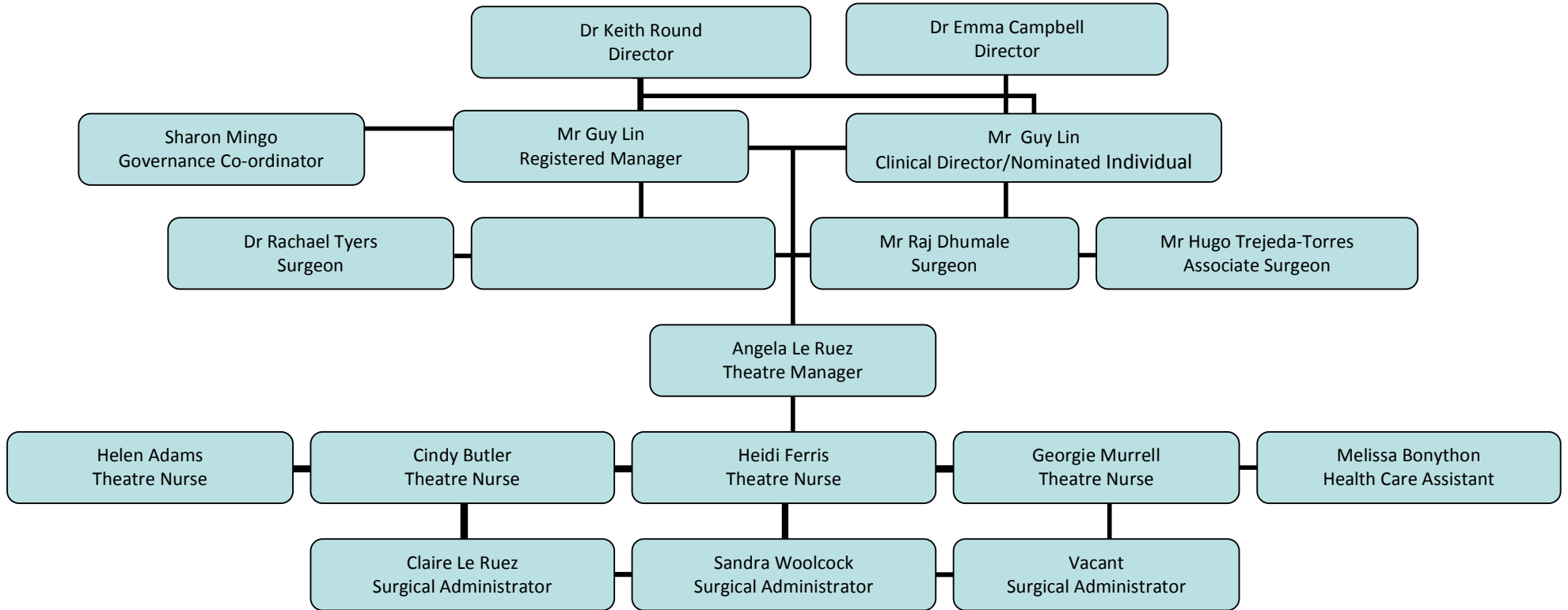
The centre has successfully performed over 2500 hernia repairs, 9000 carpal tunnel decompressions, 7000 vasectomies and well in excess of 10,000 surgical dermatological procedures.

The surgical centre is unique to Cornwall and indeed is unique only sharing this with a small hand full of centres nationally. The has been very exciting as it has allowed us with the support of our PCT to expand our services and range of procedures, the down side to this as trail blazers is that minimum standards, policies, processes and support that the NHS trusts enjoy has not been accessible to us. We have however adapted and built our own systems based upon their models but modified them to meet our scaled down needs.

The new registered manager will add their CV and management experience once appointed.

4. The number, relevant qualifications and experience of the staff working in the establishment, or for the purposes of the agency				
Role	Number employed or with practicing privileges	Permanent (P)/ Agency (A)	Relevant qualification(s)	Relevant experience
Clinical Director / GPwSI	1	P	GMC Registered Doctor and GP Partner at Probus Surgery. Mandatory Training	Experienced and well practiced surgeon accredited by the PCT as community based surgeons. GP listed on the Cornwall Performers List GP with special interest in Carpal Tunnel, vasectomy and surgical dermatology. (GPwSI) Member of the Royal College of Surgeons. Clinical Director of Probus Surgical Centre
Surgeons:	3	P	GMC registered Doctors and Surgeons. Mandatory Training*	Fellow of the Royal College of Surgeons 2x Members of the Royal College of Surgeons 1x Practitioner (Doctor) with Special Interest (PwSI)
Theatre Nurses	5	P	Nursing and Midwifery Council Qualified Mandatory Training*	In addition to current surgical nursing experience
Health Care Assistants	1	Temp Post	College of Nursing Awards as Enrolled Nurse. Mandatory Training*	Experience of working in health and social care nursing
Surgical Administrators	2	P	Administration Qualifications Mandatory Training*	Experience of surgical administration.
Visiting Consultants Mixed sessions mainly delivering out-patient consultation services with surgery planned for our planned basket of procedures.	2	Visiting from local acute hospital	Consultant Surgeons holding senior posts at the Royal Cornwall Hospital, Truro. Members on the Specialist Register Mandatory Training Enhanced Appraisal Senior Teaching Staff at the Peninsula Medical School, Truro. Mandatory Training*	Fellows of the Royal College of Surgeons Considerable experience and training as general and specialist consultant surgeons. Currently substantively employed by the Royal Cornwall Hospital, Truro.
Governance Co-ordinator	1	P		

5. The organisational structure of the establishment/agency



6. The organisational structure of the establishment/agency continued

The surgical team at Probus Surgical Centre is quite compact given the number of patients that access the service (approximately 4000 patients per year) The reason for this is that we are able to take advantage of the fact that the centre is small and that we have streamlined systems along with staff that are able to multi task.

The centre having its roots within general practice, has always sourced its training via the resources available. However with the formation of the new limited company to allow for the development of our new services has resulted in us now being able to access the on-line "MOODLE" training via the Cornwall Partnership Trust. We have been accessing this over the last few months and have been putting all of our staff through their mandatory training, where appropriate, through this system. A few are still undertaking this but will be completed shortly. The organization is also currently exploring a new working relationship with the Royal Cornwall Hospital Training department to try and rationalise some of the training available to our staff.

The staffing team that we have in place work flexibly over the time that the centre is open. Currently we deliver services Monday – Friday between the hours of 8.30 am to 6.30 pm. We have in the past delivered services on a Saturday and we plan to hopefully do this again in the future.

Our staff are contracted to work either a full day or half days and if sickness or training absence presents itself, the team has sufficient internal capacity to cover this. The centre only delivers planned surgical procedures via the Choose and Book administration system and does not take emergency referrals, nor does the centre over any accident and emergency services. Our surgeons work the same hours as the nursing team, again absence can be easily covered by our visiting consultant colleagues and the administration team work standard office hours. After hours an answer phone service is available, surgeons can be contacted by patients via mobile or the out of hours service can be of assistance.

When a new member of staff joins the business, they are taken through a staff induction programme and then if necessary updated on all of their mandatory training. The member of staff is then entered onto the training matrix and their core training monitored. This is a new system to the business and we are currently populating all of the staff information onto this.

Provider compliance assessment against all Essential Standards:

Within the service several changes have been implemented to strengthen our compliance against these standards. These improvements include a new patient discharge summary with on-going care plan, a review of staff training and what the organization feels is mandatory linked to the on-line training now available, some staff are still working through this at point of application but we envisage this being

completed with the next month. The NHS constitution is being imbedded into the service along with updates to some of our policies – whistle blowing & violence and aggression for example.

Within the whole service a new risk register is being developed to capture and grade all risks within the organization. The centre has an established incident logging system which will be linked to this new process, the findings of which will be presented regularly to the Directors with actions required and ratings.

Following on from our recent PCT inspections by infection control and the PCT Medicines Manager, we feel that our infection prevention and control measures along with our medicines management across outcomes 8 and 9 are compliant. We have updated some of our practice based upon these inspections mainly around processes and combined with some update training the centre is now more advanced overall across these measures.

Although the building is only 3 years old and linked to an existing GP Practice, there are some improvements identified which we have tabled within our estates development plan. These improvements range from cosmetic updates to improved storage. A new procurement policy for purchasing now that we have access to NHS Supply Chain is being drafted, along with updated risk assessments on all the rooms within the centre by the office manager. Records management processes have been updated and off-site storage in line with the PCT have been implemented.

7. The kinds of treatment and any other services provided for the purposes of the establishment/agency, the range of needs which those services are intended to meet, and the facilities which are available for the benefit of patients

The kinds of treatment we will be delivering are contained within the information leaflet attached. All of these surgical procedures are planned and low risk with the application of local anesthetic. Many of these are traditionally referred to as “doctor’s office” procedures with the exception of hernia repair and they carry an overall low risk.

We plan to deliver surgical out-patient services along with surgical procedures from our main site in Probus and from the following sites we would like to offer an out-patient consultation service. This would allow patients to come and speak to a surgeon, once referred from their GP, at a site closer to home. If a surgical procedure is then required, patients are given the opportunity to come to our surgical site at Probus for the procedure.

Pathology services for our patients are delivered via a service level agreement with our local acute hospital. These results are then viewed securely via the NHS IT systems in Cornwall.

Sterile Services support like that of the pathology service are offered via a service level agreement with the local acute hospital. Surgical operating equipment is collected from the main site at Probus, transported securely to the sterile services department at the Royal Cornwall Hospital. It is then cleaned, certified sterile and couriered back to the sterile stores within the surgical centre. Within the service we have a large number of equipment, to accommodate any delays or unforeseen problems which might occur in having our equipment cleaned off-site. The sterile services department currently undertakes the majority of this work all of the main providers in Cornwall. Our current service level agreement is being reviewed to ensure that it is meeting the current demands of both services.

Until recently all ordering of consumables was being done through a range of providers, but we have recently gained access to the NHS Supply Chain. This step forward has allowed us to purchase the majority of our consumables through one organization reducing the associated administration and costs involved.

Finally, the NHS Courier service is also used by the centre, this providing essential internal postal and delivery services.

Other than those listed, we do not handle any of the other typical services that a hospital would. For example we do not handle bloods, cancer care, IVF/Termination of pregnancy, any IV medications or air way management. To draw a comparison, we are a small community based version of a day surgical unit, without wards or beds



8. The arrangements made for consultation with patients about the operation of the establishment/agency

Probus Surgical Centre has evolved over the last 17 years from delivering a small number of vasectomies, to now over a 1.5 million pound surgical service. The original services delivered were developing by Dr John Tisdale, at the time a GP partner at Probus Surgery. John when consulting patients wanted to be able to deliver services for his patients that were both closer to home and more cost effective for the PCT/Health Authority. Patients were not happy with having to travel and wait to be seen in the local acute hospital and based upon those early patient interventions, the surgical centre was born.

Until the present day, the centre has always prided itself as being a Primary Care Community based service which listens to patients needs and responds when able in delivering new services across Cornwall.

Pragmatically, the centre through its surgical administration team conducts quarterly patient evaluation audits, these being overseen by the clinical director, Mr Guy Lin. These audits are based upon the surgical specialty areas that the patient received treatment in and they contain both qualitative and quantitative elements to measure the quality and effectiveness of our care. The results of these are then published on our website (this is being updated and is being transferred soon) and used via our governance meetings to measure the impact of our care with our patients and make any changes that become apparent. On occasion, a common theme might become apparent and if this is the case, the centre will investigate this further and if necessary produce an action plan to ensure that our services adapt and change given the needs of our patients.

The centre has always received extremely high levels of satisfaction from our patients and we believe that this is because the centre applies a very “personal touch” to all of its patients. Patients are empowered with information and given choice in the design of their individualised care packages and due to the highly efficient organisational structure needless administrative stages can be removed this greatly shortening the patient journey.

Patients through our patient participation group (PPG) are able to have a further voice in the development of our services. Our PPG is still quite young in its current form having been relaunched to cover the PMS side of the business, but it is showing very early signs of being a dynamic driving force behind our services. Our PPG has an independent chair and salaried staff to drive this, along with a representative sample of over 30 patients. The group has been designed with the help of the PCT links team and early findings from the group are already being put into action.

For patients that require additional support in accessing our information, whether this is in person using sign language or through another translatable language, we have access to the ICAS service, Language Line and also the Patient Administration Liaison Service within the local NHS Trust.

Our Clinical Governance plan needs to be improved to reflect the new range of service we are hoping to offer from July and after conducting a planned “major incident” our policy surrounding this needs to be updated.

9. The arrangements made for contact between any inpatients and their relatives, friends and representatives

Within the surgical centre, we only see patients that are suitable for day case low risk surgery. This is mainly due to the setting, the previous requirements of the PCT and also the ethos of the service. The centre prides itself in being able to deliver a friendly, personable and high quality service to patients typically in under 8 weeks of referral from their GP.

As no patients are classed as in-patients, due to not having wards or facilities for overnight stays, all patients either attend with a carer, friend or relative so contact between members of the family from the patient's perspective is easily made. Should a patient wish to speak with any member of their family or friends, then a member of the surgical team will ensure that this is done as soon as is practically able.

Once a patient has been listed for a surgical procedure with us, a member of the nursing team will phone the patient after their initial appointment and talk them through the information they were given at the out-patient appointment to make sure that they are happy with everything that is required. This could include how to get to the centre, the stopping of any medication (with GP approval) prior to attending, or how to personally prepare for the operation. Any questions the patient may have are answered, any concerns are expressed with reassurances given and always the patient is made to feel in control of the whole process. If the patient wants to discuss the procedure again with the surgeon, the named surgeon will phone the patient back, occasionally the patient might change their mind and re-book the appointment in a couple of months time to fit in with work or holiday arrangements, this is always accommodated.

The staff in the centre will also with the patient's permission, phone a relative on their behalf if this is easier for the patient and relay any information that is required. The service due to not having wards or the ability to offer in-patient stays, does not have a waiting times policy, instead we will accommodate all patient needs on an individual basis.

10. The arrangements for dealing with complaints

Within Probus Surgical Centre we pride our self in the quality of our services, but recognize that occasionally a patient might want to comment, give praise or raise a complaint. The centre has a complaints policy which follows the NHS complaints procedure guidance for all staff to follow, but in essence if a patient is unhappy with our service we would welcome to patient to either phone the centre and speak to either the surgical manager or nurse manager and explain their concerns, or to write to either at the following address:

Mr Guy Lin	Mrs A LeRuez
Clinical Director	Surgical Nurse Manager
Probus Surgical Centre	
Tregony Road	
Probus	
Truro	
Cornwall	
TR2 4JZ	

01736 885104 / guy.lin@probus.cornwall.nhs.uk

Once we receive such a letter, we will contact the patient, discuss the concerns and agree on how the patient wishes the complaint to be handled. If after investigating the complaint and patient is still not happy, they are able to then access the following support:

Cornwall & IOS PCT
The Sedgemoor Centre
Priory House
St Austell
PL25 5AS 0845 170 8000

PALS – Patient Advice and Liaison Service (01872 252793) this service run by the local PCT offers patients information, advice and advocacy with a wide range of issues.

Devon and Cornwall ICAS (Independent Complaints Advocacy Service)

17 Dean Street
Liskeard
Cornwall
PL14 4AB

Tel: 0845 120 3782

Email: liskeard.icas@seap.org.uk

CQC
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Further information is available on our website www.cqc.org.uk or by calling our National Contact Centre on **03000 616161**.

The centre receives a very low number of complaints, over the last year only 3 have been received and these are all addressed swiftly and to the patient's satisfaction.

14. The arrangements for respecting the privacy and dignity of patients

Probus Surgical Centre has been designed followed the Department of Health standards for day case surgery and the equipment levels within the centre are of a top class specification used throughout theatres across the country. This facility based upon these building standards has been inspection independently by the local PCT Consultant Infection Control Nurse and the NHS Trust Estates Manager.

As a patient arrives to the centre they are greeted by the reception team, booked in and shown through to the waiting room. From here they pass by two single sex / disabled toilets which are lockable. From here they enter the theatre reception where one patient is booked at a time and then shown into a consulting room where they meet the surgeon. The surgeon gains consent from the patient and then shows them through to a single sex changing room, after which the patient walks through to theatre. After the operation the patient return to the post operative room where they get changed, they walk through to the nurse reception where refreshments are given, these can be taken in private if they wish, they are then escorted out of the centre by the patients nominated carer and then home.

Apart from the single sex accommodation, changing screens etc, the centre has policies for all staff surrounding confidentiality, dignity & privacy, consent, safeguarding, information governance and patient records which all improve the journey that the patient would expect through our service. The centre is also in the process of conducting equality impact assessments on all of our policies to ensure that these accommodate all needs.

Due to the set up and design of the service we feel that this caters for all including minority cultural communities. We have only on a few occasions been asked for our information in other formats, but due to the demographic make up of the county a truly wide and diverse range of needs has not been experienced yet.

In addition to this, the centre has recently been inspected by an independent DDA inspector to ensure that all of our facilities cater for disabled users. The centre has passed with some minor amendments necessary, which have been added to our estates development plan. Also within this plan we have maintenance for the surgical unit planned and on-going estates essential care.

Further more, the staff at the centre are aware of the main guidance surrounding the Mental Capacity Act.

Signed: ___ **Mr Guy Lin** _____

Designation: ___ **Clinical Director** _____