

Picton Green Family Practice

Quality Report

Picton Neighbourhood Health & Children's Centre
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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

Are services safe?

Good



Summary of findings

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Overall summary

We carried out an announced comprehensive inspection at this practice on the 1st October 2014 and at this time the practice was rated as good. However, breaches of a legal requirement were also found. After the comprehensive inspection the practice wrote to us to say what they would do to meet the following legal requirements set out in the Health and Social Care Act (HSCA) 2008:

Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

On the 5 May 2016 we carried out a focused review of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This review was carried out to check whether the provider had completed the improvements identified during the comprehensive inspection carried out in October 2014.

This report covers our findings in relation to those requirements and areas considered for improvement. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Picton Green Family Practice on our website at www.cqc.org.uk.

The findings of this review were as follows:

- The practice had addressed the issues identified during the previous inspection.
- Appropriate recruitment checks had been carried out for staff. The practice had undertaken DBS checks for all staff members. All of the staff files had been updated with the latest photographic identity checks (ID's) and contact details.
- The practice has since developed a system to monitor the Patient Group Directives (PGD). PGD were well managed to ensure the safe administration of relevant medicines by appropriately qualified staff.
- When training updates were due the practice booked staff onto relevant training. All of the practice staff have had up to date infection control training.
- Picton Green Family Practice have acquired oxygen and all of the practice staff have been trained to use emergency equipment such as the oxygen cylinder and defibrillator.

Letter from the 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?

The practice is rated as good for providing safe services. Evidence was provided as part of this desk based review to show improved systems.

- The practice had updated their recruitment processes. Recruitment checks had been revised to include the required checks necessary to show safe procedures being in place and to comply with regulations.
- Patient Group Directives were well managed to ensure the safe administration of relevant medicines by appropriately qualified staff.
- Staff had received updated training necessary for their role, such as infection control, use of the oxygen cylinder and defibrillator.

Good



Picton Green Family Practice

Detailed findings

Our inspection team

Our inspection team was led by:

This desk top review was undertaken by a CQC Inspector.

Background to Picton Green Family Practice

Picton Green Family Practice is registered with the Care Quality Commission to provide primary care services. It provides GP services for 2,600 patients living in the Picton neighbourhood area of Liverpool. The practice has one GP partner, and has the support of three regular locum doctors covering one vacancy, a practice manager, a practice nurse, healthcare assistant and administration and reception staff.

The practice is open Monday, Wednesday, Thursday and Friday from 8am to 6.30pm and 8am to 8pm on Tuesday. Patients can book appointments in person or via the phone. The practice provides telephone consultations, pre bookable consultations, urgent consultations and home visits. The practice treats patients of all ages and provides a range of medical services. When the practice is closed patients can access the out of hour's provider for Liverpool, Urgent Care 24 (UC24).

The practice is part of Liverpool Clinical Commissioning Group (CCG). It has a General Medical Services contract, (GMS.) The practice is situated in an area of high deprivation. The practice population is made up of a higher

than national average younger population and a lower than national average of patients aged over 65 years. Nearly 50% of the patient population has a long standing health condition and a higher than national average number of unemployed.

Why we carried out this inspection

We carried out a desk top review of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The review was planned to check whether the provider had completed the improvements identified during the comprehensive inspection carried out in October 2014. The checks made were to ensure the provider was now meeting the legal requirements and regulations associated with the Health and Social Care Act 2008. We reviewed the practice against one of the five questions we ask about services: is the service safe?

How we carried out this inspection

This inspection was carried out as a focused desk based review. The practice was contacted and a request was made to submit evidence to show that the practice had completed the improvements required, following the comprehensive inspection carried out in October 2014. A range of information was submitted by the practice and reviewed by the CQC Inspector.

Are services safe?

Our findings

Overview of safety systems and processes

At the inspection undertaken in October 2014 we identified some concerns in relation to staffing and recruitment checks. Following the inspection, the practice submitted an action plan to provide detail of what they had done to show improvement with the recruitment checks for staff. They had arranged to carry out DBS checks for all staff. An updated action plan submitted in May 2015 showed that all of the staff files have been updated with the latest photographic identification and contact details. The staff files also included an up to date employment contract for each staff member. All recruitment checks met regulatory requirements and all records necessary to show safe recruitment of staff.

The provider had responded positively to feedback on areas that could be improved. The practice has developed a system to monitor the Patient Group Directives (PGDs are documents permitting the supply of prescription only medicines to groups of patients without individual prescriptions and via sufficiently trained staff.). On the introduction of new PGDs the practice ensured they were accessible to staff and were signed by both the authorising GP and the practice nurse who administered the vaccines.

The practice has made sure that it holds on record up to date training certificates of the practice nurse and health care assistant employed by the practice. This ensured

the safe administration of relevant medicines by appropriately trained staff. The practice had reviewed the training needs of staff that administered B12 injections. They have clarified that staff have up to date training certificates relevant to their role for administering this medication.

Picton Green Family Practice demonstrated appropriate infection control within the building and in relation to the clinical procedures carried out within the practice. All the practice staff had infection control training in May 2015. The training helped the staff understand the importance of occupational infection control measures and helped raise their awareness of their responsibilities in managing infection control. Staff were trained in hand decontamination, the use of personal protective equipment, and the safe use and disposal of sharps. An infection control inspection was conducted in October 2015. The practice scored highly, 99.6% which confirmed compliance with infection control procedures within the premises.

The practice had obtained an oxygen cylinder and all practice staff had been trained to access the oxygen cylinder in February 2015. Staff were aware of the location of where the oxygen cylinder was stored and how to access it. Practice staff were up to date with their CPR and defibrillator training. The practice staff were trained in March 2016. Updated access to medical emergency equipment and updated training ensured that staff could safely and appropriately respond to medical emergencies.