

Poole Road Medical Centre

Inspection report

7 Poole Road
Bournemouth
Dorset
BH2 5QR
Tel: 01202761120
www.pooleroadmedicalcentre.co.uk

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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 location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

This practice is rated as Good overall. (Previous rating June 2018– Good)

The key questions at this inspection are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out an announced focused inspection at Poole Road Medical Centre on 19 March 2019. This was to follow up on breaches of regulations. At our previous inspection in June 2018 we found that the practice had failed to ensure care and treatment was provided in a safe way to patients. This included systems to monitor the storage of medicines and equipment and the implementation of actions identified, through significant event analysis, to reduce risk.

The practice was told that they must also ensure that arrangements for the use of Patient Group Directions (PGDs) by individual health professionals working under these directives, to include signatures to confirm how they are competent and authorised to carry out the specific types of injections.

The practice was rated as requires improvement in safe and issued with a requirement notice to improve in these areas and this inspection was to check that the practice had completed those improvements.

The previous inspection report can be found on our website www.cqc.org.uk.

At this inspection, we only inspected the safe key question and found:

That the practice had completed the improvements required and had also responded to other areas where we requested that they should review.

The practice continued to complete annual appraisals for staff.

The practice had undertaken DBS checks on all new staff.

The practice had worked to improve and promote the uptake of childhood immunisations

The practice had reviewed and was improving patient satisfaction regarding access to appointments.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Please refer to the detailed report and the evidence tables for further information.

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser.

Background to Poole Road Medical Centre

Poole Road Medical Centre provides primary medical services to approximately 9,500 patients. The registered provider is Poole Road Medical Centre.

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

The practice operates from the main location;

Poole Road Medical Centre

7 Poole Road

Bournemouth

BH2 5QR.

The practice population is in the fifth most deprived decile for deprivation. In a score of one to ten the lower the decile the more deprived an area is. The average life expectancy for male and female patients was comparable to the national average.

There are three GP partners and four salaried GPs, three of which are male and four are female. The practice also employed two practice nurses, two health care assistants, a practice manager, and additional administration and reception staff.

When the practice is closed patients are directed to out of hours services by dialling the NHS 111 service.

Are services safe?

We rated the practice as good for providing safe services.

At our last visit in June 2018 we rated this domain as requires improvement and issued the practice with a requirement notice. At this inspection we saw that the practice had addressed this area and had made the required improvements.

Risks to patients

There were adequate systems to assess, monitor and manage risks to patient safety.

- The practice was equipped to deal with medical emergencies and staff were suitably trained in emergency procedures.
- Staff understood their responsibilities to manage emergencies on the premises and to recognise those in need of urgent medical attention.
- Equipment was always been checked on a monthly basis for expiry dates and usage.
- Following the last inspection, the practice added small ancillary equipment and cleaning to the checking process and this was now completed each month. the practice was able to demonstrate that the medical oxygen and defibrillator had been checked regularly.

Appropriate and safe use of medicines

The practice had reliable systems for appropriate and safe handling of medicines.

- The systems for managing and storing medicines, including vaccines, medical gases, emergency medicines and equipment, minimised risks.
- The practice had arrangements for the use of Patient Group Directions (PGDs) by individual health professionals working under these directives, to include signatures to confirm how they were competent and authorised to carry out the specific types of injections.
- A GP Partner had countersigned all PGD's prior to administration of each vaccine.
- Clinical staff are also advised to seek guidance should there be any doubt in process in administering vaccines.
- Nursing staff had desktop access to all PGD's for reference.

Lessons learned and improvements made

The practice learned and made improvements when things went wrong.

- Staff understood their duty to raise concerns and report incidents and near misses. Leaders and managers supported them when they did so.
- There were adequate systems for reviewing and investigating when things went wrong. The practice learned and shared lessons, identified themes and took action to improve safety in the practice.

Please refer to the evidence tables for further information.