

Shiregreen Medical Centre

Quality Report

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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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Shiregreen Medical Centre on 3 August 2016. The overall rating for the practice was good with requires improvement for the 'safe' domain. The full comprehensive report on the 3 August 2016 inspection can be found by selecting the 'all reports' link for Shiregreen Medical Centre on our website at www.cqc.org.uk.

This inspection was a focused desktop inspection carried out on Wednesday 29 March. This was to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 3 August 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- the practice had carried out risk assessments for fire safety, legionella and health and safety at the main and the branch surgery.
- The practice had updated their recruitment process to include structured interview questions.
- The provider had documented staff appraisals.
- The practice had updated their complaints process to include the Parliamentary Health Service Ombudsman details.
- Arrangements were being considered to improve and maintain patient confidentiality in the reception area.
- The oxygen and the defibrillator had been checked regularly.
- An annual infection prevention and control audit had been carried out at the branch surgery.

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 had carried out risk assessments for fire safety, legionella and health and safety at the main and the branch surgery.
- The practice had updated their recruitment process to include structured interview questions.
- The provider had documented staff appraisals .
- The practice had updated their complaints process
- he provider had considered new arrangements to improve and maintain patient confidentiality in the reception area.
- The oxygen and the defibrillator had been checked regularly.
- An annual infection prevention and control audit had been carried out at the branch surgery.

Good



Shiregreen Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Inspector.

Background to Shiregreen Medical Centre

Shiregreen Medical Centre (which incorporates a branch surgery) is situated in Sheffield city centre. The practice provides services for 7,600 patients under the terms of the NHS General Medical Services contract. The practice catchment area is classed as within the group of the most deprived areas in England. The age profile of the practice population is similar to other GP practices in the Sheffield Clinical Commissioning Group (CCG) area.

The practice has one none profit sharing female GP partner, one male profit sharing partner and two female profit sharing partners; one female salaried GP and two male salaried GPs, four GP registrars, one nurse practitioner, two practice nurses and four healthcare assistants. They are supported by a team of practice management staff and an administration team.

The practice is open between 8am and 6pm Monday, Tuesday, Wednesday and Friday and 8am until 1pm on Thursdays. Appointments with staff are available at various times throughout the day. Extended hours are offered between 6.30pm and 8.30pm one evening per week and one Saturday each month from 9am until 1pm. When the practice is closed calls are answered by the out-of-hours service which is accessed via the surgery telephone number or by calling the NHS 111 service.

Why we carried out this inspection

We undertook a comprehensive inspection of Shiregreen Medical Centre on August 3 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated good overall but as requires improvement for the 'safe' domain. The full comprehensive report following the inspection on 3 August 2016 can be found by selecting the 'all reports' link for Shiregreen Medical Centre on our website at www.cqc.org.uk.

We carried out a desktop inspection of Shiregreen Medical Centre on 29 March 2017. This inspection was undertaken to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

We carried out a focused desktop inspection of Shiregreen Medical Centre on 29 March 2017. This involved reviewing evidence such as:

- Risk assessments for fire safety, legionella and health and safety.
- Recruitment processes which included structured interview questions and evidence that staff appraisals had been carried out and documented.
- The practice complaints process which included the Parliamentary Health Service Ombudsman details.
- Evidence from minutes of a staff meetings.
- Evidence that the practice were checking and logging the oxygen and defibrillator.

Detailed findings

- An annual infection prevention and control audit for the branch surgery and an action plan to address key issues.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

- At our previous inspection on 3 August 2016 we rated the practice as requires improvement for providing safe services because: we did not see risk assessments for fire safety, legionella or health and safety at the main or the branch surgery; the practice recruitment process needed updating; some staff appraisals had not been documented; patient confidentiality was compromised in the reception area; oxygen and the defibrillator had not been checked or logged and there was no infection prevention and control audit in place at the branch surgery.
- During our desktop inspection on 29 March 2017 we saw evidence that the practice had had carried out risk assessments for fire safety, legionella and health and safety at both the main and branch surgery.
- we found that the practice had updated their recruitment process to include a number of structured interview questions and we saw evidence that staff appraisals had been documented.
- we saw evidence from minutes of a staff meeting which identified the practice were considering arrangements to maintain and improve patient confidentiality in the reception area. This included purchasing an arrival log in screen, staff answering more telephone calls in the back reception area and a screen/blind being fitted at one side of the front reception. Reception staff had also been alerted to the importance of confidentiality whilst on the telephone.
- we saw evidence that both the oxygen and defibrillator had been checked regularly and this was clearly logged.
- we saw evidence that the practice had carried out an annual infection prevention and control audit at the branch surgery. We saw an action plan was in place to address key issues.