

Fakenham Medical Practice

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

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 Fakenham Medical Practice on 6 September 2016. This inspection was in follow up to our previous comprehensive inspection at the practice on 23 March 2016 where breaches were found. Following the 23 March 2016 inspection, the practice was rated as requires improvement for providing safe services and the overall rating of the practice was good. We issued requirement notices to the practice to inform them where improvements were needed. After the 23 March 2016 inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to safe services.

Our key findings across all the areas we inspected were as follows,

- We found that improvements had been made and that the systems and process in place ensured safe management of medicines for patients.
- The practice had completed robust fire risk assessments and had taken action on improvements identified.
- The practice had a system to ensure that the immunisation status of clinical staff employed at the practice was held.
- The practice had undertaken audits to encourage improvement, and share learning.

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?

We reviewed the actions taken by the practice in response to the requirement notice issued to them following the inspection on 23 March 2016. We found that safety systems had been improved.

Good



Summary of findings

The six population groups and what we found

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



Fakenham Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC lead Inspector undertook this inspection.

Why we carried out this inspection

We inspected this service as part of our new comprehensive inspection programme. We carried out a focused inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the requirements of the requirement notice issued following a comprehensive inspection on 23 March 2016. The requirement notice was issued because we found risks that required attention by the practice. We returned on 6 September 2016 to ensure the practice had taken action to mitigate the risks.



Are services safe?

Our findings

On the day of the inspection we found that the practice had made improvements to the issues identified in the inspection report from March 2016.

During our previous inspection in March 2016, we were concerned that nurses were working outside of their scope of practice as on occasions the GP signed prescriptions issued by nurses without seeing or reviewing the patient's medical records.

On the day of the inspection, the practice demonstrated that they had taken action and systems were in place to ensure that GPs had clinical oversight, reviewed the medical records, or had a clinical discussion with the practice nurses, who were not qualified to prescribe medicines to patients before signing the prescription for the patient.

An audit of the new system was undertaken in September 2016. The audit showed that the GPs had accessed 94% of the records of patients requiring medicines to be prescribed following a consultation with the practice nurse and 89% of these records held a written comment from the GP.

The practice had identified that one GP had not always recorded that they had retrieved the medical records or added a comment to evidence that they had reviewed the practice nurse entry; the practice had addressed this issue with them.

The practice told us that they were expanding the audit to include a review of antibiotics prescribing during minor illness clinics.

During our inspection in March 2016 we found that the practice had not undertaken a fire risk assessment at the branch site at Walsingham and actions identified in a risk assessment dated October 2015 of the Fakenham Medical Practice site had not been implemented.

Following our previous inspection, the practice had commissioned specialist contractors to undertake comprehensive fire risk assessments of both sites (Fakenham Medical Practice and the branch site at Walsingham. On the day of the inspection 6 September 2016, we reviewed the reports which detailed a significant number of improvements needed. We found the practice had developed an action plan and completed all the immediate actions. For example, the training of staff, fifteen members of staff had been trained to be fire wardens ensuring that at least two wardens were present at each site each day.

There were some actions that still required completion. For example, the risk assessment recommended that the alarm panels were upgraded; the practice showed us that they had obtained a quote and that this was scheduled for discussion on the agenda for the partners meeting later that month.

During our inspection in March 2016, we found that the practice did not have a record of the immunisation status of the clinical staff employed at the practice. At our September inspection, we were shown immunisation records relating to most practice staff (90%). The practice told us that the practice nurse would complete this work within the next few weeks.