

Twickenham Park Surgery - Johal

Quality Report

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Date of inspection visit: 9 March 2017

Date of publication: 25/04/2017

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 of Twickenham Park Surgery on 20 September 2016. The practice was rated as good overall. A breach of legal requirements was found relating to the Safe domain. After the comprehensive inspection, the practice submitted an action plan, outlining what they would do to meet the legal requirements in relation to the breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

During the comprehensive inspection we found that the practice had failed to ensure that the necessary documentation was in place for the administering of medicines. We also identified areas where improvements should be made, which included advertising the availability of chaperones and language translation, ensuring that staff have received appropriate training in line with the practice's chaperone policy, ensuring that their recruitment policy is up to date, reviewing the arrangements for storing emergency medicines, reviewing their arrangements for distributing medicines updates to staff, ensuring that complete records are kept relating to complaints, and reviewing the way that significant events are investigated and the learning from them is shared and embedded.

We undertook this focussed desk-based inspection on 9 March 2017 to check that the practice had followed their plan and to confirm that they now met the legal requirements. This report covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Twickenham Park Surgery on our website at www.cqc.org.uk.

Following the focussed inspection, we found the practice to be good for providing safe services. Following the follow-up inspection, they are rated as good overall.

Our key findings were as follows:

- The practice had the correct documentation in place to allow staff to administer medicines, and we saw evidence that the practice had ensured that all staff were aware of the process and their responsibilities in relation to this.
- The practice advertised the availability of language translation services in the waiting area.
- The practice ensured that all staff who acted as chaperones were trained for the role, and they advertised this service to patients in the waiting area.
- The practice's recruitment policy had been updated to accurately reflect the practice's approach to carrying-out Disclosure and Barring Service (DBS) checks on staff.

Summary of findings

- The practice held stocks of emergency medicines and these were stored in an area of the practice which was secure but easily accessible to staff in an emergency.
- The practice had an effective system in place for distributing medicines updates to relevant staff and kept a record of the action that they had taken in response to these alerts.
- We saw evidence that the practice kept detailed records of significant events, and that action was taken to share and embed learning resulting from incidents.
- The practice kept complete records relating to complaints received, including records of action taken to share learning resulting from complaints with staff.

However, we noted that the practice did not always include contact details for the Parliamentary and Health Service Ombudsman in their complaint responses.

One area where the provider should make improvement is:

- They should ensure that they provide contact details for the Parliamentary and Health Service Ombudsman in their complaint responses so that patients can continue to pursue their complaint if they are unhappy with the practice's response.

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 the correct legal paperwork in place to allow staff to administer medicines.

Good



Twickenham Park Surgery - Johal

Detailed findings

Our inspection team

Our inspection team was led by:

This desk-based follow-up inspection was conducted by a CQC inspector.

Background to Twickenham Park Surgery - Johal

Twickenham Park Surgery provides primary medical services in St Margaret's to approximately 7,500 patients and is one of 29 practices in Richmond Clinical Commissioning Group (CCG). They are a teaching practice for medical students and GP registrars.

The practice population is in the least deprived decile in England. The proportion of children registered at the practice who live in income deprived households is 4%, which is lower than the CCG average of 9%, and for older people the practice value is 9%, which is lower than the CCG average of 11%. The practice has a smaller proportion of patients aged 15 to 29 than the CCG average and a higher than average proportion of patients aged between 30 and 49. Of patients registered with the practice, the largest group by ethnicity are white (89%), followed by asian (6%), mixed (3%), and other non-white ethnic groups (2%).

The practice operates from two-storey purpose-built premises. There is no patient car parking at the practice; parking is available in the surrounding areas but this is time-limited. The reception desk, waiting area, and most of the consultation rooms are situated on the ground floor.

The first floor contains further consultation rooms, a library and a meeting room. There is a lift between the ground and first floors. The practice has access to ten consultation rooms and one treatment room.

The practice team at the surgery is made up of two part time male GPs, one full time female GP and one part time female GP who are partners, in addition, one male long-term locum GP is employed by the practice, and two GP registrars. In total 14 GP sessions are available per week. The practice also employs one part time female nurse, one part time assistant practitioner in primary care (an enhanced healthcare assistant role), and one trainee healthcare assistant. The clinical team are supported by a practice manager, assistant practice manager, five receptionists and one secretary.

The practice operates under a General Medical Services (GMS) contract, and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract).

The practice is open between 8:15am and 6:00pm Monday to Friday. Appointments are from 8:30am to 1:00pm every morning, and 2:00pm to 6pm every afternoon. Extended hours surgeries are offered between 6:00pm and 7:30pm on Mondays.

When the practice is closed patients are directed to contact the local out of hours service.

The practice is registered as a partnership with the Care Quality Commission to provide the regulated activities of diagnostic and screening services; maternity and midwifery services; treatment of disease; and family planning.

Detailed findings

Why we carried out this inspection

We undertook a focussed inspection of Twickenham Park Surgery on 9 March 2017. This is because the service had been identified as not meeting one of the legal requirements associated with the Health and Social Care Act 2008. From April 2015 the regulatory requirements the provider needs to meet are called Fundamental Standards and are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Specifically, a breach of regulation 12 (Safe care and treatment) was identified.

During the comprehensive inspection carried out on 20 September 2016 we found that the practice had failed to ensure that the necessary documentation was in place for the administering of medicines.

This inspection was carried-out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 20 September 2016 had been made. We inspected the practice against one of the five questions we ask about services: is the service safe.

How we carried out this inspection

We carried out a desk-based focused inspection of Twickenham Park Surgery on 9 March 2017. This involved reviewing evidence that:

- The practice had appropriate legal paperwork in place to allow staff to administer medicines, and that all staff were aware of their remit and responsibilities in relation to this.
- The practice was advertising the availability of translation services and chaperones to patients in the waiting area.
- Staff carrying-out chaperoning had received appropriate training for this role.
- The practice had considered the location of their emergency medicines and mitigated any risks associated with this.
- The practice had effective processes in place to ensure that relevant staff received safety and medicines updates.
- The practice kept full records in relation to complaints.
- The practice conducted a full investigation into significant events, and that the learning from incidents was shared and embedded.

Are services safe?

Our findings

At our previous inspection on 20 September 2016 we rated the practice as requires improvement for providing safe services as they had failed to ensure that the necessary documentation was in place for the administering of medicines.

These arrangements had significantly improved when we undertook a follow up inspection on 9 March 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

During the initial inspection in September 2016, we found that the arrangements in place to allow the assistant practitioner in primary care (APPC) to administer medicines were insufficient. There was uncertainty amongst staff

about the process for authorising the APPC to administer medicines, and their obligations in relation to it. The example patient specific prescription or direction (PSD) that we viewed on the day of the inspection was insufficient, as it did not include details of the medicine to be administered, the dose, or the route of administration. (PSDs are written instructions from a qualified and registered prescriber for a medicine including the dose, route and frequency or appliance to be supplied or administered to a named patient after the prescriber has assessed the patient on an individual basis).

As part of the follow-up inspection, the practice provided a copy of their revised protocol for the use of PSDs, and showed evidence that this had been shared with all staff. They also provided examples of completed PSDs that had recently been used by the APPC. These examples included all required details.