

Lower Gornal 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



Are services caring?

Good



Summary of findings

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	5
Background to Lower Gornal Medical Practice	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection visit of Lower Gornal Medical Practice, in March 2016. As a result of our comprehensive inspection a breach of legal requirements were found and the practice was rated as requires improvements for providing safe services. This was because we identified areas where the provider must make improvement and an area where the provider should improve.

We carried out a focussed desk based inspection of Lower Gornal Medical Practice on 21 December 2016 to check that the provider had made improvements. This report only 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 Lower Gornal Medical Practice on our website at www.cqc.org.uk. Our key findings across all the areas we inspected were as follows:

- As part of our desk based inspection we noted improvements in the arrangements to deal with medical emergencies.
- For example, since our comprehensive inspection took place in March, the practice effectively mitigated risk in the absence of specific emergency medicines and medical emergency equipment. We saw evidence to

confirm that the practice had a defibrillator in place and had purchased specific emergency medicine associated with minor surgery and the procedure of fitting specific birth control devices.

- When we inspected the practice in March we found that fridge temperatures were not appropriately recorded in line with guidance by Public Health England. As part of our desk based inspection the practice shared records to demonstrate that fridge temperatures were appropriately recorded.
- When we inspected the practice in March, some patients we spoke with commented that occasionally conversations could be heard at the reception desk, this was due to the open plan reception and waiting area.
- As part of our desk based inspection we saw copies of notices displayed to confirm that patients were advised that they could use a private area for private discussions and to speak to a member of staff if this was required. The practice manager also confirmed that reception staff were aware to offer a private area to patients who wanted to discuss sensitive issues or appeared distressed.

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.

Good



- When we inspected the practice in March we found that fridge temperatures were not appropriately recorded in line with guidance by Public Health England. As part of our desk based inspection the practice shared records to demonstrate that fridge temperatures were appropriately recorded. Records supported that the practice had improved their monitoring and record keeping for the cold chain.
- During our previous inspection in March we noted gaps in assessing and effectively mitigating risks associated with specific emergency medicines and emergency medical equipment. For instance, although previously the practice had formally assessed the risk in the absence of a defibrillator, records did not demonstrate how risk would be managed until May; when the practice would receive donation for a defibrillator.
- We also found that the practice had not assessed the risk in the absence of specific emergency medicine associated with minor surgery and the procedure of fitting specific birth control devices.
- We noted improvements in the arrangements to deal with medical emergencies as part of our desk based inspection. The practice manager confirmed that a defibrillator was put in place following our comprehensive inspection and the practice shared records as evidence to support this.
- Furthermore, records were shared with the inspection team to demonstrate that the day the after our inspection took place, the practice immediately placed an order for specific emergency medicine associated with minor surgery and the procedure of fitting specific birth control devices.

Are services caring?

The practice is rated as good for providing caring services.

Good



- When we inspected the practice in March, some patients we spoke with commented that occasionally conversations could be heard at the reception desk, this was due to the open plan reception and waiting area.

Summary of findings

- As part of our desk based inspection the practice shared a copy of the notices displayed to confirm that patients were advised that they could use a private area for private discussions and to speak to a member of staff if this was required.
- The practice manager also confirmed that reception staff were aware to offer a private area to patients who wanted to discuss sensitive issues or appeared distressed.

Lower Gornal Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

This desk top review inspection was carried out by a CQC Lead Inspector.

Background to Lower Gornal Medical Practice

Lower Gornal Medical Practice is a long established practice located in the Lower Gornal area of Dudley. There are approximately 8845 patients of various ages registered and cared for at the practice. Services to patients are provided under a General Medical Services (GMS) contract with NHS England. The practice has expanded its contracted obligations to provide enhanced services to patients. An enhanced service is above the contractual requirement of the practice and is commissioned to improve the range of services available to patients.

The clinical team includes five GP partners, a salaried GP, a nurse practitioner, three practice nurses and three health care assistants. The GP partners and the practice manager form the practice management team and they are supported by a team of 12 staff members who cover reception, IT, secretarial and administration roles.

The practice is open for appointments between 8am and 6:30pm during weekdays, the practice offers extended hours on Mondays and Wednesdays between 6:30pm and 7:30pm. There are also arrangements to ensure patients receive medical assistance during the out-of-hours period.

Why we carried out this inspection

We carried out a focussed desk based 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 had made improvements identified during the comprehensive inspection carried out in March 2016.

How we carried out this inspection

We undertook a focussed desk based inspection on 21 December 2016. This involved the review of relevant documentation we had asked the practice to submit to ensure improvements were made.

Are services safe?

Our findings

Overview of safety systems and processes

When we inspected the practice in March we saw that vaccination fridges were well ventilated and secure, however during the inspection we found that fridge temperatures were not appropriately recorded in line with guidance by Public Health England. Specifically, staff were not recording the minimum and maximum fridge temperatures.

As part of our desk based inspection the practice shared records to demonstrate that fridge temperatures were appropriately recorded. For instance, we requested a sample of records at random to demonstrate how fridge temperatures were monitored following our inspection in March. Records indicated that the cold chain was appropriately monitored immediately after our inspection and we saw records for the months of March, April, May and June to support this. This demonstrated that the practice had improved their monitoring and record keeping for the cold chain over a long period of time.

Arrangements to deal with emergencies and major incidents

During our comprehensive inspection in March we found that the practice had formally assessed the risk in the absence of a defibrillator and as a result, identified the need to purchase a defibrillator. The risk assessment highlighted that a defibrillator would be in place in May 2016, however the risk assessment did not demonstrate that risk was mitigated in the meantime.

When we inspected the practice in March we found that emergency medicines and emergency equipment were

easily accessible to staff in a secure area of the practice and records were kept to demonstrate that they were regularly checked and monitored. However, we found that the practice had not assessed the risk in the absence of specific emergency medicine associated with minor surgery and the procedure of fitting specific birth control devices.

We noted improvements in the arrangements to deal with medical emergencies as part of our desk based inspection, for example:

- We spoke with the practice manager as part of our desk based inspection, the practice manager confirmed that a defibrillator was put in place following our comprehensive inspection and the practice shared records as evidence to support this.
- Shortly after our comprehensive inspection took place, the practice submitted an action plan which outlined the improvements they would take to comply with the regulation for safe care and treatment. Furthermore, records were shared with the inspection team to demonstrate that the day after our inspection took place, the practice immediately placed an order for specific emergency medicine associated with minor surgery and the procedure of fitting specific birth control devices. We also saw evidence to confirm that the specific emergency medicine was in place at the practice, as part of our desk based inspection.
- The practice has also assessed risk whilst waiting for the emergency medicine to be delivered to the practice and to mitigate risk, the practice did not perform any minor surgery or fit specific birth control devices whilst stock of the emergency medicine was not in place; this was for one day only.

Are services caring?

Our findings

Respect, dignity, compassion and empathy

When we inspected the practice in March, the four patients we spoke with told us they were satisfied with the care provided by the practice; patients said their dignity and privacy was

respected and staff were described as friendly, helpful and caring. However, some patients commented that occasionally conversations could be heard at the reception desk, this was due to the open plan reception and waiting area.

We discussed this with members of the management team during our inspection and we were assured that notices would be displayed to inform patients that a private area is available for private discussions and that staff were available to offer support where requested.

As part of our desk based inspection the practice shared a copy of the notices displayed to confirm that patients were advised that they could use a private area for private discussions and to speak to a member of staff if this was required. The practice manager also confirmed that reception staff were aware to offer a private area to patients who wanted to discuss sensitive issues or appeared distressed.