

Forty Willows Surgery

Quality Report

46 Forty Lane

Wembley

London

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Website: www.fortywillowssurgery.nhs.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

Are services safe?

Summary of findings

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Letter from the Chief Inspector of General Practice

We carried out an announced focused inspection of Forty Willows Surgery on 14 February 2018. This was to follow-up on a warning notice the Care Quality Commission served following an announced comprehensive inspection on 28 September 2017 when the provider was rated as inadequate for providing safe services.

The warning notice, issued on 3 November 2017, was served in relation to regulation 12: Safe care and treatment, of the Health and Social Care Act 2008. The timescale given to meet the requirements of the warning notice was 5 February 2018.

The inspection on 28 September 2017 highlighted several areas where the provider had not met the standards of regulation 12: Safe care and treatment. We found:

- The practice was unable to demonstrate their monitoring of medicines reviews for patients with long term conditions was always effective.
- The practice was unable to demonstrate that they always followed national guidance on management and security of blank prescription forms.
- The practice was unable to demonstrate that they had adequate health and safety related risk assessments and processes were in place to ensure safety of the premises and patients.

The comprehensive report from the September 2017 inspection can be found by selecting the 'all reports' link for Forty Willows Surgery on our website at www.cqc.org.uk and should be read in conjunction with this report.

At the inspection on 14 February 2018, we found that actions had been taken to improve the provision of safe services in relation to the warning notice. Due to the focussed nature of this inspection the ratings have not been reviewed. We will conduct a further comprehensive inspection within six months of publication of the report of the inspection undertaken in September 2017.

Our key findings were as follows:

- The provider had demonstrated significant improvements in all areas highlighted in the warning notice.
- The practice had reviewed and improved the systems in place to effectively monitor medicine reviews for patients with long term conditions.
- The practice had carried out health and safety related risk assessments and checks, and remedial actions had been undertaken to ensure safety of the premises and patients.
- Staff had undertaken fire safety and health and safety training.
- Blank prescription forms were securely stored and there were systems in place to monitor their use. However, we noted that the serial numbers of blank prescription forms were not correctly recorded.

Summary of findings

- We noted that the ratings poster of previous Care Quality Commission inspection was not displayed in the premises. However, the practice had displayed the ratings poster on the day of inspection.
- We noted that the previous Care Quality Commission inspection report had not been shared on the practice's website. However, the practice had provided the evidence that the inspection report had been discussed with the patient participation group (PPG) and it was shared on the practice's website on the day of inspection.

The areas where the provider **should** make improvements are:

- Review the system in place for the recording of blank prescription forms.
- Carry out control of substances hazardous to health (COSHH) risk assessments for the cleaning products stock in the premises.
- Ensure the most recent CQC rating is clearly displayed.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Forty Willows Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

This warning notice follow-up focussed inspection was undertaken by a CQC inspector.

Background to Forty Willows Surgery

Forty Willows Surgery is situated in Wembley in North West London within converted premises with car parking for patients and staff. All patient services are offered on the ground and first floors. The premises comprises of seven consulting rooms, two treatment rooms, a patient waiting area, a reception area, administrative and management office.

There are three GP partners, a salaried GP, two trainee GPs at the practice. Four GPs are female and two male, who work a total of 25 sessions. The practice employs a practice nurse and a healthcare assistant. The practice manager is supported by a team of administrative and reception staff. Services are provided via a General Medical Services (GMS) contract (GMS contracts are negotiated nationally between GP representatives and the NHS).

This is a training practice, where a doctor who is training to be qualified as a GP has access to a senior GP throughout the day for support.

Services are provided from the following location which we visited during this inspection:

46 Forty Lane

Wembley

London

HA9 9HA

Why we carried out this inspection

We undertook a comprehensive inspection of Forty Willows Surgery on 28 September 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Overall, the practice was rated as requires improvement. Specifically, the provider was rated as inadequate for providing safe services and the warning notice was served in relation to regulation 12: Safe care and treatment, of the Health and Social Care Act 2008. The timescale given to meet the requirements of the warning notice was 5 February 2018.

We carried out an announced follow up focused inspection of Forty Willows Surgery on 14 February 2018. This inspection was carried out to review in detail the actions taken by the provider in relation to the warning notice issued by the Care Quality Commission on 3 November 2017 and to confirm that the provider was now meeting legal requirements.

Are services safe?

Our findings

When we inspected the practice in September 2017, we rated provision of safe services as inadequate. We issued a warning notice for safe care and treatment as the arrangements in respect of being a safe service were in breach of regulation. Specifically, we found:

- The practice was unable to demonstrate their monitoring of medicines reviews for patients with long term conditions was always effective.
- The practice was unable to demonstrate that they always followed national guidance on management and security of blank prescription forms.
- The practice was unable to demonstrate that they had adequate health and safety related risk assessments and processes were in place to ensure the safety of the premises and patients.

At this inspection in February 2018, we found significant improvements had been made.

Risks to patients

The practice had addressed concerns raised during the previous inspection and explained the improvements they had made in the system for reviewing patient medicines.

The practice informed us that medicine reviews data was not reliable because they had identified a coding issue, and staff were not ticking the correct box when completing the medicine reviews. The practice had revised their guidelines and reminded all staff to follow protocol correctly.

The practice had reviewed patients' records and invited patients for medicine reviews. The practice had recruited a new clinical pharmacist to carry out medicine reviews for patients with long term conditions.

- Recent data demonstrated the considerable improvements and medicines reviews for patients with long term conditions (including diabetes, asthma, chronic obstructive pulmonary disease, dementia and chronic heart disease) had increased from 55% to 75% compared to the previous inspection in September 2017.
- Medicine reviews for patients with chronic heart disease were 82%. This was a 73% increase from the previous inspection.
- Medicine reviews for patients with diabetes were 74%. This was a 54% increase from the previous inspection.

- Medicine reviews for patients with dementia were 77%. This was a 10% increase from the previous inspection.
- We saw repeat medicines reviews had increased from 19% to 68% of patients on less than four repeat medicines.
- We saw repeat medicines reviews had increased from 54% to 77% of patients on four or more repeat medicines.

Safe and appropriate use of medicines

- The practice had reviewed the prescription security protocol in December 2017.
- We noted that the practice had installed new locks on all printers to ensure prescription security.
- Blank prescription forms for use in printers and handwritten pads were handled in accordance with national guidance as these were securely stored and there were systems in place to monitor their use. However, the serial numbers of blank prescription forms were not correctly recorded.

Track record on safety

The practice had taken a number of steps to improve the safety of the premises and patients.

- There were procedures in place for monitoring and managing risks to patient and staff safety. There was a health and safety policy available with a poster in the premises.
- A fire safety risk assessment had been carried out by an external contractor on 8 November 2017. The practice had addressed all 35 actions identified during the recent fire risk assessment.
- The practice had carried out last fire drill on 22 November 2017. The practice had carried out last smoke alarm checks on 8 February 2018 and electronic fire system was serviced on 6 December 2017.
- Staff had undertaken fire safety and health and safety training.
- The practice had effective processes in place for the management of legionella (a bacterium which can contaminate water systems in buildings). Legionella risk assessment was carried out by an external contractor on 26 September 2017. We noted the practice had addressed four out of five actions identified during the recent risk assessment. We saw the practice was in contact with the contractor to address the final issue.

Are services safe?

- We saw the contractor was responsible to carry out monthly water temperature checks at the premises. We saw recent water temperature checks were carried out on 24 January 2018 and the outcome of water temperature checks was unsatisfactory. However, the practice had provided the evidence to demonstrate that remedial actions had been undertaken to address the issue.
- The fixed electrical installation checks of the premises had been carried out on 26 November 2017, which had identified a number of concerns. Remedial actions had been undertaken and this was awaiting formal certification.
- An asbestos survey was completed on 26 November 2017, which had identified a very low risk. We saw the evidence that a quotation was collected to carry out the remedial work and this issue was planned to be discussed in the practice meeting in March 2018.
- The practice had carried out a number of comprehensive control of substances hazardous to health (COSHH) risk assessments for each clinical area of the premises. However, on the day of inspection COSHH risk assessments were not available for the cleaning products. We saw the evidence that the practice had communicated with the external cleaner responsible for cleaning the premises to provide relevant COSHH risk assessments.