

# Practice 2, Medical Centre, Bridlington

## Quality Report

The Medical Centre  
Station Avenue  
Bridlington  
YO16 4LZ

Tel: 01262 670690

Website: [www.practicetwobridlington.nhs.uk](http://www.practicetwobridlington.nhs.uk)

Date of inspection visit: 29 September 2017

Date of publication: 18/10/2017

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

## Contents

### Summary of this inspection

Overall summary	Page 2
The five questions we ask and what we found	3
Areas for improvement	4

### Detailed findings from this inspection

Our inspection team	5
Background to Practice 2, Medical Centre, Bridlington	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Practice 2, Medical Centre, Bridlington on 5 November 2015. The overall rating for the practice was good. The full comprehensive report on the November 2015 inspection can be found by selecting the 'all reports' link for Practice 2, Medical Centre, Bridlington on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on 29 September 2017 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 5 November 2015. This report covers our findings in relation to those requirements.

Overall the practice is rated as good.

Our key findings were as follows:

Arrangements were in place to assess and manage the risks of and minimise the spread of health care associated infections.

Appropriate recruitment checks had been undertaken prior to staff being employed.

Arrangements were in place to monitor the use of blank prescriptions.

However there were areas of practice where the provider should make improvements:

- Follow recruitment procedures to ensure only fit and proper persons are employed.

**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 good for providing safe services.

There had been concerns at the previous inspection that whilst the practice had clearly defined processes and practices in place for infection control and recruitment they were not always being followed. We found there was no appropriate flooring in the treatment room; foot operated clinical waste bins were not available in all clinical areas and an annual infection control audit had not been completed. Also appropriate recruitment checks had not always been carried out.

We checked and found that improvements had been made. The practice was following their systems and processes to ensure that infection control was being managed and the necessary employment recruitment checks were being undertaken. The practice had included a check list in the staff personnel files which covered all the information required for recruitment. Documentation had been provided to show the improvements had been carried out. However the practice did not always document verbal references.

The practice had procedures in place to monitor the use of blank prescriptions.

**Good**



# Summary of findings

## Areas for improvement

### Action the service **SHOULD** take to improve

- Follow recruitment procedures to ensure only fit and proper persons are employed.

# Practice 2, Medical Centre, Bridlington

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

an inspector carried out this desk based focussed inspection.

## Background to Practice 2, Medical Centre, Bridlington

Practice 2, Medical Centre, Bridlington is located in a Medical Centre on Station Avenue in Bridlington and shares the building with two other GP practices. It is close to the town centre, the train station and local bus routes. Parking is available on the street outside the practice and there is disabled access. It provides services under a General Medical Services (GMS) contract with the NHS North Yorkshire and Humber Area Team to the practice population of 7172, covering patients of all ages.

The proportion of the practice population in the 65 years and over age group is above the England average. The practice population in the under 18 age group is below the England average. The practice scored three on the deprivation measurement scale, the deprivation scale goes from one to ten, with one being the most deprived. The overall practice deprivation score is higher than the England average, the practice is 30 and the England average is 23. People living in more deprived areas tend to have a greater need for health services.

The practice has three GP partners, two male and one female. There is a practice manager, one advanced nurse practitioner, two practice nurses, two health care assistants and one pharmacist. The practice has a team of secretarial, administration and reception staff.

The practice provides placements for student nurses and work experience school pupils. They also support the Bridlington teaching hub for medical students from the Hull York Medical School.

The practice is open between 8.30am to 6.00pm Monday to Friday. Appointments are available from 8.30am to 10.30am and 3.00pm to 5.30pm daily. Telephone lines are open from 8am to 6pm daily and any urgent requests are dealt with. The Practice, along with all other practices in the East Riding of Yorkshire CCG area have a contractual agreement for the Out of Hours provider to provide OOHs services from 6.00pm. This has been agreed with the NHS England area team.

The practice has opted out of providing out of hours services (OOHs) for their patients. When the practice is closed patients use the 111 service to contact the OOHs provider. Information for patients requiring urgent medical attention out of hours is available in the waiting area, in the practice information leaflet and on the practice website.

## Why we carried out this inspection

We undertook a comprehensive inspection of Practice 2, Medical Centre, Bridlington on 5 November 2015 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good.

# Detailed findings

The full comprehensive report following the inspection on 5 November 2015 can be found by selecting the 'all reports' link for Practice 2, Medical Centre, Bridlington on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a follow up desk-based focused inspection of Practice 2, Medical Centre, Bridlington on 29 September 2017. This inspection was carried out 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 desk-based focused inspection of Practice 2, Medical Centre, Bridlington on 29 September 2017. This involved reviewing evidence that:

- The practice was following systems and processes to manage infection control.
- The practice was following their own systems and processes to ensure that all the necessary employment recruitment checks were undertaken.
- Procedures were in place to monitor the use of blank prescriptions.

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 5 November 2015, we rated the practice as requires improvement for providing safe services as the arrangements in respect of infection control and recruitment of staff were not adequate.

These arrangements had improved when we undertook a follow up inspection on 29 September 2017. The practice is now rated as good for providing safe services.

### Overview of safety systems and process

At the inspection in November 2015 we found there was no appropriate flooring in the treatment room; foot operated clinical waste bins were not available in all clinical areas and an annual infection control audit had not been completed.

The flooring in the treatment had been replaced and was now washable; clinical waste bins were all foot operated and infection control audits had been carried out.

The arrangements for recruitment of staff had improved. The practice now had a check list in the personnel files which covered all the information required for recruitment. The check list included proof of eligibility for UK employment, photographic proof of identity, current DBS check, references obtained and satisfactory documentation of relevant qualifications. We saw that checklists were now completed to confirm that recruitment checks had been carried out. However the practice did not always document verbal references.

Procedures for monitoring the use of blank prescription pads were now being followed and arrangements for keeping blank prescription pads secure had improved.