

# Dr's Hollier, Williams, Wong and La Porta

## 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

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 at Dr's Hollier, Williams, Wong and La Porta on 4 October 2016. The practice was rated good overall and requires improvement for safe. The full comprehensive report on the Month Year inspection can be found by selecting the 'all reports' link for Dr's Hollier, Williams, Wong and La Porta on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced desk-based review carried out on 9 June 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 4 October 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

At our previous inspection undertaken on 4 October 2016, we rated the practice as requires improvement for providing safe services as:

- There were not effective processes in place to monitor the expiry date of emergency medical equipment.
- There were not adequate processes in place to identify and mitigate against risks associated with fire and infection control.

- The practice did not have valid Patient Group Directions in place to enable the practice nursing staff to administer medicines.

In addition to the breaches in regulation we suggested that the practice should take action to:

- Ensure that all complaint responses adhere to current legislation and guidance.
- Review vaccine storage procedures.
- Put systems in place to store patient safety alerts and document the actions taken in response to safety alerts.
- Continue with strategies to encourage uptake of health reviews to reduce the practice's exception reporting rate in areas where this is significantly higher than local and national averages.
- Take steps to improve the management of confidentiality in the practice reception area.
- Continue to work on improving patient satisfaction with telephone access and access to routine appointments.

The practice is now rated as good for the key question: Are services safe?

Our key findings were as follows:

# Summary of findings

- The practice had implemented a system to check the expiry of emergency medical equipment and checks were being undertaken on a regular basis.
- The practice had taken the necessary steps to ensure that risks associated with infection control had been addressed, there were system in place to record and monitor the immunity status of clinical staff to common communicable diseases and there was a contract in place to reupholster the chairs in the reception area.
- Systems were in place to check Patient Group Directions (PGDs) to ensure that they were valid.

We also saw evidence the practice had:

- The practice now included the contact information for external organisations where complaints could be escalated to in accordance with current legislation and guidance.
- The practice had a new system in place to centrally store all patient safety alerts on one of their IT systems. We saw screen prints from this system which showed the date of action taken in response to a recent alert regarding faulty defibrillators.

- The practice were in discussions with an organisation to upgrade the telephone systems and were actively promoting online access The practice told us that from 1st January to 31st March 2017, practice registrations for online access increased from 5.2% to 19.4%.

The practice should:

- Consider the risks to non-clinical staff from common communicable diseases and take action to mitigate any risks identified.
- Continue with strategies to encourage uptake of health reviews to reduce the practice's exception reporting rate in areas where this is significantly higher than local and national averages.
- Continue to work on improving patient satisfaction with telephone access and access to routine appointments.
- Review vaccine storage procedures.
- Take steps to improve the management of confidentiality in the practice reception area.

**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 key question: Are services safe?

- The practice had implemented a system to check the expiry of emergency medical equipment and checks were being undertaken on a regular basis.
- The practice had taken the necessary steps to ensure that risks associated with infection control had been addressed, there were systems in place to record and monitor the immunity status of clinical staff to common communicable diseases and there was a contract in place to reupholster the chairs in the reception area.
- Systems were in place to check Patient Group Directions (PGDs) to ensure that they were valid.

**Good**



# Dr's Hollier, Williams, Wong and La Porta

## Detailed findings

### Background to Dr's Hollier, Williams, Wong and La Porta

Drs' Hollier, Williams, Wong and La Porta (Tamworth House Medical Centre) is part of Merton CCG and serves approximately 9400 patients. The practice is registered with the CQC for the following regulated activities: Diagnostic And Screening Procedures, Surgical Procedures, Maternity And Midwifery Services, Treatment Of Disease, Disorder or Injury and Family Planning.

The practice is rated within the fifth most deprived areas in the country on the Index of Multiple Deprivation.

The practice is run by five GP partners of mixed gender, two advanced nurse practitioners and two nurses all of whom are female. The practice is a teaching and training practice hosting registrars and F2 doctors, medical students and nurses in training. The practice offers 34 GP sessions per week and the two nurse practitioners work 1.6 whole time equivalent.

The practice is open between 8 am to 6.30 pm Monday to Friday with extended hours access appointments available between 7 am and 8.40 am on Tuesdays and 6.30 pm and 7.50 pm on Wednesdays. Booked and emergency appointments are available five days per week.

The Drs' Hollier, Williams, Wong and La Porta (Tamworth House Medical Centre) operates from rented purpose built premises based over two floors. The practice is accessible through manual double doors and a manual door at the car park. Those who would have difficulty accessing the

surgery through these doors could call staff using a call bell. Patients with mobility problems could be accommodated in one of the consulting rooms on the ground floor.

Practice patients are directed to contact 111 when the surgery is closed. The practice operates under a Personal Medical Services (PMS) 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). These are: extended

Hours access, facilitating timely diagnosis and support for people with dementia, influenza and pneumococcal immunisations, learning disabilities, risk profiling and case management, rotavirus and shingles immunisation and unplanned admissions.

The practice is part of GP federation Merton Health Services.

### Why we carried out this inspection

We undertook a comprehensive inspection of Dr's Hollier, Williams, Wong and La Porta on 4 October 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Dr's Hollier, Williams, Wong and La Porta.

We undertook a follow up desk-based focused inspection of Dr's Hollier, Williams, Wong and La Porta on 9 June 2017.

# Detailed findings

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 Dr's Hollier, Williams, Wong and La Porta on 9 June 2017. This involved reviewing evidence that:

- The practice had systems in place for checking the expiry of emergency medical equipment and monitoring PGDs.
- That infection control associated with infection control and fire safety had been mitigated.

# Are services safe?

## Our findings

At our previous inspection on 4 October 2016, we rated the practice as requires improvement for providing safe services as there were not effective processes in place to monitor the expiry date of emergency medical equipment, there were not adequate processes in place to identify and mitigate against risks associated with fire and infection control and the practice did not have valid Patient Group Directions (PGD) in place to enable the practice nurse to administer medicines.

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

### Overview of safety systems and processes

At the last inspection we found that a number of the nurse's Patient Group Directions (PGDs) were not valid as the practice name had not been included. The practice had completed this at the end of the inspection. (PGDs are written instructions for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for treatment). The practice added the name of the practice to the three PGDs which did not have this information included on the day of the inspection and put processes in place to ensure that in the future new PGDs were reviewed by the Advanced Nurse Practitioner before being sent to a GP for signing.

### Monitoring risks to patients

- At our last inspection we found that there was no record of immunisation status for staff in respect of common communicable diseases and the chairs in reception were made of fabric, some of which were damaged which presented a potential infection control risk. The practice told us that they were planning to have the chairs in the reception area reupholstered but that the contractor was currently on leave. However a quote for this work was provided after the inspection. The practice also supplied evidence that they had systems in place to record the immunity status of clinical staff members to common communicable diseases. There was no record of the immunisation status of non-clinical staff.
- The practice provided evidence at the last inspection that a fire drill had been completed though this was undertaken when patients were not in the building. We also found that there were no fire safety notices in the practice waiting area to advise patients what to do in the event of a fire. The practice provided photographic evidence which showed that the fire procedure had been placed in the reception area where it would be clearly visible to patients.

### Arrangements to deal with emergencies and major incidents

- At the last inspection we found that two pieces of plastic tubing stored with the practice's oxygen supply had expired which indicated that the process for checking emergency equipment was not entirely effective. The practice provided a spreadsheet which showed that all emergency equipment was checked several times each week.