

Mount Chambers Medical Practice

Quality Report

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Date of inspection visit: 17 October 2017 Date of publication: 10/11/2017

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 well-led?	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 Mount Chambers Medical Practice on 11 January 2017. The practice was rated as good overall and requires improvement for well-led. The full comprehensive report on the January 2017 inspection can be found by selecting the 'all reports' link for Mount Chambers Medical Practice on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 17 October 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 11 January 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as Good.

Our key findings were as follows:

- Prescription stationery was stored in clinical rooms in locked printers.
- The practice had reviewed the outcome of the GP survey, published in July 2017, and used this feedback to improve the service offered to patients.
- Specimens were stored safely prior to submission for testing.
- The practice had file containing information relating to medicine and patient safety alerts and staff were aware of where this was kept.

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 well-led?

The practice had reviewed the systems related to the areas of concern and strengthened these.

- Prescription paper was now securely stored.
- Specimens were stored in a secure place prior to submission for testing.
- The practice had a system to review the outcome of the GP survey data, compiled an action plan and reviewed actions taken for effectiveness.
- Staff were aware of where to find the file containing information relating to medicine and patient safety alerts.

Good





Mount Chambers Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector.

Background to Mount Chambers Medical Practice

The practice is based in the town of Braintree near to the local supermarket. There is very limited parking for the practice so patients are recommended to use the supermarket car park. The nearest train station is Braintree which is a mainline station.

The practice premises are small and they have expanded these slightly by the use of linked porta-cabins whilst they await new premises. At the time of our inspection the practice is open to new patients.

This practice is a teaching and training practice and has medical students, GP registrars in their final stage of training, physician associate trainees and student nurses. GP registrars are fully qualified doctors and have had at least two years of NHS experience. Medical students may sit in on consultations and examinations with the patient's consent. It is also a dispensing practice, which means that patients who do not have a dispensing chemist within a 1.6km radius of their house can get their prescribed medicines dispensed from here.

The list size of the practice is approximately 13710. The practice has a large staff group, this includes seven GP partners, four male and three female, and one salaried GP.

There are two female advanced nurse practitioners (who are able to provide many services a GP can), three female practice nurses and four female health care assistants (HCAs). There is a number of other staff carrying out administrative duties, led by a practice manager. In addition, the practice also has five dispensers, a dispensary manager, three phlebotomists and a seconded pharmacist.

The practice is open between 8am and 6.30pm on Mondays to Fridays. Appointments times vary dependant on the clinical staff seen. Times range from 8.30am to 12.30pm and 3pm to 6pm Monday to Friday for GPs and 8am to 12.30pm and 2.30pm to 6pm for nursing staff.

When the practice is closed patients are advised to call the practice number where they will be redirected to the out of hours service, if they require medical assistance and are unable to wait until the surgery reopens. The out of hour's service offers either a telephone consultation with an on-call doctor or an appointment at the Emergency Centre. In the case of an emergency, such as chest pains, patients are advised by the practice to dial 999.

The practice has higher than the CCG and national average numbers of 65 to 85+ year olds. There is a higher than average percentage of patients with a long-term health condition. The practice population also has higher than average levels of income deprivation affecting both children and older people.

Why we carried out this inspection

We undertook a comprehensive inspection of Mount Chambers Medical Practice on 11 January 2017 under

Detailed findings

Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and requires improvement for well-led. The full comprehensive report following the inspection on January 2017 can be found by selecting the 'all reports' link for Mount Chambers Medical Practice on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Mount Chambers Medical Practice on 17 October 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

Prior to our visit we:

 Reviewed an ongoing improvement plan implemented following the GP Survey published in July 2017.

During our visit we:

- Viewed all printers containing prescription stationary.
- Observed the area used to store specimens prior submission for testing.

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 well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At our previous inspection on 11 January 2017, we rated the practice as requires improvement for providing well-led services as some of the systems required strengthening.

We issued two requirement notices in respect of these issues and found arrangements had improved when we undertook a follow up inspection of the service on 17 October 2017. The practice is now rated as good for being well-led.

Governance arrangements

The practice had reviewed their systems related to prescription paper security and installed locks on all printers.

The practice had reviewed the system for specimen collection and storage. This now took place in a secure area of the practice.

Staff were aware of the location of the folder containing medicine and patient safety alerts. The folder listed actions taken by the practice to address these.

Seeking and acting on feedback from patients, the public and staff

The practice had analysed the results of the data from the GP Survey published, in July 2016 and 2017. They looked for links between the areas where improvement was required and developed an action plan which included increasing the amount of reception staff in the mornings, increasing the number of phone lines and the number of appointments.

The practice had designed their own survey to check if these changes had resolved the areas identified by patients as requiring improvement. The implementation of the survey was postponed as they had identified technical difficulties with the telephone waiting system and wanted to resolve this prior to seeking feedback.