

The Jersey Practice Limited

Quality Report

The Jersey Practice Limited,
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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 unannounced inspection at The Jersey Practice on 10 March 2017 in response to concerns received by the Care Quality Commission (CQC) that the practice was not providing safe care and treatment to its patients. The concerns specifically related to the health care assistant administering medication by injection without a patient specific prescription or direction from a prescriber and without appropriate training (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).

At the inspection on 10 March 2017 the concerns received by the CQC were substantiated and as a result a decision was made to take enforcement action against the provider where a warning notice was issued for regulation 12; Safe Care and Treatment.

We revisited the practice on 30 March 2017 and found the provider had taken the necessary action to comply with the warning notice and was now providing safe care and treatment to its patients.

Professor Steve Field CBE FRCP FFPH FRCGP
Chief Inspector of General Practice

The Jersey Practice Limited

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.
The team included a medicines inspector.

Background to The Jersey Practice Limited

The Jersey Practice Limited has two sites; the main practice is located in Heston in the London Borough of Hounslow, and a branch surgery, St Bernards Practice, is located in the London Borough of Ealing. The practice provides care to approximately 8100 patients.

The practice is registered as a partnership with the Care Quality Commission to provide the regulated activities of; treatment of disease, disorder or injury, diagnostic and screening procedures, family planning services, surgical procedures and maternity and midwifery services.

The practice has a General Medical Services (GMS) contract and provides a full range of essential, additional and enhanced services including maternity services, child and adult immunisations, family planning, sexual health services and surgical procedures.

The practice has three GP partners and three long term locum GPs working a total of 20 sessions amongst them. There is a good mix of female and male staff. The practice

has a part time practice manager and an assistant practice manager. The rest of the practice team consists of two regular locum nurses, one health care assistant and a small team of administrative staff.

The practice operates on a rotational basis and staff work across both sites. The Heston location is currently open five days a week from 8.30am to 6.30pm on Mondays, Tuesdays and Fridays, from 8:30am to 1:30pm on Wednesday and 8am to 8pm on Thursdays. The branch surgery opens 9am to 6.30pm on Monday, Wednesday and Friday and 9am to 1.30pm Tuesday and Thursday. When the practices are closed, the telephone answering service directs patients to contact the out of hours provider.

Why we carried out this inspection

We inspected this service in response to concerns received by the Care Quality Commission that the practice was not always providing safe care and treatment to its patients.

How we carried out this inspection

Before visiting, we reviewed information of concern received by the Care Quality Commission. We carried out an unannounced visit on 10 March 2017. During our visit we gathered evidence by looking at documentation of staff training, reviewing the medical records of patients, and speaking with staff who were involved in providing the regulated activities.

Are services safe?

Our findings

The practice was not providing safe services. At our inspection on 10 March 2017 we gathered evidence that showed that between April and December 2016 the healthcare assistant and locum nurses had regularly administered depot injections without a patient specific prescription or direction from a prescriber (PSD). A GP partner confirmed that PSDs were not in place and that only verbal communication was given to the nurses and healthcare assistant to administer depot injections.

At our inspection the provider could not demonstrate that the healthcare assistant had received any training on administering depot injections. A GP partner and the practice manager told us that the GPs showed the healthcare assistant how to administer depot injections prior to administering them, however there was no documentation of this training. They also said that competency assessments were carried out however there were no documented records to demonstrate this.

Two regular locum nurses were up to date with training on injections however, the practice manager could not assure

us that other locum nurses sourced from locum agencies had up to date or appropriate training to administer depot injections, as the manager told us that she did not request or keep records of training for locum nurses.

As a result of our findings a decision was made to take enforcement action against the provider where a warning notice was issued for regulation 12; Safe Care and Treatment. We then revisited the practice on 30 March 2017 and found the provider had taken the necessary action to comply with the warning notice and was now providing safe care and treatment to its patients.

Specifically we found the provider had revised their processes and procedures to ensure depot injections were only administered by the regular locum nurses who were up to date with training. A new procedure was in place to ensure locum nurses from agencies were checked for depot injection training before allowing them to administer depot injections and the healthcare assistant had ceased administering depot injections as part of their job role. We also found that PSDs were now in place for the nursing staff to administer depot injections. The provider had updated the medicines management protocol to incorporate the new changes.