

The Old School Medical Practice

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 a focused desktop inspection of Old School Medical Practice on 16 August 2016 to assess whether the practice had made the improvements in providing safe care and services.

We had previously carried out an announced comprehensive inspection of Old School Medical Practice on 19 January 2016, when we rated the practice as good overall. The practice was rated as requires improvement for providing safe care. This was because the staff had not been provided with appropriate policies and guidance to carry out their roles in a safe and effective manner.

Governance systems and processes were not implemented and so monitoring and assessing the whole service in relation to risk and improvements was not evidenced. The infection prevention and control (IPC) policy was in draft and had therefore not been implemented nor was there an up to date IPC audit for both premises. In addition there were areas where the provider should make further improvements. These included embedding good record keeping in all aspects of dispensing medicines. Comprehensive standard operating procedures (SOPs) which were regularly reviewed required implementation in line with national guidance for dispensing practices. All staff who chaperoned patients required an up to date Disclosure and Barring Service (DBS) check. The dispensary staff's competencies required formal assessment.

We asked the provider to send a report of the changes they had made to comply with the regulations; they were not meeting on the 19 January 2016. In addition we asked for an update of changes made within the dispensary and for verification of up to date DBS checks.

The practice was able to demonstrate that they were meeting the standards and had implemented all changes recommended within the dispensary. We were also provided with up to date DBS disclosures for the appropriate staff.

This report should be read in conjunction with the full inspection report dated 18 March 2016.

Our key findings across the area we inspected was as follows:

There are clearly defined and embedded systems, processes and practices to keep patients safe and safeguarded from abuse.

Staff had received up to date training in systems, processes and practices.

Risks to patients were assessed and well managed.

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 had clearly defined and embedded systems, processes and practices in place to keep patients safe and safeguarded from abuse.
- Risks to patients were assessed and well managed.

Good



The Old School Medical Practice

Detailed findings

Background to The Old School Medical Practice

The Old School Medical practice is a semi-rural dispensing practice and they provide General Medical Services to their practice population. They have two locations. All patients can be seen at any of the locations. We visited both locations on 19 January 2016. The practice population is 7,400. The practice population lives in a less deprived area than average for England.

This is a teaching practice for medical students who are studying at Hull & York Medical School (HYMS).

There are five GP Partners and one Practice Manager, plus one salaried GP and an Advanced Nurse Practitioner. There are two Practice Nurses and two Health Care Assistants (HCAs). They are supported by dispensary assistants, secretaries, administration and reception teams.

The Copmanthorpe surgery is open every week day between 8am and 6pm. They have extended opening hours every Monday evening until 8pm.

The Bishopthorpe surgery is open every week day between 8am and 12midday and from 3pm to 6pm. This surgery is closed every Tuesday from 12 midday.

The practice website and leaflet offer information for patients when the surgery is closed. They are directed to the Out of Hours Service provided by Northern Doctors Urgent Care.

We previously inspected The Old School Medical Practice on 19 January 2016. Following this inspection, the practice

was given a rating of good. The practice was rated as requires improvement for providing safe care. This was because the staff had not been provided with appropriate policies and guidance to carry out their roles in a safe and effective manner. Governance systems and processes were not implemented and so monitoring and assessing the whole service in relation to risk and improvements was not evidenced. The infection prevention and control (IPC) policy was in draft and had therefore not been implemented nor was there an up to date IPC audit for both premises. In addition there were areas where the provider should make further improvements. These included embedding good record keeping in all aspects of dispensing medicines. Comprehensive standard operating procedures (SOPs) which were regularly reviewed required implementation in line with national guidance for dispensing practices. All staff who chaperoned patients required an up to date Disclosure and Barring Service (DBS) check. The dispensary staff's competencies required formal assessment.

A copy of the report detailing our findings can be found at w.cqc.org.uk/

Why we carried out this inspection

We carried out an announced comprehensive inspection at the Old School Medical Practice on 19 January 2016 when we rated the practice as good overall. Specifically, the practice was rated as good for providing effective care, for being caring, for responsiveness and for being well led and required improvement for safe care.

Detailed findings

As a result of the inspection in January 2016, the provider was found to be in breach of Regulation 17 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good Governance. Due to lack of governance systems and processes to monitor and assess the whole service in relation to risk and improvement. Staff had not been provided with appropriate policies and guidance to carry out their roles in a safe and effective manner. In addition there were areas within the dispensary where further improvements were detailed. Staff who were trained to be chaperones required an up to date DBS check.

We asked the provider to send a report of the changes they had made to comply with the regulation, they were not meeting at that time. We have followed up to make sure that the necessary changes have been made and found the provider was now meeting the regulation included within this report.

We also asked the provider to send a report detailing the up to date DBS checks and details of the changes implemented within the dispensary including up to date competency assessments of the dispensary staff. The practice provided detailed information relating to the DBS checks and the dispensary staff's competency checks.

This report should be read in conjunction with the full inspection report dated 18 March 2016.

How we carried out this inspection

We have not revisited The Old School Medical Practice as part of this review because they were able to demonstrate that they were meeting the standards without the need for a visit. We carried out a focused review based on the evidence the practice provided.

Following the inspection in January 2016, the provider sent us evidence which demonstrated that all staff now had access to appropriate policies and guidance to carry out their roles in a safe and effective manner. All training was recorded and updated regularly. The governance systems and processes to monitor and assess the whole service in relation to risk and improvement were now in place. We received information which demonstrated the dispensary staff had, had their competencies checked in line with national guidance. Also we were provided with the up to date DBS check of staff who undertook the role of chaperone.

Are services safe?

Our findings

Overview of safety systems and processes

At our last inspection on 19 January 2016, we found staff had not been provided with appropriate policies and guidance to carry out their roles in a safe and effective manner. Governance systems and processes were not implemented and so monitoring and assessing the whole service in relation to risk and improvements was not evidenced. The infection prevention and control (IPC) policy was in draft and had therefore not been implemented nor was there an up to date IPC audit for both premises. In addition there were areas where the provider should make further improvements. These included embedding good record keeping in all aspects of dispensing medicines. Comprehensive standard operating procedures (SOPs) which were regularly reviewed, required implementation in line with national guidance for dispensing practices. It was unclear if all staff who acted as chaperones had received a Disclosure and Barring Service (DBS) check. (DBS Checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). The dispensary staff's competencies required formal assessment.

On the 25 July 2016 the practice provided evidence to show how they had improved their procedures and were now

complying with the regulation. The practice submitted copies of policies and guidance for all staff to help ensure they carried out their roles in a safe and effective manner. We were provided with the IPC policy which had now been adopted and a copy of the IPC audits undertaken on 29 April 2016 with action plans. The training programme for all staff (2016-2017) with completed and yet to be completed mandatory training was submitted. We were also provided with meeting minutes from February 2016-July 2016 where governance systems and processes were discussed, action points documented and followed up appropriately. This showed that whole service risks and improvements were now evidenced. We also received evidence of up to date DBS checks for all staff that we had requested and further evidence of the changes to the chaperone policy, to assure all chaperones had a current DBS check in place.

On the 26 July 2016 the practice provided the updated standard operating procedures (SOPs) which demonstrated the scope required and now met the up to date guidance. We were given evidence of stock checks which were now recorded. We received the competency checks for the dispensary staff dated 2015-2016.

The practice had clearly defined and embedded systems and processes in place to keep patients safe and safeguarded from abuse.