

Asplands Medical Centre

Quality Report

Asplands Close,
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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 previously carried out an announced comprehensive inspection of Asplands Medical Centre on 19 April 2016. A breach of legal requirements was found. After the comprehensive inspection, the practice wrote to us and submitted an action plan outlining the actions they would take to meet legal requirements in relation to;

- Regulation 12 Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 – safe care and treatment.

From the inspection on 19 April 2016, the practice were told they must:

- Ensure procedures for the safe management of controlled drugs are followed and regularly reviewed.

We undertook a focused inspection at Asplands Medical Centre on 2 November 2016 to check that they had followed their plan and to confirm that they now met legal standards and requirements. This report only covers

our findings in relation to those areas found to be requiring improvement. You can read the report from our last comprehensive inspection, by selecting 'all reports' link for Asplands Medical Centre on our website at www.cqc.org.uk

We found that on the 2 November 2016 the practice now had improved systems and we found the following key findings:

- Practice specific protocols and procedures had been developed to manage controlled drugs. Staff demonstrated these were followed routinely.
- Systems to ensure that appropriate stock records of controlled drugs were maintained had been implemented effectively.
- The named GP for the dispensaries conducted regular checks to ensure that procedures and protocols were being followed.

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?

At our comprehensive inspection on 19 April 2016, we identified a breach of legal requirement.

Improvements were needed to some processes and procedures to ensure the practice provided safe services, in particular relating to the safe management of controlled drugs. (Controlled drugs are medicines that require extra checks and special storage because of their potential misuse).

During our focused inspection on 2 November 2016 we found the practice had taken action to improve and the practice is rated as good for providing safe services.

- Systems had been improved to ensure that controlled drugs were managed appropriately. In particular systems for checking stocks, recording destruction and managing security of controlled drugs.

Good



Asplands Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

The focused inspection was undertaken by a CQC Lead Inspector.

Background to Asplands Medical Centre

Asplands Medical Centre provides a range of primary medical services, including minor surgical procedures from its semi-rural location at Asplands Close, Woburn Sands in Bedfordshire. The practice has a branch surgery, known as the Woburn Surgery on Eleanor Close, Woburn in Bedfordshire. There is a dispensary at both the main practice and the branch surgery that provides medicine for patients who live more than one mile from a pharmacy.

The practice serves a population of approximately 11,400 patients with higher than average populations of both males and females aged 45 to 74 years. There are lower than average populations aged 0 to 34 years. The practice population is largely white British. National data indicates the area served is less deprived in comparison to England as a whole.

The clinical staff team consists of three female GP partners, three male GP partners, one female salaried GP, one GP registrar, two nurse prescribers, three practice nurses, three health care assistants and a phlebotomist. The team is supported by a practice manager partner and a team of administrative staff. The practice holds a General Medical Services (GMS) contract for providing services and is a training practice with one GP registrar who we did not meet on the day of our inspection.

Asplands Medical Centre is open between 8am and 6.30pm Mondays to Fridays and on Saturdays between 8.30am and 12pm. The branch surgery in Woburn is open from 8am to 1pm and from 2pm to 6.30pm Monday to Wednesday and from 8.30am to 1pm on Thursdays and Fridays. Patients requiring a GP outside of normal hours are advised to phone the NHS 111 service, the out of hours service is provided by Milton Keynes Urgent Care Services.

Why we carried out this inspection

We carried out a focussed inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

How we carried out this inspection

Before our inspection, we asked the provider to submit information and evidence to demonstrate the actions they had taken to address the breach of legal requirement and areas requiring improvement we identified during our comprehensive inspection on 19 April 2016. We carried out an announced focused inspection on 2 November 2016.

During our inspection we:

- Reviewed protocols and procedures developed to ensure the safe management of controlled drugs.
- Spoke to staff involved managing controlled drugs, including the dispensary manager.

Detailed findings

- Reviewed records of controlled drugs, including those for stock checking and safe destruction.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?

- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

However, during our focused inspection we only asked questions relating to safety.

Are services safe?

Our findings

Overview of safety systems and processes

We previously found the practice did not regularly monitor procedures for the safe management of controlled drugs. Following our inspection on 19 April 2016, the practice submitted evidence of new protocols and procedures for managing controlled drugs.

During our inspection on 2 November 2016, we saw that these protocols and procedures had been effectively implemented to ensure risks to patient safety were reduced and controlled drugs were handled appropriately within the practice. We saw that:

- There was a named GP responsible for the dispensaries at both the main surgery and the branch surgery. All members of staff involved in dispensing medicines had received appropriate training and had opportunities for continuing learning and development. There was a process for recording medicines incidents or 'near misses' to enable learning and reduce risk. Dispensary staff showed us standard operating procedures (SOPs) which covered all aspects of the dispensing process (these are written instructions about how to safely dispense medicines).
- The practice held stocks of controlled drugs (medicines that require extra checks and special storage because of their potential misuse) and had SOPs in place to manage them safely. We saw that these were the same SOPs sent to us following our inspection on the 19 April 2016 and they incorporated strengthened procedures for the safe handling of controlled drugs. Staff demonstrated that these procedures were followed routinely.
- The practice maintained designated controlled drugs handling areas at both dispensaries with clearly laminated instructions for staff to follow. We saw evidence that stocks of controlled drugs were checked by two staff every two weeks and appropriate records were kept in line with practice procedures. The named GP routinely reviewed stock records to ensure procedures were being followed appropriately.
- Records were kept of controlled drugs returned by patients for destruction in a separate log book and we noted that two members of staff witnessed the destruction and signed the log book accordingly.