

St. Andrew's Medical Practice

Inspection report

Sensier House
St. Andrews Lane
Spennymoor
DL16 6QA

Tel: 01388817777

Date of inspection visit: 14 May 2019

www.standrewsmedicalpracticespennymoor.nhs.uk Date of publication: 19/06/2019

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 location

Good



Are services safe?

Requires improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at St Andrews Medical Practice on 14 May 2019 as part of our inspection programme.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as **good** overall.

We have rated the domain of safe as requires improvement because:

We rated the practice as **requires improvement** for providing safe services because:

- Patient specific directions (PSDs) did not meet legal requirements
- The practice did not have an effective system in place to monitor the temperature of the dispensary fridges.
- The practice did not have appropriate systems in place to monitor controlled drugs.

We rated the practice as **good** for providing effective, caring, responsive and well led services because:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- The practice had systems in place so that safety incidents were less likely to happen.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs.
- They had reviewed the skill mix of staff and the appointment system to improve access for patients.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We have rated this practice **good** for all population groups except families, children and young people which we rated as **outstanding**.

We rated this population group as **outstanding** because;

- The practice ran a dedicated nurse led weekly drop in clinic for teenagers. This was funded by the practice and was also available to patients who were not registered with the practice. The service provided targeted support to teenagers including matters relating to sexual health and drug and alcohol abuse.

We saw an area of **outstanding** practice which was:

- The practice had taken a proactive approach in looking at the needs of the different groups of patients. They had made improvements to patients access in terms of skill mix of staff for appointments, a colour coded chart to ensure appointment slots were given the appropriate length of time and new telephone software They introduced an open access blood clinic. Patients suffering with mental health were assigned a GP if the patient felt it appropriate.

The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.

The areas where the provider **should** make improvements are:

- Continue to review the immunisation status of staff.
- Review the management of controlled stationery having due regard to national guidance.
- Review the training needs of each staff role and monitor refresher training as appropriate.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Outstanding	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, a CQC pharmacist specialist and a medicines team support officer.

Background to St. Andrew's Medical Practice

St Andrews Medical Practice provides services to around 11,570 patients and is located at St Andrew's Lane, Spennymoor, Co Durham, DL16 6QA

The provider is registered with CQC to deliver the following Regulated Activities: diagnostic and screening procedures; maternity and midwifery services; treatment of disease, disorder or injury; family planning; and surgical procedures.

St Andrew's Medical Practice is situated in a purpose-built building with full disabled access. The practice offers dispensing services to patients who live more than one mile (1.6km) from their nearest pharmacy.

The practice has five GP partners (three male and two female). There are four advanced nurse practitioners, an advanced paramedic practitioner, two practice nurses, and three healthcare assistants. There is a practice

manager and assistant practice manager. There are 12 staff who undertake administration duties and two dispensing staff. The practice hosted first, second and third year medical students.

The practice is part of NHS Durham Dales and Sedgefield clinical commissioning group (CCG). The practice provides services based on a Personal Medical Services (PMS) contract agreement for general practice.

Information from Public Health England placed the area in which the practice is located in the fourth most deprived decile. In general, people living in more deprived areas tend to have greater need for health services. Average male life expectancy at the practice is 79 years which is the same as the national average. Average female life expectancy at the practice is 82 years compared to the national average of 83 years.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Assessments of the risks to the health and safety of service users of receiving care or treatment were not being carried out. In particular:</p> <ul style="list-style-type: none">• Patient specific directions (PSD) did not meet legal requirements• The practice did not have an effective system in place to monitor the temperature of the dispensary fridges.• The practice did not have appropriate systems in place to monitor controlled drugs. <p>This is a breach of Regulation 12 (1)(2) (g) of the Health and Social Care Act (Regulated Activities) Regulations 2014. Safe care and treatment (2) (g)</p>