

Kirkdale

Quality Report

Kirkdale Medical Centre

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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 announced comprehensive inspection of Kirkdale on 8 October 2014. The overall rating for the practice was Good. However, the practice was rated as Requires Improvement for providing safe services. The full comprehensive report on the October 2014 inspection can be found by selecting the 'all reports' link for Kirkdale on our website at www.cqc.org.uk.

This inspection was an announced focused review carried out on 9 May 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulation that we identified at our previous inspection on 8 October 2014. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- The systems to assess the risk of and to prevent and control the spread of a healthcare associated infection had been improved.

The following improvements to the service had also been made:

- Fire drills were now occurring on a regular basis and quarterly fire audits carried out.

The areas where the provider should make improvements are:

- A record should be made of the weekly checks of cleaning standards.
- A system to ensure single use items are individually packaged and in date should be put in place.

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 is rated as good for providing safe services. Action had been taken to improve the systems to assess the risk of and to prevent and control the spread of a healthcare associated infection. Fire drills were now occurring on a regular basis, a fire risk assessment had been undertaken and quarterly fire audits carried out.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- A record should be made of the weekly checks of cleaning standards.
- A system to ensure single use items are individually packaged and in date should be put in place.

Outstanding practice

Kirkdale

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was undertaken by a CQC inspector.

Background to Kirkdale

Kirkdale Medical Centre is a small inner city practice in the Kirkdale area of Liverpool. The practice treats patients of all ages and provides a range of medical services. The staff team includes two GP partners, one part-time locum GP, one part time practice nurse, a practice manager, administrative and reception staff. There was a vacancy for a part time practice nurse that had been recently recruited to.

The practice is open Monday to Friday from 8am until 6.30pm. Patients can book appointments in person and by telephone. Patients can book on the day or in advance, home visits are offered to housebound patients and telephone consultations are available. When the practice is closed patients access the Out-of-Hours GP service by calling NHS 111.

The practice is part of NHS Liverpool Clinical Commissioning Group. It is responsible for providing primary care services to approximately 3031 patients. The practice is situated in an economically deprived area of the city. The practice has a General Medical Services (GMS) contract.

Why we carried out this inspection

We undertook a comprehensive inspection of Kirkdale on 8 October 2014 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as Good. The full comprehensive report following the inspection on 8 October 2014 can be found by selecting the 'all reports' link for Kirkdale on our website at www.cqc.org.uk.

We undertook an announced focused review of Kirkdale on 9 May 2017. This inspection was carried out to review 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

The inspector :-

- Carried out a site visit
- Spoke with the practice manager and registered manager
- Reviewed documents

Are services safe?

Our findings

At our previous inspection on 8 October 2014 we rated the practice as requires improvement for providing safe services. Improvements were needed to the systems to prevent and control the spread of infection.

When we undertook a follow up inspection on 9 May 2017 we found that improvements had been made. The premises were clean. The number of cleaning hours had increased and cleaning schedules were in place. The practice manager carried out a weekly check of cleaning standards however this was not recorded. Infection control guidance had been revised and all staff had completed recent training. The practice manager was the infection control lead. The registered manager and practice manager recognised that this would be a position more suited for a clinical member of staff who could liaise with the local infection prevention and control team (IPCT). There had been a vacancy for a second part time practice nurse which had recently been recruited to. The plan was for this nurse to become the infection control lead when they began their employment at the practice. An infection control audit was completed by the IPCT in October 2015 which identified the practice was 96% compliant. The practice manager had introduced a system of 6 monthly infection control audits with the last one being undertaken in April 2017.

We found that there were examination gloves and aprons available and staff and patients had access to hand washing facilities. The soap dispensers attached to the walls could not be opened and containers of hand wash had been placed in bathrooms. The practice manager reported that these were sometimes removed by patients. Following the inspection the practice manager told us that

quotes had been obtained for replacing the hand dispensers and arrangements made for these to be fitted. There was appropriate segregated waste disposal systems for clinical and non-clinical waste. Spillage kits were available to safely manage bodily waste. A legionella risk assessment was in place with actions being undertaken by NHS Property Services. The practice manager informed us that they ran the little used outlets on a weekly basis in accordance with the risk assessment.

We were told that the practice did not use any instruments that required decontamination between patients and that all instruments were for single use. We checked that equipment for single use was still in covers and was in date. We found that one mouth swab was out of date. This was removed immediately. We also found that a nebulising kit contained a mask and suction equipment that had been removed from its original packaging. Following the inspection the practice manager confirmed this had been replaced. The infection control audits undertaken by the practice manager did not look at whether single use items were appropriately managed.

At our previous inspection on 8 October 2014 we identified that fire drills were not taking place on a regular basis and that the fire risk assessment had not been reviewed annually. At this visit records showed that fire drills were taking place twice a year with the last one occurring on 28 April 2017. A fire risk assessment had been undertaken by NHS Property Services in November 2016. The practice manager had also introduced quarterly fire audits. Records showed that three staff had been trained as fire marshalls. NHS Property Services carried out weekly and monthly checks of the fire safety and detection systems.