

Dr J K Mathews and Partners

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

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 focused inspection of Dr J K Mathews and Partners on 8 April 2016. This inspection was undertaken to follow up a requirement notice we issued to the provider at our previous inspection of 3 November 2015 as they had failed to comply with the law in respect of providing safe care and treatment for patients, specifically in respect of safeguarding service users from abuse and improper treatment. We undertook

this focused follow up inspection to check that they had followed their action plan to achieve compliance with the regulations and to confirm that they now met legal requirements. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for on our website at www.cqc.org.uk.

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?

We found that improvements had been made following our previous inspection of 3 November 2016.

Trained nursing staff undertook chaperone duties. Disclosure and Barring Service checks had been undertaken on these staff members. The practice showed us that they received and managed safety alerts.

Written protocols to ensure that patients taking certain medicines and systems to ensure that clinicians were kept up to date with national guidance and guidelines were in place.

Good





Dr J K Mathews and Partners

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a CQC Inspector.

Background to Dr J K Mathews and Partners

Dr J K Mathews and Partners is a well-established GP surgery that has operated in the area for many years. It serves approximately 10,000 registered patients and has a general medical services contract with NHS Norwich Clinical Commissioning Group.

It is located in a reasonably affluent area of Norwich. According to information taken from Public Health England, the patient population has a higher than average number of patients aged 55-85 years, and a lower than average number of patients 1-44 years compared to the practice average across England. There is a high prevalence of asthma, cancer, heart failure, and stroke amongst its patient population compared to national average.

The practice consists of four male GP partners, two nurse practitioners, four nurses, and one health care assistant. A number of reception and administrative staff support them. It is a teaching practice involved with the training of GPs and medical students.

The practice is open between 8.30am -6pm Monday to Friday only, and does not offer any extended hours opening times.

Why we carried out this inspection

We undertook a focused inspection of Dr J K Mathews and Partners on 8 April 2016. The inspection was carried out to check that improvements had been made to meet legal requirements in respect of compliance with regulation 13 Health and Social Care Act (Regulated activities) Regulation 2014, following our comprehensive inspection on 3 November 2015.

When we inspected the practice on 3 November 2015 we were concerned about the safe care and treatment of patients in respect of safeguarding service users from abuse and improper treatment. Not all staff who undertook chaperone duties had received training for this role, or had been risked assessed regarding the need for a DBS check.



Are services safe?

Our findings

The practice had reviewed its provision and policy for staff that were expected to undertake chaperone duties. It was agreed in a partners' meeting on 25 November 2015 that only trained nursing staff would undertake this role, all these staff members had received Disclosure and Barring Service (DBS) checks. DBS checks identify whether a person has a criminal record or is on an official list of people barred from working with children or adults who might be vulnerable. In addition the practice had reviewed the its recruitment policy and systems to ensure that when recruiting new members of staff all appropriate checks would be undertaken, including DBS checks and record keeping of interviews.

The practice demonstrated a robust system to ensure that safety alerts were received and action taken. For example, minutes from a meeting held 6 April 2016 showed that a recent patient safety alert relating to home visits was discussed and that the call handling protocol would be reviewed.

We reviewed the written protocol to ensure that patients who were taking medicines such as lithium were followed up appropriately. Records that we were shown confirmed that patients were managed well.