

# White Medical Group

## Quality Report

Ponteland Primary Care Centre  
Meadowfield  
Ponteland  
Newcastle upon Tyne  
NE20 9SD

Tel: 0191 416 2578

Website: [www.whitemedicalgroup.gpsurgery.net](http://www.whitemedicalgroup.gpsurgery.net)

Date of inspection visit: 23 August 2016

Date of publication: 30/09/2016

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

## Contents

### Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3
What people who use the service say	4

### Detailed findings from this inspection

Our inspection team	5
Background to White Medical Group	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out a previous announced comprehensive inspection of this practice on 11 April 2016. Overall, we rated the practice as good. However, there was a breach of legal requirement. In particular, we found the provider had not made appropriate arrangements to make sure that medicines were managed safely and appropriately. The provider had also not made sure there was a rigorous system in place for recording actions taken in response to medicines safety alerts, or for ensuring the secure storage of all medicines requiring cool storage.

After the comprehensive inspection the practice wrote to us to say what they would do to address the identified breach. We undertook this announced focussed inspection, on 23 August 2016, to check that the practice had followed their plan and to confirm that they now met

the legal requirement. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for White Medical Group on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Our key findings were as follows:

- The provider had complied with the requirement notice we set following our last inspection visit. We found improvements had been made and that medicines were safely managed within the dispensaries.

**Professor Steve Field** CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

**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.

The provider had complied with the requirement notice we set following our last inspection. Staff had reviewed and improved the practice's arrangements for managing medicines at the dispensaries in the main practice and branch surgeries, to help protect patients from potential risk of harm.

**Good**



# Summary of findings

## What people who use the service say

We did not speak with people who use the service.

# White Medical Group

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our inspection team was led by a CQC pharmacist.

## Background to White Medical Group

White Medical Group provides care and treatment to 4,682 patients of all ages, based on a General Medical Services (GMS) contract. The practice is part of the NHS Northumberland clinical commissioning group (CCG) and provides care and treatment to patients living in Ponteland, Darras Hall, Kingston Park, Wylam, Stamfordham and the surrounding areas. We visited the following locations as part of our inspection:

Ponteland Primary Care Centre, Meadowfield, Ponteland, Newcastle upon Tyne, NE20 9SD.

Glenbriar, 12 Grange Road, Stamfordham, Newcastle upon Tyne, NE18 0PF.

The Surgery, Jackson Road, Wylam, Northumberland, NE41 8EL.

The practice serves an area where deprivation is lower than the England average. The practice population includes fewer patients who are under 18 years of age than the England average, and more patients aged over 65 years of age, than both the local CCG and England averages. The practice had a low proportion of patients who are from ethnic minorities.

The main practice in Ponteland is located in a purpose built health centre, which provides ground floor consultation and treatment rooms. The practice has four

GP partners (two male and two female), two salaried GPs (female), two practice nurses (female), three healthcare assistants/phlebotomists (female), a practice manager, an administrative/medicines manager, a reception/medicines manager, a clinical manager and a team of administrative and reception staff.

The practice and dispensary opening hours are:

Monday to Friday: 8:30am to 1:30pm and 2pm to 6pm.

Prescriptions were dispensed at the main Ponteland site, as well as at the Stamfordham and Wylam branch surgeries, for patients who did not live near a pharmacy.

Appointment times are as follows:

Monday to Friday: 8:45am to 11:15am and 3pm to 5:30pm.

(Additional early morning appointments starting at 7am were available two to three times a week and these rotate between Tuesday, Wednesday, Thursday and Friday mornings.)

When the practice is closed patients can access out-of-hours care via Vocare, known locally as Northern Doctors, and the NHS 111 service.

## Why we carried out this inspection

We undertook an announced, focused follow up inspection of White Medical Group on 23 August 2016. This inspection was carried out to check whether the provider had taken the action they said they would take to address the shortfall in relation to a legal requirement, which had been identified during our inspection on 11 April 2016. We inspected the practice against one of the five questions we ask about services: is the service safe. This is because the service was not meeting a legal requirement relating to

## Detailed findings

safety at the time of the previous inspection. In particular, we found that the arrangements for managing the dispensary did not adequately protect patients from a potential risk of harm.

- We spoke with the practice manager and staff working in the dispensary.
- We reviewed a sample of the records kept by staff.

## How we carried out this inspection

Before visiting, we reviewed a range of information that we hold about the practice and asked other organisations to share what they knew. We carried out an announced visit on 23 August 2016. During our visit:

# Are services safe?

## Our findings

When we last inspected the practice, in April 2016, we identified that some aspects of the practice's arrangements for managing medicines within the dispensary were not safe. In particular, we found that:

- Dispensary staff did not always follow the practice's standard operating procedures (SOPs), and that, because of this, some medicines were being dispensed without a valid prescription being produced.
- The practice provided a home delivery service for patients unable to collect their medicines from the local pharmacist. However, a standard operating procedure (SOP) was not in place for delivering medicines. (SOPs are written instructions about how to safely dispense medicines.)
- The practice did not have a formal process in place for carrying out regular checks of medicines to ensure they were within their expiry dates.
- Medicines requiring refrigeration were not stored in locked refrigerators, and access was not always restricted to authorised personnel.
- Blank prescription forms were not stored in accordance with national guidance and the system for tracking prescription forms, after they had been received into the practice, was not sufficiently rigorous.
- There was no system in place to record actions taken in response to medicines alerts.

During our inspection on 23 August 2016, we found that:

- Staff only dispensed medicines when a valid prescription had been produced. The practice's systems and processes had been reviewed and improved to

make sure this happened. We checked a sample of completed prescriptions awaiting collection and found they had been signed by a doctor, and had not gone over their six monthly validity date.

- Staff had reviewed, and where relevant updated, all of the practice's SOPs. We saw evidence that the amended SOPs had been read and signed by staff. (SOPs are written instructions about how to safely dispense medicines.)
- The practice had introduced a recording system to regularly check medicines were within their expiry date. All medicines we checked were within their expiry date.
- Medicine refrigerators were locked and access to these had been restricted to authorised personnel only. We also checked the arrangements for storing controlled drugs and found these were stored securely in accordance with legislation. (Controlled drugs are medicines that require extra checks and special storage arrangements because of their potential for misuse.)
- Blank prescription forms were stored securely in accordance with national guidance and the practice had implemented a system to track prescription forms processes by the practice.
- The practice had implemented a satisfactory system to manage medicines alerts across all three sites. We were shown evidence of the actions taken when an alert came in to the practice. The practice had a system for monitoring near misses to help prevent potentially harmful events from reoccurring. (A 'near-miss' record is a log of dispensing errors that have been identified before medicines have left the dispensary.) We were told 'near-misses' were discussed in quarterly team meetings. Staff provided us with minutes of the last meeting which showed the 'near-misses' had been discussed and appropriate details recorded, for staff who could not attend the meeting.