

Squires Lane Medical Practice

Quality Report

2 Squires Lane

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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 at Squires Lane Medical Practice on 19 April 2016. The overall rating for the practice was good. Within that overall rating the practice was rated as requires improvement for providing safe services. This was because it was not meeting some legal requirements in relation to prescription form security and staff recruitment checks. The full comprehensive report of the April 2016 inspection can be found at www.cqc.org.uk/location/1-546095318.

This inspection on 12 May 2017 was an announced focused inspection and was carried out to confirm that the practice completed their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 19 April 2016. This report covers our findings in relation to those requirements.

Overall the practice is rated as good.

Our key findings were as follows:

- The practice had put in place clearly defined systems, processes and practices to minimise risks to patient safety in relation to prescription form security and staff recruitment.

The practice had also acted on recommendations we made at our previous inspection and implemented additional improvements:

- The practice had developed a business plan to support it in the delivery of its vision to provide high quality care and promote good outcomes for patients.
- The practice had met with the Barnet Integrated Locality Team (BILT) to explore ways of working with the team to support patients who were at risk of avoidable admission to hospital better.
- The practice was able to meet a patient's request to be seen by a male or female GP.

At our previous inspection on 19 April 2016 we rated the practice as requires improvement for providing safe services because blank prescription forms and pads were not securely stored and there was no system in place to monitor their use; and because not all appropriate

Summary of findings

recruitment checks had been undertaken prior to employment of staff. At this inspection we found these shortfalls had been remedied. Consequently, the practice is rated as good for providing safe services.

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.

- Blank prescription forms and pads were securely stored and there were systems in place to track their use.
- Appropriate recruitment checks had been undertaken prior to the employment of new staff.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The practice is rated as good for the care of older people.

The rating was given following the comprehensive inspection in April 2016. A copy of the full report following the April 2016 inspection is available on our website at www.cqc.org.uk/location/1-546095318.

Good



People with long term conditions

The practice is rated as good for the care of people with long term conditions.

The rating was given following the comprehensive inspection in April 2016. A copy of the full report following the April 2016 inspection is available on our website at www.cqc.org.uk/location/1-546095318.

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people.

The rating was given following the comprehensive inspection in April 2016. A copy of the full report following the April 2016 inspection is available on our website at www.cqc.org.uk/location/1-546095318.

Good



Working age people (including those recently retired and students)

The practice is rated as good for the care of working age people (including those recently retired and students).

The rating was given following the comprehensive inspection in April 2016. A copy of the full report following the April 2016 inspection is available on our website at www.cqc.org.uk/location/1-546095318.

Good



People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

The rating was given following the comprehensive inspection in April 2016. A copy of the full report following the April 2016 inspection is available on our website at www.cqc.org.uk/location/1-546095318.

Good



People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia).

Good



Summary of findings

The rating was given following the comprehensive inspection in April 2016. A copy of the full report following the April 2016 inspection is available on our website at www.cqc.org.uk/location/1-546095318.

Squires Lane Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was made up of a CQC Inspector.

Background to Squires Lane Medical Practice

Squires Lane Medical Practice provides primary medical services in the London Borough of Barnet to approximately 5800 patients and is one of sixty-two member practices in the NHS Barnet Clinical Commissioning Group (CCG).

The practice population is in the fifth least deprived decile in England. The practice population has a greater than average percentage of working age people between the ages of 25-39 years, with a lower than average population of people aged 55 years or older. The practice had surveyed the ethnicity of the practice population and had determined that 21% of patients identified themselves as having White ethnicity, 21% Asian, 9% Black and 49% as having mixed or other ethnicity.

The practice operates from a converted residential property which is arranged over three floors, with patient facilities on the ground and first floors. The ground floor is accessible for wheelchair users. There are offices for administrative and management staff on the ground, first and second floors. All three floors are accessed via stairs.

The practice operates under a General Medical Services (GMS) contract and provides a number of local and national enhanced services (enhanced services require an

increased level of service provision above that which is normally required under the core GP contract). The enhanced services it provides are: alcohol; childhood vaccination and immunisation scheme; extended hours access; influenza and pneumococcal immunisations; learning disabilities; minor surgery; patient participation; risk profiling and case management; rotavirus and shingles immunisation; and unplanned admissions.

The clinical team at the surgery is made up of two female GP partners and a salaried female GP. Together they work 19 sessions per week. The salaried GP is currently on maternity leave and locum maternity cover is in place. A further three sessions at the practice are worked by locum GPs. There is one part-time female practice nurse and one part-time female healthcare assistant. There are nine administrative, clerical and reception staff, and one part-time practice manager.

The practice is open between 8.00am and 6.30pm Monday, Tuesday, Thursday and Friday, and from 8.00am to 1.00pm on Wednesdays. Appointments are available on:

- Monday and Tuesday between 9.00am to 11.30am and 4.00pm and 6.00pm. Telephone appointments with each doctor are available in the middle of the day.
- Wednesday between 9.00am to 11.50am. Each doctor then has 30 minutes for telephone appointments.
- Thursday between 9.00am to 12.00pm and 4.00pm to 6.00pm. Telephone appointments with each doctor are available in the middle of the day.
- Friday between 9.00am to 11.20am and 4.00pm to 5.30pm. Telephone appointments with each doctor are available in the middle of the day.

Detailed findings

The practice is open for extended hours between 6.30pm to 7.00pm on Monday, Tuesday, Thursday and Friday.

The practice does not open on a weekend. The practice has opted out of providing out of hours (OOH) services to their patients between 6.30pm and 8.00am and directs patients to the OOH provider for NHS Barnet CCG.

Squires Lane Medical Practice is registered as a Partnership with the Care Quality Commission to provide the regulated activities of: maternity and midwifery services; treatment of disease, disorder or injury; surgical procedures; and diagnostic and screening procedures.

The provider is in the process of registering one of the partners with CQC as the Registered Manager for Squires Lane Medical Practice.

Why we carried out this inspection

We undertook a comprehensive inspection of Squires Lane Medical Practice 19 April 2016 under Section 60 of the

Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall, and within that was rated requires improvement for providing safe services. This was because the practice was not meeting some legal requirements. The full comprehensive report following the inspection in April 2016 can be found at www.cqc.org.uk/location/1-546095318.

We undertook a follow up focused inspection of Squires Lane Medical Practice on 12 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

During our visit on 12 May 2017 we reviewed information provided by the practice and spoke with receptionist and secretarial staff and with the practice manager.

Are services safe?

Our findings

At our previous inspection on 19 April 2016 we rated the practice as requires improvement for providing safe services. This was because there were shortfalls in the practice's arrangements in respect of prescription form security and staff recruitment checks.

These arrangements had significantly improved when we undertook a follow up inspection on 12 May 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- Blank prescription forms and pads were securely stored and there were systems in place to monitor their use. This reduced the risk of prescription forms and pads being misappropriated.
- We reviewed three personnel files and found appropriate recruitment checks had been undertaken prior to employment. For example, proof of identification, references, qualifications, registration with the appropriate professional body and the appropriate checks through the Disclosure and Barring Service. There was a signed employment contract and confidentiality agreement in place and, where applicable there was a record of the employees' professional indemnity insurance arrangements.