

Resolution Health Centre

Quality Report

North Ormesby health Village Middlesbrough Cleveland TS3 6AL Tel: 01642 511854/0330 123 9501 Website: resolutionhealthcentre.co.uk

Date of inspection visit: 13 December 2017 Date of publication: 28/02/2018

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
Overall	raung	ioi tilis	SCI VICE

Good



Are services safe?

Requires improvement



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Resolution Health Centre on 14 December 2016. The overall rating for the practice was good but requires improvement in safe. The full comprehensive report of the 14 December 2016 inspection can be found by selecting the 'all reports' link for Resolution health Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 13 December 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 14 December 2016. 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:

• Since the previous inspection the practice had purchased and installed data loggers (automatic

temperature monitors) within the vaccine fridges. We did however find that there were some gaps in recording of fridge temperatures. Also that the data from the data loggers showed the temperatures had gone out of the required range and had not been identified.

 Since the last inspection the practice had implemented additional checks in respect of infection prevention and control. However, no full infection control audits have been completed.

The provider MUST make improve;

Have effective arrangements in place to ensure that vaccines and other medicines stored in the refrigerators are stored at the correct temperatures.

The practice SHOULD:

• Implement infection control audits.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Summary of findings

Areas for improvement

Action the service MUST take to improve

Have effective arrangements in place to ensure that vaccines and other medicines stored in the refrigerators are stored at the correct temperatures.

Action the service SHOULD take to improve

Implement infection control audits.



Resolution Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was made up of one CQC inspector.

Background to Resolution Health Centre

Resolution Health Centre, North Ormesby Health Village, North Ormesby, Middlesbrough, Cleveland, TS3 6AL, is situated the outskirts of Middlesbrough. The practice is housed in a purpose built medical centre which is not owned by the practice. There is parking with some of the patients living within walking distance and there is access to public transport. There are 5436 patients on the practice list.

There are five salaried GPs three male and two female. There are two nurse practitioners, and one health care assistant. There is a practice manager, and administrative staff. The practice works closely with the clinical commissioning group (CCG) and is part of South Tees Hospitals NHS Foundation Trust. The practice is open from 8am to 6pm, Monday to Friday. Appointments can be booked by walking into the practice, by the telephone and on line.

From 6pm until 9.30pm, when the practice is closed The South Tees Access and Response (STAR) service is used. Patients ring 111 for an appointment. The practice, along with all other practices in the South Tees CCG, area have a contractual agreement for ELM Alliance to provide OOHs services from 9.30pm. This has been agreed with the NHS England area team. The practice has opted out of providing out of hours services (OOHs) for their patients.

Why we carried out this inspection

We undertook a comprehensive inspection of The Resolution Health Centre on 14 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on December 2016 can be found by selecting the 'all reports' link for The Resolution Health Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of The Resolution health Centre on 13 December 2017. This inspection was carried out to review in detail 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

We carried out a focused inspection of Resolution Health Centre on 13 December 2016. This involved reviewing evidence that:

• The arrangements for the proper and safe management of vaccines had improved to ensure that care and treatment is provided in a safe way for patients.

During our visit we:

- Spoke with the practice manager.
- Reviewed a range of information provided by the practice.



Are services safe?

Our findings

At our previous inspection on 14 December 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of taking refrigerator temperatures regularly and cleanliness and infection control were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 13 December 2017. The practice is now rated as good for providing safe services.

Safety systems and processes

Following the last inspection the practice provided CQC with information to show that they had purchased and installed data loggers for the vaccine fridges. As part of this inspection we reviewed information provided by the practice in respect of daily vaccine fridge temperature records and data from the data loggers We saw that during December 2017 there were some gaps in the recording of fridge temperatures. It was also noted that some of the gaps were as a result of staff being on annual leave and no contingency in place to cover this.

We looked at the information provided from the data loggers and saw that during September to December 2017 the data recorded was outside of the required ranges

When these issues were raised with the practice manager they took immediate steps to address the issues. An action plan was forwarded to CQC which detailed a number of actions that had or were being implemented. These included, additional staff training and more robust monitoring of the temperature recording and data logger information.

The practice also shared the information with Public Health England who were satisfied with the measures in place.

During this inspection we also reviewed information in respect of infection control. We saw that additional checks had been implemented which included environmental infection control audits, which had been completed on a quarterly basis. We were provided with information detailing South Tees Trust's cleaning audit which had been completed. Action points had been identified but there was no evidence to evidence that the required actions had taken place. It remained unclear if a full infection control audit had been completed.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment.
	The registered person did not do all that was reasonably practicable in managing medicines safely; no action had been taken or recorded in response to refrigerator temperatures not being recorded regularly.
	This was in breach of Regulation 12 (1) of the Health and Social Care Act (Regulated Activities) Regulations 2014.