

Tanworth-in-Arden Medical Practice

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

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 had carried out an announced comprehensive inspection of Tanworth-in-Arden Medical Practice on 18 September 2015. As a result of our inspection the practice was rated as good overall but required improvement for providing safe services.

During the last inspection we identified a breach of regulation around safe care and treatment. The area we identified the provider must improve:

- The provider must ensure that supplies of equipment and medicines for use in an emergency are appropriately maintained.

We also identified further areas the provider should improve:

- Review the checking process for monitored dosage packs to mitigate the risk of medicine dispensing errors.
- Review the documentation of risk assessments.

Following the inspection the practice sent us an action plan detailing the actions they were going to take to improve.

We carried out a focused desk-based review of Tanworth-in-Arden Medical Practice on 15 February 2017 to check that the provider had made improvements in

line with our recommendations and to ensure regulations were now being met. This report only covers our findings in relation to those requirements. The full comprehensive report for the November 2015 inspection can be found by selecting the 'all reports' link for Tanworth-in-Arden Medical Practice on our website at www.cqc.org.uk.

The practice is now rated as good for the provision of safe services.

As part of our focused desk-based review the management team provided evidence to demonstrate that:

- The provider had revised their system and ensured that supplies of equipment and medicines for use in an emergency were appropriately maintained.
- The checking process for monitored dosage packs had been reviewed and updated to mitigate the risk of medicine dispensing errors.
- The documentation of risk assessments had been reviewed and processes updated to ensure that records were managed more effectively.

We were satisfied that the practice had made the required improvements.

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 revised their system and ensured that supplies of equipment and medicines for use in an emergency were appropriately maintained.
- The checking process for monitored dosage packs had been reviewed and updated to mitigate the risk of medicine dispensing errors.
- The documentation of risk assessments had been reviewed and processes updated to ensure that records were managed more effectively.

Good



Tanworth-in-Arden Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

by a CQC Lead Inspector.

Background to Tanworth-in-Arden Medical Practice

Tanworth-in-Arden Medical Practice is a semi-rural practice located just outside of Tanworth-in-Arden. They moved in to the purpose built premises in 2001 and became known as The Birches. Tanworth-In-Arden Medical Practice is a dispensing practice. The practice offers a wide range of services to their patients and offer additional NHS services the opportunity to use their building such as:

- Abdominal Aortic Aneurysm (AAA screening)
- Psychological therapy,
- Improving Access to Psychological Therapies (IAPT) which is an NHS programme rolling out services across England offering interventions approved by the National Institute of Health and Clinical Excellence (NICE) for treating people with depression and anxiety disorders.
- Digital retinopathy clinics.

The practice is a training practice offering places to trainee GPs. Trainee GPs are fully qualified doctors who are undergoing their final training to become a GP. The practice is also a teaching practice and provides placements for medical students from Warwick University.

The practice has two GP partners and two salaried GPs. Two of the GPs are female and two are male offering a choice to patients. The practice has two nurses, a healthcare assistant, a phlebotomist (a person trained to take blood), a head dispenser and four dispensers.

The clinical team are supported by a practice manager, an assistant practice manager, a head receptionist and a team of reception staff and medical secretaries. The practice has a General Medical Services(GMS) contract with NHS England. The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities.

The practice is open between 8.30am and 6pm Monday to Friday. Appointments are from 8.30am to 12.30pm every morning and 2.30pm to 5.30pm every afternoon.

The practice does not provide out of hours services to their own patients but provided information about the telephone numbers to use for out of hours GP arrangements (NHS 111). Alternatively patients are provided with the details of Solihull walk-in centre located at Solihull Hospital which is open from 8am to 8pm seven days a week.

Why we carried out this inspection

We undertook a comprehensive inspection of Tanworth-in-Arden Medical Practice on 18 September 2015 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement in the provision of safe services. The

Detailed findings

full comprehensive report following the inspection in September 2015 can be found by selecting the 'all reports' link for Tanworth-in-Arden Medical Practice on our website at www.cqc.org.uk.

We undertook a focused desk-based review of Tanworth-in-Arden Medical Practice on 15 February 2017 to consider the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Are services safe?

Our findings

Overview of safety systems and processes

In September 2015 the practice was inspected and improvements were required for providing safe services. Following the inspection an action plan was put in place by the practice to ensure the timely progression and resolution of the concerns highlighted. We also received updated information about action the practice had taken in preparation for this desk-based review.

The areas where improvements were required as a result of the previous inspection and the action the practice had taken to address these were:

- We found that the oxygen cylinder had expired in September 2014. The provider needed to ensure that supplies of equipment and medicines for use in an emergency were appropriately maintained. The practice provided evidence immediately following the last inspection that the oxygen cylinder had been replaced. There was no warning sign displayed on the door where it was located. The practice took immediate action to address this following the inspection. This was also confirmed in the action plan they submitted to us. In preparation for this focused desk-based review the practice sent further confirmation they had obtained and fitted a sign to the door of the room where oxygen was stored. Changes had been made to processes for monitoring expiry dates and contact information, copies of which were kept in the building folder located in the practice manager's office.
- There were basic standard operating procedures (SOPs) in place for the dispensary staff; these were regularly reviewed at monthly meetings over a rolling period. Dispensary staff informed us at the last inspection that they did not use a double check system during dispensing of the prescriptions. The SOP for dispensing a prescription did not indicate that this check was required. The checking process for the monitored dosage packs did include a second accuracy check before the medicine was allowed to leave the premises. However, it did not include checking the original packs against the monitored dosage pack and prescriptions to reduce the risk of medicine dispensing errors. The practice confirmed that the checks for monitored dosage packs had been reviewed and updated to mitigate the risk of medicine dispensing errors.
- We found at the last inspection that not all medicine incidents were recorded. In particular, near misses in the dispensary were not always documented. It was therefore not possible to know what action was taken or what lessons were learnt to prevent these incidents happening again. The practice confirmed that the documentation of risk assessments had been reviewed and processes updated to ensure that records were managed more effectively.