Mundesley Medical Centre

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 carried out an announced comprehensive inspection at Mundesley Medical Centre on 2 December 2015. One breach of legal requirements was found.

- Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Safe care and treatment (2) (b). Systems and processes were not established and operated effectively to ensure that clinicians were overseeing and checking changes to patients' prescriptions.

We undertook this focused inspection to check that they had followed their action plan to address the shortfalls and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

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?

Good

At the last inspection on 2 December 2015 we found that the practice had written procedures in place for the production of prescriptions and dispensing of medicines that were regularly reviewed and reflected current practice. Prescriptions were reviewed and signed by GPs before they were given to the patient. However, following discharge from hospital, dispensers sometimes made changes to patients' medicines on the written advice of GPs, which did not ensure safety. Since the last inspection the provider had provided evidence to show the process is audited and does not constitute a safety issue within the practice.

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Detailed findings

Why we carried out this inspection

As a result of the last inspection in December 2015 we issued a requirement notice for the breach of regulation. This was because systems and processes were not established and operated effectively to ensure that clinicians oversaw changes to prescriptions. We stated that the provider must develop a protocol for GPs to check changes in patients' medications following discharge from hospital in addition to the GP signing the prescriptions prior to the issue of medication.

How we carried out this inspection

We did not undertake a site visit as part of this inspection, but we reviewed the comprehensive information the practice sent to us to evidence what action they had taken to address the breach in regulation.

Good

Are services safe?

Our findings

We reviewed the information submitted to us on 14 April, and found that the provider taken appropriate action.

- The provider sent us evidence of a completed an audit to ensure that medication changes made as a result of correspondence from secondary care providers were accurate and had been authorised by a GP. The findings of the audit showed that GPs made amendments to required medication changes rather than the dispensary team. There was a plan in place for a second cycle of the audit, which would be moved forward to an earlier date if any new GPs joined the practice.

We had also found areas that the provider should improve on during our first inspection. The provider submitted further evidence for this focussed inspection to show how improvements had been made in these areas.

- The provider sent us evidence of two incoming clinical correspondence audits, which demonstrated how the frequency of their auditing process had been increased.
- The provider sent us an updated standard operating procedure for the security of the dispensary. This detailed how items within the dispensary were only accessible to authorised staff.
- The provider sent us a log of near miss incidents recorded in the dispensary. This was used to detect trends and ensured that appropriate actions were taken to minimise the risk of certain errors occurring again.