

Merton Lodge Surgery

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?

Requires improvement



Summary of findings

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3
Areas for improvement	4

Detailed findings from this inspection

Our inspection team	5
Background to Merton Lodge Surgery	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7
Action we have told the provider to take	8

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced desk based follow up inspection on 14 June 2017 to follow up concerns we found at Merton Lodge Surgery on 18 February 2016. Overall the practice is rated as good.

Our key findings across the areas we inspected were as follows:

- Risks to patients were not always assessed and well managed. We found that where risks had been identified following a fire risk assessment undertaken and action was required, no remedial action had been taken.

- The practice had revised processes in place since our last inspection to ensure the safe handling, security and tracking of blank prescription pads and forms within the practice when transferred from the main stock to prescribers.
- The practice had installed a door entry system to the entrance to the dispensary for security purposes to ensure access was restricted to ensure the safe storage and security of medicines.

The areas where the provider must make improvements are:

- Ensure that where risks to the safety of patients and others have been identified, appropriate action is taken to mitigate those risks.

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 requires improvement for providing safe services.

We carried out an announced desk based follow up inspection on 14 June 2017 to follow up concerns we found at Merton Lodge Surgery on 18 February 2016. Overall the practice is rated as good.

Our key findings across all the areas we inspected were as follows:

- The practice revised processes in place since our last inspection to ensure the safe handling, security and tracking of blank prescription pads and forms within the practice when transferred from the main stock to prescribers.
- We found that where actions to mitigate risks had been deemed necessary following a fire risk assessment being carried out that no such action had been taken.
- The practice had installed a door entry system to the entrance to the dispensary for security purposes to ensure access was restricted to ensure the safe storage and security of medicines.

Requires improvement



Summary of findings

Areas for improvement

Action the service **MUST** take to improve

- Ensure that where risks to the safety of patients and others have been identified, appropriate action is taken to mitigate those risks.

Merton Lodge Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Merton Lodge Surgery

Merton Lodge Surgery provides primary medical care for approximately 7,500 patients living in the small market town of Alford and surrounding area. It is located some 36 miles from the City of Lincoln and 7 miles from Mablethorpe.

The service is provided under a General Medical Services contract with Lincolnshire East Clinical Commissioning Group. The practice has a higher than average distribution of patients aged between 50 and 79 years of age with an even distribution of male/female patients. It has a lower than average number of younger people on the patient list.

It is a dispensing practice, and dispenses to 40% of its patients. The practice is open from 8am until 6.30pm Monday to Friday. The practice provides extended opening hours between 6.30pm and 7pm Monday to Friday. The practice offers on-line services for patients such as on-line appointment booking, ordering repeat prescriptions and viewing patient summary care records.

The practice employs three GP partners and a team of nurse practitioners, practice nurses, and healthcare assistants. They are supported by a team of dispensers, receptionists, administration staff and a practice manager.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of; the treatment of disease, disorder and injury; diagnostic and screening procedures; family planning, maternity and midwifery services and surgical procedures.

The practice has an active patient participation group (PPG) who meet on a regular basis.

When the surgery is closed GP out-of hours services are provided by provided by Lincolnshire Community Health Services NHS Trust which can be contacted via NHS111.

Why we carried out this inspection

We carried out a desk based inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

How we carried out this inspection

Before carrying out this inspection, we requested information from the practice to demonstrate the actions they had taken as a result of our inspection on 18 February 2016. This information included:

- A copy of policies and procedures in place in relation to the security of blank prescriptions. Copies of records to show evidence of how blank prescriptions are tracked throughout the practice.

Detailed findings

- Photographic evidence of where blank prescriptions are stored.
- Photographic evidence of the access into the dispensary area.
- Evidence of actions taken as a result of the fire risk assessment carried out in March 2015.

We then reviewed this information during a desk based follow up inspection on 14 June 2017.

Are services safe?

Our findings

Following an announced comprehensive inspection on 18 February 2016, the practice was rated as 'requires improvement' for being safe. For example:

- The practice did not have a system in place to track blank prescriptions throughout the practice and monitor their use and identify if forms had been lost or stolen. Forms were not stored securely in line with national guidance. Blank prescription forms were kept in a stationary cupboard to which all staff members had access.
- Access to the dispensary was not restricted and all members of staff had a way to access the dispensary regardless of their role at the practice. As a result, we were not assured that medicines were only accessible to authorised staff.
- Although we found that the practice had undertaken a risk assessment in such areas as fire safety, it was evident that in some cases no action had been taken to mitigate identified risk. Likewise we saw that a fire risk assessment had been completed in March 2015 which identified risks that required immediate actions to be taken. No action had been taken to mitigate these risks.

Following our announced desk based review on 14 June 2017, the practice provided evidence which included

photographic evidence of a door entry system which had been installed following our last inspection to the entrance to the dispensary. This was installed for security purposes to ensure access was restricted to the dispensary to ensure the safe storage and security of medicines.

The practice provided evidence of a prescription security protocol which had been reviewed in April 2017. Photographic evidence was also provided to show where blank prescriptions were stored securely in a lockable cupboard. We were also provided with records to show that there was a process in place for recording receipt of blank prescriptions into stock and also for transferring blank prescriptions from the main stock to prescribers for use.

The practice provided evidence of an action plan carried out as a result of a fire risk assessment carried out in March 2015 which had identified risks that required immediate actions to be taken. Although some actions had been completed in relation to fire safety, this action plan told us that a fixed wire test of the electrical hard wiring system in the premises had still not been completed. This action plan also told us that actions required in relation to defective fire doors had not been actioned following quotations received in 2016 and that the practice were in the process of scheduling work to be completed following our desk based review. Therefore, the practice had not ensured appropriate action had been taken to mitigate these risks.

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
Diagnostic and screening procedures	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>The practice did not have systems in place to properly assess and mitigate against risks including risks associated with fire safety.</p> <p>This was in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	