

The Parkview 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?		Good	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		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 The Parkview Surgery on 16 June 2016. The overall rating for the practice was good. The full comprehensive report on the June 2016 inspection can be found by selecting the 'all reports' link for The Parkview Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 13 July 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 16 June 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

At the inspection on 16 June 2016, the practice was rated overall as 'good'. However, within the key question safe, areas were identified as 'requires improvement', as the practice was not meeting the legislation around ensuring

adequate arrangements were in place to ensure care and treatment to patients was provided in a safe way in relation to: medicines management; the provision of medical equipment; and in ensuring patients were fully protected against the risks associated with the recruitment of staff. There were deficiencies in the stocking of emergency medicines and prescription security; in ensuring clinical items and equipment were up to date; and in the recording of recruitment information, in particular in ensuring the documentation of appropriate pre-employment checks. The practice was issued requirement notices under Regulation 12, Safe care and treatment, and under Regulation 19, Fit and proper persons employed.

Other areas identified where the practice was advised they should make improvements with the key question of safe included:

- Ensure all staff are aware of the practice specific policy on safeguarding of vulnerable adults.
- Ensure the completion of action already initiated of Disclosure and Barring Scheme (DBS) checks for staff who carry out chaperoning duties, or risk assess the need and put in place mitigating arrangements.

Summary of findings

- Carry out and record monthly water temperature checks, identified as necessary as a result of the latest legionella risk assessment of the practice.
- Review vaccine cold storage processes to ensure they conform to Public Health England guidance regarding packaging.
- Arrange for regular fire evacuation drills to be completed and documented.

At our July 2017 inspection we reviewed the practice's action plan submitted in response to our previous inspection and a range of supporting documents which demonstrated they are now meeting the requirements of Regulation 12, Safe care and treatment, and Regulation 19, Fit and proper persons employed, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The practice also demonstrated improvement in the other areas identified in the report from June 2016 which did not affect ratings. These improvements have been documented in the safe section, showing how the registered person has demonstrated continuous improvement since the full inspection.

Areas identified at the June 2016 inspection where the practice was advised they should make improvements within other key questions of effective and caring included:

- Put in place a documented induction programme for all staff to monitor progress and record the completion of the induction process; and

- Review the system for the identification of carers to ensure all carers have been identified and provided with support.

At our July 2017 inspection we found there was now a documented induction programme in place and, in relation to recently recruited staff, a record of their completion of the induction process was on their personnel files.

Since the previous inspection the practice had taken further action to proactively identify and support carers. The practice had identified now identified 155 patients as carers (just above 2.5% of the practice list).

However, there were also areas of practice where the provider needs to make improvements. In particular the provider should:

- Ensure the policy for reporting when vaccination fridge temperatures varied from the allowable range was strictly adhered to in all cases.
- Dispose of out of date medical items when new items are purchased to replace them.

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.

Concerns identified at our previous inspection of June 2016 had been addressed in most respects.

- Appropriate arrangements were in place for the management of emergency medicines and all recommended medicines were now included in the emergency medicines kit.
- The practice now kept prescriptions securely in all respects. Records were kept of serial numbers of batch numbers of prescriptions to ensure full monitoring of their use.
- The majority of medical equipment was up to date although two expired items had not been disposed of when new replacement equipment was purchased.
- There were appropriate recruitment policies and procedures in place including arrangements for pre-employment checks.
- All staff were aware of the practice specific policy on safeguarding of vulnerable adults.
- All staff who carried out chaperoning duties had undergone Disclosure and Barring Scheme (DBS) checks.
- The practice carried out and recorded monthly water temperature checks, identified as necessary as a result of the last legionella risk assessment of the practice.
- Vaccine cold storage processes had been reviewed to ensure they conformed to Public Health England guidance regarding packaging. However, the vaccine temperature had on one occasion recently exceeded the required range and there was no evidence of action taken.
- Regular fire evacuation drills were completed and documented.

Good



Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



Are services caring?

The practice is rated as good for providing caring services.

Good



Summary of findings

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Are services responsive to people's needs?

The practice is rated as good for providing responsive services.

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



Are services well-led?

The practice is rated as good for providing well-led services.

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

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.

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



People with long term conditions

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

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



Families, children and young people

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

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

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).

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

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.

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



Summary of findings

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).

This rating was given following the comprehensive inspection in June 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- Ensure the policy for reporting when vaccination fridge temperatures varied from the allowable range was strictly adhered to in all cases.
- Dispose of out of date medical items when new items are purchased to replace them.

The Parkview Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector. The team included a GP specialist adviser.

Background to The Parkview Surgery

The Parkview Surgery provides primary medical services through a General Medical Services (PMS) contract within the London Borough of Hillingdon. The practice is part of NHS Hillingdon Clinical Commissioning Group. The services are provided from a single location to around 6000 patients. The practice serves a diverse ethnic, cultural, demographic and socio-economic mix and has broadly average numbers of patients in all age groups. In the last two years there has been an increase in Polish patients registering at the practice. One of the GPs is Polish.

At the time of our inspection, there were three permanent GPs (one male and two female) and a regular locum GP employed at the practice who normally provide 22.5 clinical sessions per week. The practice also employed a practice manager, two part-time practice nurses, a practice administrator, and four reception staff.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8am to 1pm and 2.30pm to 6.30pm Monday to Friday. Extended hours GP clinics are offered by appointment on Tuesday between 6.30pm – 7pm and two separate clinics on Thursdays between 7.15am - 8am and 6.30pm – 7.15pm. There is also an

extended hours nurse clinic on Thursday between 6.30pm – 7.30pm. In addition to pre-bookable appointments, urgent appointments are also available for people that needed them.

There are arrangements to ensure patients received urgent medical assistance when the practice was closed. Out of hours services are provided by a local provider. Patients are provided with details of the number to call.

The practice is also part of a network of eight local practices which allows it to offer services such as week-end cover for over 75 year old patients, a trained Chronic Obstructive Pulmonary Disease (COPD) nurse and an integrated care plan co-ordinator to improve care for patients with chronic conditions and at risk of admission to hospital.

The practice is registered to carry on the following regulated activities:

Diagnostic and screening procedures

Family Planning

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

Why we carried out this inspection

We undertook a comprehensive inspection of The Parkview Surgery on 16 June 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

Detailed findings

requires improvement for providing safe services. The full comprehensive report following the inspection in June 2016 can be found by selecting the 'all reports' link for The Parkview Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of The Parkview Surgery on 13 July 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.

- Reviewed action taken to address areas where improvements were necessary in response to our previous inspection in June 2016.
- Looked at a selection of records, practice policies, procedures and information relevant to the areas of follow up.

Please note that when referring to information throughout this report, this relates to the most recent information available to the CQC at that time.

How we carried out this inspection

During our visit we:

Are services safe?

Our findings

At our previous inspection on 16 June 2016, we rated the practice as requires improvement for providing safe services as there were deficiencies in the stocking of emergency medicines and prescription security; in ensuring clinical items and equipment were up to date; and in the recording of recruitment information, in particular in ensuring the documentation of appropriate pre-employment checks regarding proof of identification, references, and registration with the appropriate professional body.

Other areas identified where the practice was advised they should make improvements in providing safe services included the need to ensure all staff were aware of the practice specific policy on safeguarding of vulnerable adults; ensuring the completion of action already initiated of Disclosure and Barring Scheme (DBS) checks for staff who carried out chaperoning duties, or risk assess the need and put in place mitigating arrangements; carrying out and recording monthly water temperature checks, identified as necessary as a result of the latest legionella risk assessment of the practice; review vaccine cold storage processes to ensure they conform to Public Health England guidance regarding packaging; and arranging for regular fire evacuation drills to be completed and documented.

The provider had addressed these concerns in most respects when we undertook a follow up inspection on 13 July 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

At our June 2016 inspection there was a practice specific policy on safeguarding of vulnerable adults but there was a lack of awareness about the policy and on the day of the inspection. At our latest inspection staff we spoke with were fully aware of the policy and were able to readily locate it on the practice's computer system.

The practice now kept prescriptions securely in all respects. Records were kept of serial numbers of batch numbers of prescriptions to ensure full monitoring of their use.

Since our previous inspection the practice had purchased a new fridge for the storage of vaccines with a computer based monitoring system to ensure temperatures were maintained within the required range. Vaccines stored in

the fridge were now kept in the original packaging as required under Public Health England guidance and not in plastic containers as found at our previous inspection. However, on the day before our latest inspection, the temperature had exceeded the required range and there was no evidence of action taken. On the day of the inspection, the practice raised this as a significant event and contacted the fridge manufacturer who assured them that the temperature breach was not critical and the vaccine stock was not compromised. The practice nevertheless reminded all staff to report to the practice manager or partners immediately if the fridge emitted an audible alert or the temperature varied from the allowable range and to record this in the temperature log book. They undertook to ensure this policy was strictly adhered to in the future.

Disclosure and Barring Scheme (DBS) checks had now been completed for staff who had been trained to carry out chaperoning duties.

The deficiencies in pre-employment documentation found previously had been addressed in most respects and appropriate checks were now recorded on the five personnel files we reviewed. There were some gaps in the paperwork but the practice provided evidence of the required information immediately after the inspection and ensured this was placed on the relevant files.

Monitoring risks to patients

At our previous inspection, although an in-house legionella risk assessment had been completed, the practice had not carried out monthly water temperature checks identified as necessary as a result of that assessment. At our latest inspection monthly checking was now being carried out and we saw the past year's records for this. The practice had also introduced a new legionella policy and following the installation of a new gas boiler and hot water system had arranged an external legionella risk assessment for September 2017.

At our June 2016 inspection we found a number of clinical items in one of the consulting rooms that were out of date. At our latest inspection the majority of equipment was up to date. There were two items which had passed expiry dates alongside up to date items but the practice disposed of these immediately.

Following a fire safety inspection carried out in October 2016, the practice had upgraded its fire extinguisher

Are services safe?

provision. In response to our previous inspection, regular fire evacuation drills were now carried out every 5-6 months and we saw the records that were in place to show evidence of this.

Arrangements to deal with emergencies and major incidents

At our June 2016 inspection we found emergency medicines were easily accessible to staff in a secure area of the practice and all staff knew of their location. All the medicines we checked were in date and stored securely.

However, one of the medicines recommended in national guidance, for severe asthma and severe or recurrent anaphylaxis, was not kept in the emergency kit and there was no documented risk assessment of the reasons for not stocking the medicine excluded.

At our latest inspection appropriate arrangements were in place for the management of emergency medicines and all recommended medicines were now included in the emergency medicines kit.

Are services effective?

(for example, treatment is effective)

Our findings

Please note this is a focused follow up inspection of safe care and treatment under the key question safe. We did not review this key question.

Please refer to the June 2016 comprehensive inspection report for this service that is available on our website at: <http://www.cqc.org.uk/search/services/doctors-gps>

Are services caring?

Our findings

Please note this is a focused follow up inspection of safe care and treatment under the key question safe. We did not review this key question.

Please refer to the June 2016 comprehensive inspection report for this service that is available on our website at: <http://www.cqc.org.uk/search/services/doctors-gps>

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

Please note this is a focused follow up inspection of safe care and treatment under the key question safe. We did not review this key question.

Please refer to the June 2016 comprehensive inspection report for this service that is available on our website at: <http://www.cqc.org.uk/search/services/doctors-gps>

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

Please note this is a focused follow up inspection of safe care and treatment under the key question safe. We did not review this key question.

Please refer to the June 2016 comprehensive inspection report for this service that is available on our website at: <http://www.cqc.org.uk/search/services/doctors-gps>