

St Ann's Medical Centre

Quality Report

Rotherham Health Village
Rotherham
South Yorkshire
S65 1DA

Tel: 01709 375500

Website: www.stannsmedicalcentre.co.uk

Date of inspection visit: 12 December 2017

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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 well-led?

Good



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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at St Ann's Medical Centre on 15 and 16 October 2015 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The overall rating for the practice was good but with requires improvement for safe. We carried out a focused follow up inspection on 21 and 24 June 2016 to confirm that the practice had carried out their plans to meet the legal requirements in relation to the breaches in regulations we identified in our previous inspection. We found there had been some improvements at this inspection. The overall rating for the practice was good with good for safe but with requires improvement for well led as there were areas for improvement relating to governance.

We carried out a focused announced inspection on 27 April 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 21 and 24 June 2016. We found there had been some improvement in governance arrangements although these had not always been effectively implemented and the practice continued to require improvement in well led.

The reports for these inspections can be found by selecting the 'all reports' link for St Ann's Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 12 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 in April 2017. 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.

Improvements to meet regulations had been made since our last inspection in April 2017. Our key findings were as follows:

- There had been improvement in governance arrangements to ensure vaccines were stored safely.

Professor Steve Field CBE FRCP FFPH FRCGP
Chief Inspector of General Practice

St Ann's Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector.

Background to St Ann's Medical Centre

St Anne's Medical Centre is situated within a purpose built surgery in Rotherham Health Village. There are branch surgeries at 240 Kimberworth Park Rd, Kimberworth, Rotherham, S61 3JN and Ridgeway Medical Centre, 14 Ridgeway, Rotherham, S65 3PG. We visited both branch surgeries as part of this inspection.

The practice provides Personal Medical Services (PMS) for 18,451 patients across the three sites in the NHS Rotherham Clinical Commissioning Group (CCG) area.

There are six GP partners, four salaried GPs and three GP Registrars, five of who are male and eight female. There are three nurse practitioners, four practice nurses, three health care assistants and two phlebotomists who all work across the three sites. There is a large administration team who also work across each site led by a practice manager. The practice manager is responsible for all three sites.

The practice is open at the following times across the three sites:

- St Anne's Medical Centre - Reception and surgery opening times are 7am to 6.30pm Monday to Friday.
- Kimberworth – Reception and surgeries are open on Mondays between 8am and 10.30am and 3pm to 8pm. Tuesday to Friday the reception and surgeries are open from 8am to 10.30 and 1pm to 3pm.

- Ridgeway Medical Centre – Reception opening times are 8am to 10.30am and 3pm to 6pm Monday to Friday. Surgery opening times are from 8.10am to 10.30am and 3pm to 5.30pm Monday to Friday.

Patients can access out of hours services by contacting NHS 111.

This practice has been accredited as a GP training practice.

Why we carried out this inspection

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Detailed findings

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requirements in relation to the breaches in regulations that we identified in our previous inspection in April 21076. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Are services well-led?

Good 

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

Our findings

At our previous inspection in April 2107, we rated the practice as requires improvement for providing well-led services as there was a lack of oversight and monitoring by the provider and practice manager to ensure governance systems were fully implemented.

We issued a requirement notice in respect of these issues and found arrangements had improved when we undertook a follow up inspection of the service on 12 December 2017. The practice is now rated as good for being well-led.

Governance arrangements

The practice has employed a new practice manager and deputy practice manager. They were in the process of reviewing policies and procedures and work streams and had made improvements to address shortfalls identified at the last inspection.

At the April 2107 inspection we observed vaccine fridge temperature checks had been recorded consistently however, although this task had been delegated to nursing or reception staff there was no evidence of management monitoring of the effectiveness of these arrangements and staff competence in this area had not been tested. We found in all the records we checked at a branch surgery and main site there had been frequent occasions when the temperatures recorded were outside of the recommended temperatures of 2 to 8 degrees centigrade by one to two degrees. Action had not been taken to ensure the vaccines were compliant with the manufacturer's license and to minimise the risks of the effectiveness of vaccination being compromised. A written policy and procedure to support these arrangements and guide staff was not available.

Following the last inspection the provider told us they had taken immediate action to investigate the shortfalls identified and protect patients. They told us they had contacted the vaccine manufacturers and NHS England and were acting on their advice. They said they had identified fridges where there had been issues and sent these for service and/or repair. New thermometers had been purchased, staff training had commenced and a cold chain policy and procedure was being developed.

Prior to the inspection NHS England Screening and Immunisation team (SIT) confirmed to us the practice had

worked with them and taken action to ensure patients had been offered appropriate vaccinations and to ensure vaccines were stored safely. The practice manager told us they had also discussed all the incidents with manufacturers and they had followed their advice. Records held by SIT and the practice did not identify if all the cold chain incidents identified at our inspection in April 2017 had been reported and acted upon. SIT are continuing to work with the practice to ensure all required action has been taken in relation to cold chain incidents.

The provider had identified areas for improvement following their investigation into the cold chain incidents and developed an action plan which had been implemented and monitored. Records showed the incidents had been discussed at practice partner meetings. Staff we spoke with told us they had been made aware of the incidents and the improvement actions implemented.

The cold chain policy and procedures had been reviewed and implemented. The policy was detailed and included a flow chart to guide and support staff to manage a failure in the cold chain.

We observed records to confirm fridge service and repair had been completed as required. New systems for maintaining fridge temperature monitoring records had been implemented which included electronic records available to all staff for all sites. These records identified the practice manager had reviewed these and the senior nurse had checked the records weekly. The records were highlighted where temperatures had been outside the recommended ranges and recorded actions taken in these instances. We identified a small number of gaps in the new records but these had improved in recent weeks.

The practice manager told us staff had completed in-house training in the new procedures since the last inspection. Although there were no records to support this staff we spoke with confirmed they had received this training. The staff were knowledgeable about the new procedures and their role in maintaining the cold chain. There was evidence four practice nurses who were involved in the immunisation programme had completed online vaccination and immunisation updates since the last inspection. The practice manager told us three health care assistants had completed vaccination and immunisation training at Sheffield University since the last inspection, although evidence of this was only held for one person.