

Weelsby View Health Centre -Drs Chalmers and Meier Quality Report

Weeslby Health Centre Ladysmith Rd, Grimsby. DN32 9SW Tel: 01472 255166 Website: www.drschalmersandmeler.me.uk

Date of inspection visit: 21 February 2017 Date of publication: 14/03/2017

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 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 of this practice on 19 May 2016. A breach of legal requirements was found. After the comprehensive inspection the practice wrote to us to say what they would do to meet the following legal requirements set out in the Health and Social Care Act (HSCA) 2008:

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014:

Fit and proper persons employed

How the regulation was not being met:

Recruitment arrangements did not include all necessary employment checks for all staff.

Regulation 19(3)(a) schedule 3

This inspection was a desk-based review carried out on 21 February 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 19 May 2016. This report covers our findings in relation only to those requirements.

The full comprehensive report on the Month Year inspection can be found by selecting the 'all reports' link for Bartholomew Medical Group on our website at www.cqc.org.uk.

Overall the practice is rated as good.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

At our previous inspection we found that not all clinical staff had received a Disclosure

and Barring Service check and no risk assessment to support the decision, had been undertaken so the practice could not provide complete assurance that all the clinical staff they employed did not pose any potential risk to patients.

We checked and found that the practice now had a system in place to risk assess clinical staff who had not undergone a DBS check. These members of staff had been employed in the practice for many years. For new staff a DBS check would be undertaken.

The risk assessments included the person's name, their role, length of time employed at the practice, whether they had been subject to any criminal convictions, cautions or any investigations by any organisation. Also included was whether a DBS check had been undertaken before and if the person worked with vulnerable adults or children.

Staff are also required to inform the registered person at the practice of any changes to their personal circumstances, health, and criminal or otherwise, which may affect their suitability for continued employment. All staff have a clause in their contract for criminal offences in their contract and must report any incident.

Are services well-led?

At our previous inspection of 19 May 2016 we rated the practice as good for well led. It was noted that the practice did not have an established Patient Participation Group. The practice remains as being rated as good for well led.

We looked at information provided by the practice to show they were actively looking to find patients to form a Patient Participation Group. However whilst the practice have a video showing in their waiting room several times a day and also asking patients if they would be interested in forming a Patient Participation Group they have not yet been successful. However they are continuing to try to get this up and running. Good

Good



Weelsby View Health Centre -Drs Chalmers and Meier

Detailed findings

Our inspection team

Our inspection team was led by:

An inspector carried out this desk based inspection.

Background to Weelsby View Health Centre - Drs Chalmers and Meier

Weelsby View Health Centre, Drs Chalmers and Meier practice is in a purpose built building on Ladysmith Road in Grimsby. The building is shared with a number of other GP practices. Drs Chalmers and Meier's practice provides Personal Medical Services to approximately 4,500 patients living in the Hainton and Heneage area of North East Grimsby.

The practice has two male GP partners. The practice has three practice nurses and a healthcare assistant. They are supported by a team of management, reception and administrative staff.

The practice is in a relatively deprived area and has a higher than average proportion of its population who are classed as deprived. It also has a higher than average number of patients who have a long-standing health condition. The practice is open between 8.00am and 6.30pm Monday to Friday. It provides appointments between 8.00am to 12.00am, and 4.00pm to 6.30pm on Monday, Tuesday, Wednesday and Friday and between 8.00am to 12.00am on Thursday. Extended hours appointments are offered

between 6.30pm and 7.45pm on a Monday. The practice provides Out of Hours services from 6.30pm through the Grimsby Area Primary Care Emergency Centre.

The practice also offers enhanced services including childhood vaccination and immunisation scheme, extended hours, timely diagnosis for people with dementia, improving patient online access, learning disabilities, rotavirus and shingles immunisations and unplanned admissions

Why we carried out this inspection

We undertook a comprehensive inspection of Weeslby Health Centre on 19 May 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Weeslby Health Centre on our website at www.cqc.org.uk.

We undertook a follow up desk based focused inspection of Weeslby Health Centre on 21 February 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.

Detailed findings

How we carried out this inspection

We carried out a desk-based focused inspection of Weeslby Health Centre on Day Month Year. This involved reviewing evidence that:

- The practice was following systems and processes to ensure that all the necessary employment recruitment checks were undertaken.
- The practice was actively seeking patients to form a Patient Participation Group.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time

Are services safe?

Our findings

At our previous inspection on 19 May 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of recruitment checks were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 21 February 2017Day Month Year. The practice is now rated as good for providing safe services.

We checked and found that the practice now had a system in place to risk assess clinical staff who had not undergone a DBS check. These members of staff had been employed in the practice for many years. For new staff a DBS check would be undertaken. The risk assessments included the person's name, their role, length of time employed at the practice, whether they had been subject to any criminal convictions, cautions or any investigations by any organisation. Also included was whether a DBS check had been undertaken before and if the person worked with vulnerable adults or children.

Staff are also required to inform the registered person at the practice of any changes to their personal circumstances, health, and criminal or otherwise which may affect their suitability for continued employment. All staff have a clause in their contract for criminal offences in their contract and must report any incident.

Are services well-led?

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

Our findings

At our previous inspection of 19 May 2016 we rated the practice as good for well led. It was noted that the practice did not have an established Patient Participation Group. The practice remains as being rated as good for well led. We looked at information provided by the practice to show they were actively looking to find patients to form a Patient Participation Group. However whilst the practice have a video showing in their waiting room several times a day and also asking patients if they would be interested in forming a Patient Participation Group they have not yet been successful. However they are continuing to try to get this up and running.