

# Walm Lane Surgery

### **Quality Report**

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Date of inspection visit: 29 September 2017 Date of publication: 06/12/2017

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	

## 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 Walm Lane Surgery on 30 November 2016. The overall rating for the practice was good, with a rating of requires improvement in the safe domain. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Walm Lane Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 29 September 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 30 November 2016. This report covers our findings in relation to those requirements and additional improvements made since our last inspection.

Overall, the practice is rated as Good.

Our key findings were as follows:

• The practice had a fire alarm installed on the premises.

- There were systems in place to ensure disposable equipment was now in date.
- Suitable sharps bins were now in place in all consultation rooms.
- All vaccination fridges had back up thermometers in
- There were processes in place to monitor the use of prescription pads and sheets.
- All emergency medicines were now available.
- Carers registered with the practice had remained at less than 1% of the patient list.

The areas where the provider should make improvements are:

 Consider reviewing processes in place to identify carers in order to ensure that these patients are appropriately identified and offered support.

**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.

- The practice had installed a fire alarm on the premises.
- There were processes in place to monitor the use of prescription pads and sheets.
- Suitable sharps bins were now available in all consultation rooms.
- All vaccination fridges had back up thermometers in place.
- All emergency medicines were now available.
- There were systems in place to ensure disposable equipment was now in date.

Good





# Walm Lane Surgery

**Detailed findings** 

## Our inspection team

Our inspection team was led by:

The inspection was undertaken by a CQC lead inspector.

## Background to Walm Lane Surgery

Walm Lane Surgery provides primary medical services in Brent to approximately 7,900 and is part of Brent Clinical Commissioning Group (CCG). The practice population is in the fifth most deprived decile in England. The percentage of children registered at the practice who are living in income deprived households is 25%, which is similar to the CCG average of 27%. The practice has a higher than average proportion of patients aged between 20 and 49 years, and a lower proportion of patients aged between 10 and 19 years and aged 50 years and older.

The practice team at the surgery is made up of two full time female GP partners and one full time male salaried GP. The practice has two part time female nurses and a part time female healthcare assistant. The practice team also consists of a practice manager, three administrators, a notes summariser and eight receptionists. The practice operates under a General Medical Services (GMS) contract and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract).

The practice premises and reception is open between 8:45am and 1pm, and between 3:30pm and 6:30pm Monday to Friday. The practice can be contacted by telephone between 8:45am and 1pm and between 2:45pm and 6:30pm. Appointments are from 9am to 11:30am and

3:50pm to 6pm daily. Extended hours appointments are offered from 6:30pm to 7:10pm on Tuesdays and Wednesdays. In addition to pre-bookable appointments that can be booked in advance, urgent appointments are also available for people who needed them. When the practice is closed patients are directed to the local out-of-hours service.

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

# Why we carried out this inspection

We undertook a comprehensive inspection of Walm Lane Surgery on 30 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good with a rating of requires improvement in the safe domain. The full comprehensive report following the inspection on November 2016 can be found by selecting the 'all reports' link for Walm Lane Surgery on our website at www.cqc.org.uk.

We undertook a follow up desk based focused inspection of Walm Lane Surgery on 29 September 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 Walm Lane Surgery on 29 September 2017. This involved reviewing evidence that:

- Fire alarm systems were in place.
- Sharps bins were available in all consultation rooms.
- Vaccination fridges had back up thermometers.
- All emergency medicines were available.
- Systems were in place to ensure all disposable equipment was in date.
- The number of carers registered with the practice had improved.



## Are services safe?

## **Our findings**

At our previous inspection on 30 November 2016, we rated the practice as requires improvement for providing safe services, as the arrangements in respect of fire safety were not adequate.

These arrangements had improved when we undertook a follow up inspection on 29 September 2017. The practice is now rated as good for providing safe services.

#### Overview of safety systems and process

- At our previous inspection when we checked a sample of the practice's stock of disposable clinical equipment, we found some unopened swabs were out of date. At this inspection, the practice had made improvements by introducing a room audit sheet, which included an extract to check the expiry date of all disposable equipment.
- At our last inspection, we found that the practice did not have sharps bins available for the disposal of sharps contaminated with cytotoxic medicinal products (purple lid bins). At this inspection, the practice had made improvements and these bins were now in place in all the consultation rooms.
- At our previous inspection, we noted that there was only one thermometer fitted to each of the vaccination fridges; with no back up devices should the main thermometers fail. At this inspection, the practice had fitted back-up thermometers to all of the vaccination fridges.

• At our previous inspection, we found that the practice did not have processes in place to monitor the use of blank prescription forms. At this inspection, we found the practice had implemented an effective system to monitor blank prescription sheets. This was by way of a distribution log sheet record for prescriptions, completed by staff and clinicians and double-checked by the practice manager.

#### **Monitoring risks to patients**

• At our previous inspection on 30 November 2016, we found that the procedures in place for monitoring and managing risks to patients and staff safety were not adequate as there was no fire alarm system in place. A fire risk assessment carried out in February 2016 had recommended a fire alarm system which was to be maintained and tested on a weekly basis. At the time of this inspection, there was evidence to show that the practice had arranged for a fire alarm to be installed on the premises in November 2017. The practice subsequently sent us evidence that a fire alarm had been installed in the practice.

#### Arrangements to deal with emergencies and major incidents

• At our last inspection, we found that the practice carried out contraceptive coil fittings but did not keep a stock of one emergency medicine, atropine (a medicine used to treat some types of slow heart rate). The practice added this medicine to their stock of emergency medicines immediately following their last inspection and we saw this during their follow up inspection.