

The Flowers Health Centre

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



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 Flowers Health Centre on 23 March 2016. Although, the overall rating for the practice was good, we found the safe domain required improvements. The full comprehensive report on the 23 March 2016 inspection can be found by selecting the 'all reports' link for The Flowers Health Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 8 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 23 March 2016. This report covers our findings in relation to those requirements and any additional improvements made since our last inspection.

Overall, the practice is now rated as good in the safe domain and good overall.

Our key findings were as follows:

- At our previous inspection on 23 March 2016, we rated the practice as requires improvement for providing safe services, we found that staff had not had the necessary recruitment checks prior to staff commencing work. These arrangements had significantly improved when we undertook a follow up

inspection on 8 February 2017. We reviewed three personnel files and found the practice had undertaken the appropriate recruitment checks prior to staff commencing work.

- At our previous inspection on 23 March 2016, we found that the practice did not maintain a record of actions taken in response to National Patient Safety Alerts (NPSA). in regards to equipment and medication. At this inspection, we found the practice manager maintained a record of each NPSA and what actions the staff had taken.
- At our previous inspection on 23 March 2016, we found staff could not locate the procedures to follow if a needle stick injury occurred and copies of the procedure were not located in areas where this injury may occur. At this inspection, we found staff had reviewed and could locate the policy and posters about the actions to take if an injury occurred were located in the treatment rooms.
- At our previous inspection on 23 March 2016, we found that staff had not always cleaned equipment used for patient care in line with the manufacturer's instructions and had not maintained records to

Summary of findings

monitor the cleaning. At this inspection, we found staff had information about how to clean the equipment following the manufacturer's guidance and staff had kept a record of when it was cleaned.

- At our previous inspection on 23 March 2016, we found the practice had a defibrillator available on the premises and oxygen with adult and children's masks, but we noted that the equipment was only checked to ensure it was in working order once a month. At this inspection, we found staff checked the equipment daily.
- At our previous inspection on 23 March 2016, patients told us that they had difficulty in contacting the practice by telephone. At this inspection, we found the practice had identified issues with the telephone lines, which had been addressed. Prior to this inspection, they had carried out a questionnaire

that asked patients 'do you have a problem getting through on the phone today'. The practice had 17 responses, 12 were completely satisfied, and five stated they got through on the second call.

- At our previous inspection on 23 March 2016, we found that the practice manager could not demonstrate how they ensured that the practice nurses had completed the necessary role specific training and updates. At this inspection, we found the practice manager kept an overview of all role specific training for staff and had ensured the nurses had completed their role specific training. However, we found that the record showed that staff had not completed adult safeguarding training. Following the inspection the practice manager provided us with information to demonstrate staff had completed training

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 had carried out the necessary recruitment checks.
- The practice manager maintained a record of each National Patient Safety Alert and what actions the staff had taken.
- Staff had reviewed and could locate the needle stick policy. Posters about the actions staff needed to take if a needle stick injury occurred were located in the treatment rooms.
- Staff had information about how to clean clinical equipment following the manufacturer's guidance and had recorded when they cleaned the equipment.
- Staff checked the defibrillator and oxygen equipment daily.

Good



The Flowers Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector.

Background to The Flowers Health Centre

The Flowers Health Centre is situated in a purpose built GP premises completed in November 2012.

The practice provides General Medical Services (GMS) for 4,700 patients in the NHS Sheffield Clinical Commissioning Group (CCG) area. The practice is situated in one of the most deprived areas nationally and the practice population has a higher ratio of patients under 30 years of age.

There are three registered GP partners with CQC, one male and two female. There are also two salaried GPs, one male and one female. There are three practice nurses, a health care assistant and apprentice health care assistant. There is a small administration team led by the practice manager.

The practice is open at the following times:

Reception - 8.30am to 12.30pm and 1.30pm to 6pm, except Thursdays when the practice is closed in the afternoon.

Surgeries - 9am to 11.30am and 3.30pm to 5.30pm, except Thursdays when closed in the afternoon.

The practice uses the Sheffield GP Collaborative out of hour's service from 8am to 8.30am and 6pm to 6.30pm when the surgery is closed, outside these times patients access services via the NHS 111 service.

This practice provides training for doctors who wish to become GPs and at the time of the inspection had two doctors undertaking training at the practice.

Why we carried out this inspection

We undertook a comprehensive inspection of The Flowers Health Centre on 23 March 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 for the safe domain. The full comprehensive report following the inspection on 23 March 2016 can be found by selecting the 'all reports' link for The Flowers Health Centre on our website at www.cqc.org.uk.

We undertook a follow up announced focused inspection of The Flowers Health Centre on 8 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.

How we carried out this inspection

During our visit we:

- Spoke with a range of staff (practice manager, two nurses, and two receptionists).
- Reviewed policies, procedures and documents to make a judgement about whether the practice had made improvements.

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

Are services safe?

Our findings

At our previous inspection on 23 March 2016, we rated the practice as requires improvement for providing safe services as we found that staff had not had the necessary recruitment checks. These arrangements had significantly improved when we undertook a follow up inspection on 8 February 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

- At our previous inspection on 23 March 2016, we found that the practice did not maintain a record of actions taken in response to National Patient Safety Alerts (NPSA) regarding equipment and medication. At this inspection, we found that the practice manager maintained a record of each NPSA and what actions the staff had taken. We spoke with two practice nurses, who both confirmed they had regularly received NPSA from the practice manager and the lead GP.

Overview of safety systems and process

- At our previous inspection on 23 March 2016, we rated the practice as requires improvement for providing safe services as we found that staff had not had the necessary recruitment checks. These arrangements had significantly improved when we undertook a follow up inspection on 8 February 2017. We reviewed three personnel files and found the practice had undertaken the appropriate recruitment checks prior to employment. For example, proof of identification, qualifications, registration with the appropriate professional body and the appropriate checks through

the Disclosure and Barring Service. All had two references apart from one member of staff where the practice manager had sought two but had only been able to obtain one due to the member of staff's age.

- At our previous inspection on 23 March 2016, we found staff could not locate the procedures for a needle stick injury and copies were not located in areas where this injury may occur. At this inspection, we found staff had reviewed and could locate the policy and posters about the actions to take if an injury occurred were located in the treatment rooms.
- At our previous inspection on 23 March 2016, we found that staff had not always cleaned equipment used for patient care in line with the manufacturer's instructions and had not maintained records to monitor the cleaning. At this inspection, we found that staff had information about when to clean the equipment following the manufacturer's guidance and had a up to date record of when it was cleaned.

Arrangements to deal with emergencies and major incidents

- At our previous inspection on 23 March 2016, we found the practice had a defibrillator available on the premises and oxygen with adult and children's masks, whilst we did not identify any issues with the equipment, we noted that the equipment was only checked to ensure it was in working order once a month. The Resuscitation Council (UK) guidance states the frequency of checks will depend upon local circumstances but should be at least weekly. At this inspection we found staff had checked the equipment daily.