

# St. Andrew's Medical Practice

## Inspection report

Sensier House  
St. Andrews Lane  
Spennymoor  
DL16 6QA

Tel: 01388817777

Date of inspection visit: 26 August 2020

[www.standrewsmedicalpracticespennymoor.nhs.uk](http://www.standrewsmedicalpracticespennymoor.nhs.uk) Date of publication: 12/10/2020

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 location

Good



Are services safe?

Good



# Overall summary

We carried out an announced comprehensive inspection at St Andrews Medical Practice on 14 May 2019 as part of our inspection programme. The full comprehensive report on the May 2019 inspection can be found by selecting the 'all reports' link for St Andrews Medical Practice on our website at [cqc.org.uk](http://cqc.org.uk)

The practice was rated as good overall, however We rated the domain of safe as requires improvement because:

- Patient specific directions (PSDs) did not meet legal requirements .
- The practice did not have an effective system in place to monitor the temperature of the dispensary fridges.
- The practice did not have appropriate systems in place to monitor controlled drugs.

This inspection was a desk-based review carried out on 28 August 2020. A site visit was not undertaken due to Covid-19, the provider has furnished us with evidence, and we have had a conversation with them to discuss the evidence they have sent us.

Our findings were as follows:

- The practice is now using a new template for patient specific directions (PSDs). This is completed by the GP prior to the appointment that the patient attends with the health care assistant.
- The practice provided documentation to show that the temperature of the fridges was being recorded.

- The practice has amended their controlled drugs policy and procedure and have appropriate systems in place.

There were also areas noted in the previous inspection where the practice should make improvements:

- Continue to review the immunisation status of staff.
- Review the management of controlled stationery having due regard to national guidance.
- Review the training needs of each staff role and monitor refresher training as appropriate.
- The practice provided documentation to show that there is a matrix for the status of staff immunisations.
- The practice has developed a document which ensures the security of prescriptions (FP10s) Records have been made to show the movement of FP10s at every stage from their ordering to their destruction.
- The practice provided documentation to show that there is a matrix in place to monitor staff training.

Since the previous inspection the practice has employed a nurse manager who is overseeing the clinical team, providing clinical supervision and support.

They have also employed a dispensary advice service to support the development of the dispensing team (who were both new to the role at the time of the last inspection).

## Our inspection team

This review was carried out by a CQC inspector. Because of the current Covid 19 pandemic situation a site visit was

not undertaken, however the provider submitted to CQC evidence that gave assurances that action had been taken in relation to the identified shortfalls from the previous inspection.

## Background to St. Andrew's Medical Practice

St Andrews Medical Practice provides services to around 11,570 patients and is located at St Andrew's Lane, Spennymoor, Co Durham, DL166QA. The provider is registered with CQC to deliver the following Regulated Activities: diagnostic and screening procedures; maternity and midwifery services; treatment of disease, disorder or injury; family planning; and surgical procedures.

St Andrew's Medical Practice is situated in a purpose-built building with full disabled access. The practice offers dispensing services to patients who live more than one mile (1.6km) from their nearest pharmacy. The practice

has five GP partners (three male and two female). There are four advanced nurse practitioners, an advanced paramedic practitioner, two practice nurses, and three health care assistants. There is a practice manager and assistant practice manager. There are 12 staff who undertake administration duties and two dispensing staff. The practice hosted first, second and third year medical students.

The practice is part of NHS Durham Dales and Sedgefield clinical commissioning group (CCG). It provides services based on a Personal Medical Services (PMS) contract agreement for general practice.

This section is primarily information for the provider

# Requirement notices

## Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
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