

Guiseley and Yeadon Medical Practice

Quality Report

Yeadon Health Centre
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Yeadon
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West Yorkshire
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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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Summary of this inspection

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Guiseley and Yeadon Medical Practice on 23 November 2016. We focused our inspection at the main site in Yeadon, however we also visited the branch site in Guiseley as part of our inspection. The overall rating for the practice was good. However; we rated the practice as requires improvement for providing safe care. The full comprehensive report on the inspection can be found by selecting the 'all reports' link for Guiseley and Yeadon Medical Practice on our website at www.cqc.org.uk.

This inspection was a desk based review carried out on 28 March 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the issues that we identified in our previous inspection on 23 November 2016. This report covers our findings in relation to those requirements.

The practice has now met the legal requirements in the key question of safe and is now rated as good.

Our key findings were as follows:

- The practice had held a meeting in February 2017 in which all significant events from the previous 12 months were discussed
- The practice had contacted patients with a written apology as a result of significant events.
- The practice had introduced a recruitment checklist to ensure all relevant checks were carried out prior to confirmation of job offer.
- The practice had scheduled appraisals for all staff and these were due to be completed by May 2017.

We found one area where the provider should make improvements:

- Deliver the timetable in place for staff appraisals in order to improve the support provided to staff to carry out their duties.

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?

This desk top review was conducted to review issues that were found at the comprehensive inspection carried out on 23 November 2016. The issues at the previous inspection included:

- Staff understood their responsibilities to raise concerns, and to report incidents and near misses. However; when things went wrong reviews and investigations were not thorough enough and lessons learned were not communicated widely enough with relevant staff.
- Patients did not always receive a verbal and written apology as a result of incidents and events.
- The practice had a recruitment policy in place; however one of the staff files we reviewed during the inspection did not contain references.

At this desk top review conducted on 28 March 2017 we found:

- The practice had held a meeting in February 2017 in which all significant events from the previous 12 months were discussed.
- The practice had contacted patients with a written apology as a result of significant events.
- The practice had introduced a recruitment checklist to ensure all relevant checks were carried out prior to confirmation of job offer.
- The practice had scheduled appraisals for all staff and these were to be completed by May 2017.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- Deliver the timetable in place for staff appraisals in order to improve the support provided to staff to carry out their duties.

Guiseley and Yeadon Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector conducted this desk top review.

Background to Guiseley and Yeadon Medical Practice

Guiseley and Yeadon Medical Practice is located in Yeadon Health Centre, South View Road, Yeadon, Leeds, West Yorkshire, LS19 7PS. The practice also has a branch site, Netherfield Road Surgery which is located at 10 Netherfield Road, Guiseley, LS20 9HE.

The practice is situated within the Leeds West Clinical Commissioning Group (CCG) and is registered with the Care Quality Commission (CQC) to provide primary medical services under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice serves a population of approximately 11,424 patients and is classed as being in one of the lesser deprived areas of Leeds.

Both sites are open from 8am until 6.30pm Monday to Friday; appointments are available from 8.10am until 5.45pm daily. The practice also works with two other local practices to provide an extended hours hub service from 5pm until 8pm Monday to Friday and from 8am until 4pm on Saturday and Sunday.

When the practice is closed out-of-hours services are provided by Local Care Direct, which can be accessed via the surgery telephone number or by calling the NHS 111 service.

The service is provided by four GP partners (one male and three female). The partners are supported by four salaried GPs (two male and two female), an advanced nurse practitioner, four practice nurses, a health care assistant and a phlebotomist. There was an experienced team of administrative and reception staff working alongside the clinical team.

Why we carried out this inspection

We undertook a comprehensive inspection of Guiseley and Yeadon Medical Practice on 23 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 overall. However; we rated the practice as requires improvement for providing safe care. The full comprehensive report following the inspection on 23 November 2016 can be found by selecting the 'all reports' link for Guiseley and Yeadon Medical Practice on our website at www.cqc.org.uk.

We undertook a follow up desk based inspection of Guiseley and Yeadon Medical Practice on 28 March 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 Guiseley and Yeadon Medical Practice on 28 March 2017. This involved reviewing the following evidence that the practice had submitted :

- Documented minutes of a significant event meeting, clearly outlining action taken and learning points.
- Three examples of letters sent to patients as a result of significant events. The letters contained an explanation and apology.
- A staff appraisal timetable, giving specific dates when each staff member would have their review.
- The practice recruitment checklist

Are services safe?

Our findings

When we inspected the practice in November, we rated the practice as requires improvement for providing safe services. The desk based inspection on 28 March 2017 was conducted in order to review the safety issues linked to significant events and incidents, the practice recruitment processes and staff appraisals. During this review we found that the practice had addressed all of the concerns previously raised. The practice is now rated as good for providing safe services.

Safe track record and learning

The practice submitted minutes from a significant event meeting held in February 2017. A total of nine significant events were discussed during the meeting and each had documented action taken and learning. For example; an incident had occurred where a urine sample had been dropped into the practice with only the name recorded. The results of the sample were documented on the wrong patient's clinical records and the wrong patient was contacted with the results. As a result of this the practice had updated the sample form to ensure date of birth was also recorded. The practice also added an alert on the clinical system to make staff aware of circumstances where two patients had the same name.

We asked for some examples of letters which had been sent to patients following a significant event. We were

provided with three and saw that each of the letters contained an apology, an explanation as to how the event had occurred and reassurance that steps had been put in place to avoid future reoccurrence.

Overview of safety systems and processes

We reviewed a copy of the recruitment checklist outlining the steps the practice would take during the recruitment process. The form included the following points:

- Date Disclosure and Barring Service Check (DBS) requested.
- General Medical Council/Nursing Medical Council Certificate.
- Date references requested, and a note as to whether these had been returned.

The practice had recruited to the role of practice nurse in January 2017. We were able to review the completed recruitment checklist and copies of two references received prior to the practice nurse commencing employment.

As part of this desk based review we also spoke with the Practice Manager who confirmed that staff appraisals had been scheduled to take place and all appraisals would be completed by May 2017. The practice had experienced some issues completing these due to reception staff shortages.