

St George's Medical 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 focussed, desk based inspection at St George's Medical Centre on 12 October 2016. We found the practice to be good for providing safe services and it is rated as good overall.

We had previously conducted an announced comprehensive inspection of the practice on 21 January 2016. As a result of our findings during the visit, the practice was rated as good for being effective, caring, responsive and well led, and requires improvement for being safe; which resulted in a rating of good overall. We found that the provider had breached one regulation of the Health and Social Care Act 2008; Regulation 12(1)(2)(a)(b) (g)(h) safe care and treatment.

The practice wrote to us to tell us what they would do to make improvements and meet the legal requirements. We undertook this focussed inspection to check that the practice had followed their plan and to confirm that they had met the legal requirements.

This report only covers our findings in relation to those areas where requirements had not been met at our

January 2016 inspection. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for St George's Medical Centre on our website at <https://www.cqc.org.uk/location/1-539629350>.

Our key findings across all the areas we inspected were as follows:

- There were appropriate systems in place for the safe storage and management of vaccines.
- A fire risk assessment had taken place within the last 12 months.
- Records showed that staff had undertaken infection prevention and control training.
- The practice was undertaking periodic water temperature monitoring, in accordance with the practice's legionella risk assessment action plan.
- An appropriately signed Patient Specific Direction (PSD) for flu immunisation was on file for the practice's Health Care Assistant.

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.

When we inspected in January 2016, we noted concerns regarding the safe storage of vaccines. In addition, annual fire risk assessments and infection prevention and control training did not take place; and the practice was not undertaking periodic legionella water temperature monitoring. An appropriately signed Patient Specific Direction for influenza immunisations was not on file for the practice's health care assistant. We asked the provider to take action. At this inspection we noted:

- There were appropriate systems in place for the safe storage and management of vaccines.
- A fire risk assessment had taken place within the last 12 months.
- Staff had undertaken infection prevention and control training.
- The practice was undertaking periodic water temperature monitoring, in accordance with the practice's legionella risk assessment action plan.
- Appropriately signed Patient Specific Direction for flu immunisation was on file for the practice's Health Care Assistant.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The practice is rated as good for the care of older people. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

Good



People with long term conditions

The practice is rated as good for the care of people with long term conditions. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

Good



Working age people (including those recently retired and students)

The practice is rated as good for the care of working age people (including those recently retired and students). As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

Good



People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

Good



People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia). As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

Good



St George's Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector and included a GP specialist advisor.

and Social Care Act 2008 as part of our regulatory functions. This was because the service was not meeting some legal requirements during our previous visit on 21 January 2016.

The inspection was conducted to check that improvements planned by the practice to meet legal requirements had been made.

Why we carried out this inspection

We carried out an announced desk based inspection of this service on 12 October 2016 under Section 60 of the Health

How we carried out this inspection

During our announced, focused inspection on 12 October 2016, we reviewed a range of information provided by the practice and spoke with the practice manager and two GP partners.

Are services safe?

Our findings

Overview of safety systems and processes

When we inspected in January 2016, we had concerns with the arrangements for managing vaccines. We found that between 29 September 2015 and 21 October 2015; and between 5 November 2015 and 12 January 2016 that records showed the vaccines fridge temperature was recorded respectively at 9.1 °C and 12.1°C which was outside the required range of 2-8 °C. At the time, we noted that the practice had made contact with Public Health England and shortly thereafter we were sent evidence that Public Health England had assessed the fridge's vaccine contents as being safe to use.

At this inspection, we noted that the temperatures of the practice's two vaccines fridges A and B were within the required range and that there was a written protocol on actions to take in circumstances where the recorded temperatures were outside the required range. However, we also noted that fridge A did not have a lock and was located in an unlocked consultation room. In addition, we noted a small build up of ice. A service engineer attended the practice the same day to examine the fridge and shortly after our inspection, we were sent evidence confirming that Fridge A had been replaced with a new lockable fridge.

When we inspected in January 2016, we noted that the practice had not acted on the recommendation of a 2014 legionella risk assessment (for example, it was not undertaking monthly water temperature checks or annual water sampling). We also noted that Patient Specific Directions for administering flu immunisations were not on file for the practice's health care assistant and that some staff had not undertaken infection prevention and control training. In addition, a fire risk assessment had not taken place within the last 12 months.

We asked the provider to take action and at this inspection we noted that:

- A fire risk assessment had taken place in May 2016.
- Records showed that staff had undertaken infection prevention and control training.
- Records showed that the practice was undertaking periodic water temperature monitoring, in accordance with its legionella risk assessment action plan.
- Appropriately signed Patient Specific Direction for flu immunisation were on file for the practice's Health Care Assistant.