

Grafton Medical Partners

Quality Report

Grafton Square Surgery
8b Grafton Square
Clapham
London
SW4 0DE
Tel: 020 7622 5642
Website: www.graftonsquaresurgery.nhs.uk

Date of inspection visit: 14 March 2017
Date of publication: 04/05/2017

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

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	5
Background to Grafton Medical Partners	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of Grafton Medical Partners on 11 May 2016. The overall rating for the practice was Good. However a breach of legal requirements was found relating to the Safe domain. This was because the medicines management procedures did not include recording of vaccine refrigerator temperatures every day that the practice was open. After the comprehensive inspection, the practice submitted an action plan, outlining what they would do to meet the legal requirements in relation to the breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The full comprehensive report can be found by selecting the 'all reports' link for Grafton Medical Partners on our website at www.cqc.org.uk.

This inspection was a focused desk-based review carried out on 14 March 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 11 May 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Following the focussed inspection, we found the practice to be good for providing safe services.

Our key findings were as follows:

- The practice had clearly defined and embedded systems, processes and practices to minimise risks to patient safety. The medicines management procedures were now effective to include recording of vaccine refrigerator temperatures every day that the practice was open. We saw evidence of daily loggings of refrigerator temperatures over a four week period. We also saw a refrigerator temperature monitoring audit over a three month period.

We also reviewed the areas we identified where the provider should make improvements:

- Since the initial inspection the practice had reviewed their significant event process. We saw that the significant event policy had been updated. We saw two significant events had been reviewed with learning outcomes.
- The practice had an effective system in place for following up urgent two week referrals made by the practice. We saw evidence that a revised policy had been completed in September 2016.

Summary of findings

- All staff had completed an appraisal annually. We saw evidence of an appraisal log which showed all staff employed for 12 months and longer had an appraisal completed.
- The practice had an effective system for communicating with all staff. We saw evidence of detailed minutes from clinical and all staff meetings.
- All staff had access to regular mandatory training to be able to respond to emergencies, including annual basic life support training and fire safety training. We saw certificates confirming staff had received training.
- There was clear staffing structure, we saw evidence of a management structure diagram detailing who the partners and practice managers were.
- The practice had a process in place to review bookable appointments for patients on demand. The practice had installed a new phone system, which facilitated automated booking of appointments, they also had a number of appointments bookable in advance. In addition a GP was returning from leave, and would now do all their sessions at Grafton Square surgery, which would increase the capacity for bookable appointments.

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 clearly defined and embedded systems, processes and practices to minimise risks to patient safety. The practice had been consistently checking fridge temperatures.

Good



Grafton Medical Partners

Detailed findings

Our inspection team

Our inspection team was led by:

This desk-based follow-up inspection was conducted by a CQC inspector.

Background to Grafton Medical Partners

Grafton Medical Partners is located in Clapham Common in the London Borough of Lambeth. The practice serves approximately 5300 people living in the local area. The practice, known as Grafton Square Surgery is one of four practices run by Grafton Medical Partners; the other three practices are within Wandsworth CCG.

The practice is registered with the CQC for the following regulated activities Diagnostic and screening procedures; Maternity and midwifery services and Treatment of disease, disorder or injury. The practice population is in the fifth least deprived decile in England. The Ethnicity estimate is 6.0% mixed, 5.9% Asian, 15.9% black, 1.8% other non-white ethnic groups. The practice population of those of working age is above local and national averages at 74%, and the number of older people registered at the practice is lower than local and national averages; 7% of patients are over the age of 65.

The practice operates from a recently converted residential premises. The practice is based over two floors with disabled access to treatment and consulting rooms on the ground floor. The consulting room on the first floor is accessed via stairs. The practice has access to three doctors' consultation rooms and one nurse consultation room. The practice team at the surgery is mainly partner delivered care made up of two part time GP partners, one

male and one female and one part time female salaried GP. The nursing team consists of a full time female practice nurse with support from other practice nurses in the group where required. The practice provides 17 clinical sessions per week. The practice also employs a phlebotomist and health care assistant. The administrative team includes a part-time practice manager, a full time office manager and five reception staff, one secretary, and one administrative staff member. The practice team supporting all the Grafton Medical Partners practice sites also includes an IT support worker, a performance manager, an assistant practice manger, a practice administrator, a chief operating officer and a pharmacist.

Patients were able to access a range of services offered across the three Grafton medical Partners sites in Wandsworth CCG, as well as at this practice in Lambeth. The practice operates under a Personal Medical Services (PMS) 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 is a training practice for trainee GPs and provides teaching for medical students. The practice reception and telephone lines are open from 8am to 8pm Monday to Wednesday, 8am to 7pm Thursday to Friday and 9am to 12.30pm on Saturday. Appointments are available between 8.30am and 11.30am every morning and 3pm and 7pm every afternoon. Extended hours surgeries are offered from 6.30pm to 8pm Monday to Thursday and 9am to 12.30pm on Saturday.

Why we carried out this inspection

We undertook a comprehensive inspection of Grafton Medical Partners on 11 May 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory

Detailed findings

functions. The practice was rated as good overall and requires improvement in the safe. The full comprehensive report following the inspection on 11 May 2016 can be found by selecting the 'all reports' link for Grafton Medical Partners on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Grafton Medical Partners on 14 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.

We inspected the practice against one of the five questions we ask about services: is the service safe.

How we carried out this inspection

We carried out a desk-based focused inspection of Grafton Medical Partners on 14 March 2017. This involved reviewing evidence that:

- Medicines management procedures were effective.
- Systems were in place for reporting and recording significant events and systems for monitoring actions taken to improve safety in the practice.
- There was an effective system in place for following up urgent two week referrals made by the practice.
- Staff had appraisals completed annually.
- Relevant staff had completed their required role specific training.
- Policies and procedures had been updated.
- Effective communication with all staff was occurring and being documented.
- Staff had access to regular mandatory training to be able to respond to emergencies, including annual basic life support training and fire safety training.
- Staffing structures were clearly defined.
- Provisions of bookable appointments had been made for patients on demand.

Are services safe?

Our findings

At our previous inspection on 11 May 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of medicines management procedures were not effective to include the recording of vaccine refrigerator temperatures every day that the practice was open.

These arrangements had significantly improved when we undertook a follow up inspection 14 March 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

During the initial inspection on 11 May 2016 we found that the practice's process for medicines management procedures was not effective, as the practice had not been recording vaccine refrigerator temperatures every day that the practice was open.

During the follow-up inspection the practice provided us with daily loggings of refrigerator temperatures over a four week period. We also saw a refrigerator temperature monitoring audit over a three month period.