

The Northern 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

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	5

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of the practice on 14 April 2015, when we found breaches of legal requirements.

After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements in relation to the breaches of regulations 12 (2) (g) and 12 (2) (h) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We undertook this focussed inspection on 26 November 2015 to check that they had followed their plan and to confirm that they now met the legal requirements. This report covers our findings in relation to those requirements.

We found that the practice had taken appropriate action to meet the requirements of the regulations.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for the Northern Medical Centre on our website at www.cqc.org.uk.

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 taken appropriate and introduced procedural changes to address the issues found at our comprehensive inspection in April 2015.

- The practice had revised its systems with the introduction of a written policy to ensure that checks of emergency medicine stocks were logged to allow effective monitoring.
- The practice had introduced written policies for general and clinical waste management.
- Clinical waste was stored away from areas which patients could access prior to removal and disposal.
- The practice had introduced cleaning protocols and schedules for medical equipment, and cleaning was done in accordance with the manufacturer's instructions.

Good



The Northern Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was made up of two inspectors.

Why we carried out this inspection

We had previously carried out a comprehensive inspection of the practice on the 14 April 2015 and found that it was not meeting some legal requirements associated with the Health and Social Care Act 2008 and regulations made under that act. From April 2015, all health care providers were required to meet certain Fundamental Standards, which are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. One of the Fundamental Standards relates to Safe care and treatment and is covered by regulation 12.

At the comprehensive inspection, we found that the practice was failing to meet the requirements of regulations 12 (2) (g) and 12 (2) (h). Patients were not protected from risks associated with a failure to properly and safely manage medicines and a failure to assess the risk of, and to prevent, detect and control the spread of, infections, including those that are health care associated.

Specifically, the practice did not have –

- Suitable arrangements in place to check expiry dates of emergency medicines. (Regulation 12 (2) (g))

- Suitable arrangements for the safe storage of clinical waste away from patient areas, whilst it was awaiting collection. (Regulation 12 (2) (h))
- Cleaning schedules in place for its ear syringe, emergency nebuliser and spirometer equipment. (Regulation 12 (2) (h))

Following our comprehensive inspection the practice sent us a plan of the actions it intended to take to meet the legal requirements. This follow up inspection was carried out to check that the actions had been implemented and improvements made.

We inspected the practice against one of the questions we ask about services: Is the service safe? In addition, we inspected the practice against all six of the population groups: older people; people with long-term conditions; families, children and young people; working age people (including those recently retired and students); people whose circumstances make them vulnerable and people experiencing poor mental health (including people with dementia). This was because any changes in the rating for safe would affect the rating for all the population groups we inspected against.

How we carried out this inspection

We carried out an announced inspection of the Northern Medical Centre on the 26 November 2015. We looked at records relating to infection control and medicines management and spoke with the practice manager and one of the GPs.

Are services safe?

Our findings

Medicines management

At our comprehensive inspection in April 2015, we looked at emergency medicines and saw that they were within their expiry date. The practice had a system in place to check that drugs were in date, but this was not recorded and we therefore could not be assured that regular checks were taking place. After our inspection the practice informed us that it had introduced a system of regular checks and a written policy for checking emergency medicines.

At our follow up inspection we saw the written policy evidence that a system of regular checks of emergency medicines had been introduced. This included a note of the staff member responsible and a deputy to cover in their absence. It required a list of emergency medicines to be maintained and that the staff member responsible should check the expiry dates and the quantities remaining. The check was to be carried out every two months. The practice manager showed us the policy was available to all staff on the shared computer drive.

We saw examples of the logs that had been introduced. The logs were detailed, recording the name of the medicine, the dosage and quantity, together with the batch number and expiry date.

Cleanliness and infection control

At our comprehensive inspection, we found that the practice did not have a clinical waste disposal policy. At the follow up inspection we saw that the practice had

introduced specific policies for the management of general and clinical waste, which were available to all staff on the shared drive. The policies included provision for all staff to receive appropriate training.

During the comprehensive inspection, we were told that the premises landlord was responsible for the contractual arrangements for removal and disposal of clinical waste. We noted that there was no secure facility for storing waste away from public areas prior to its removal. Staff told us they would discuss and review the issue with the landlord. At the follow up inspection we saw that following the review new arrangements had been introduced. The practice's clinical waste bins, located in consultation rooms were emptied each day by the landlord's cleaner. Clinical waste was stored in a locked bin, in an area not accessible to patients, and was removed by the contractor on a weekly basis.

At the comprehensive inspection, we found that the practice did not have cleaning schedules in place for its ear syringe, emergency nebuliser and spirometer. Following the inspection, the practice sent us copies of newly-introduced protocols for cleaning the ear syringe, emergency nebuliser and spirometer equipment. The practice informed us that it had introduced a change to appointment scheduling and that ear syringe appointments now took place on a specific day to allow for the equipment to be adequately cleaned at the beginning and end of that day. At the follow up inspection, we saw that cleaning logs had been introduced and were being maintained appropriately by the staff responsible. We were also shown evidence that the emergency nebuliser was being maintained and cleaned in accordance with the manufacturer's instructions.