

Mendlesham Medical Group

Quality Report

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Date of inspection visit: 13 June 2017

Date of publication: 06/07/2017

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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Mendlesham Medical Group on 19 October 2016. The overall rating for the practice was 'good', with 'requires improvement' for providing safe services. The full comprehensive report on the 19 October 2016 inspection can be found by selecting the 'all reports' link for Mendlesham Medical Group on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 13 June 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation that we identified in our previous inspection on 19 October 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice remains rated as good.

Our key findings were as follows:

- There was an open and transparent approach to safety and a system was in place for reporting and recording

significant events. After our previous inspection the provider had implemented additional electronic recording procedures of significant events and other incidents. Learning from events was shared with the practice team and changes in practice were made in response to this.

- We reviewed safety records, patient safety alerts and a new recording process which allowed the practice to share alerts with all staff. We saw evidence that these were shared with staff and action was taken.
- The practice had implemented a system for checking medicine expiry dates in the dispensary.
- Peripheral and clinical equipment available for use was stored safely and were within their expiry dates.
- Complaints were handled appropriately and learning from these was shared with staff. An electronic system to record complaints had been implemented after our previous inspection.
- A recruitment procedure was in place. The practice had undertaken recruitment since the last inspection and had applied interview processes that ensured a fair approach and questioning took place

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?

Our focused inspection on 13 June 2017 found that:

- There was an effective system in place for reporting and recording significant events.
- Lessons were shared to make sure action was taken to improve safety in the practice.
- When things went wrong patients received reasonable support and a written apology. They were told about any actions to improve processes to prevent the same thing happening again.
- We reviewed safety records, incident reports, patient safety alerts and the amended recording process that had been implemented after our last inspection. We saw evidence that lessons were shared and action was taken to improve safety in the practice.
- A system for checking medicine expiry dates in the dispensary had been implemented.
- Peripheral and clinical equipment available for use was stored safely and were within their expiry date.
- Complaints were handled appropriately and learning from these was shared with staff. An electronic system to record complaints had been implemented after our previous inspection.
- A recruitment procedure was in place. The practice had undertaken recruitment since the last inspection and had applied interview processes that ensured a fair approach and questioning took place

Good



Mendlesham Medical Group

Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was undertaken by a CQC lead inspector.

Background to Mendlesham Medical Group

The practice area covers the village of Mendlesham and extends into 29 outlying villages. There is a branch site at Bacton and medicines are dispensed from both sites. The practice offers health care services to around 7,300 patients and has consultation space for GPs and nurses as well as extended attached professionals including midwives and physiotherapists. We did not visit the practice at Bacton as part of this follow up inspection; the administrative functions for the practice are managed at the Mendlesham site.

The practice holds a General Medical Service (GMS) contract with the local Clinical Commissioning Group (CCG). A GMS contract is a nationally negotiated contract to provide care to patients. In addition, the practice also offers a range of enhanced services commissioned by their local CCG: facilitating timely diagnosis and support for people with dementia. The practice is a training practice providing education to medical students.

There are three GP partners and two salaried GPs at the practice (two female and three male GPs). There is one healthcare assistant, two nurse practitioners, and four practice nurses. There is a team of nine dispensary staff. A team of ten administration and reception staff support the management team. The practice manager is supported by a deputy manager.

The practice is open between 8am and 6.30pm Monday to Friday. When the practice is closed Care UK provide emergency care, patients are asked to call the NHS111 service or to dial 999 in the event of a life threatening emergency.

According to Public Health England information, the practice demography shows the practice has a higher number of patients aged between 45 and 75 years and a similar number of patients aged over 75. There are a lower number of patients aged between 20 and 45 years.

Male and female life expectancy in this area is in line with the England average at 80 years for men and 86 years for women.

Why we carried out this inspection

We undertook a comprehensive inspection of Mendlesham Medical Group on 19 October 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. A requirement notice was issued in relation to Safe Care and Treatment. The safe domain was rated as requires improvement. The full comprehensive report following the inspection on 19 October 2016 can be found by selecting the 'all reports' link for Mendlesham Medical Group on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Mendlesham Medical Group on 13 June 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 as detailed in the requirement notice.

Detailed findings

How we carried out this inspection

During our visit we:

- Spoke with the practice manager, the dispensary manager and a GP partner.
- Reviewed significant event records processes.
- Reviewed complaints records and processes.

- Reviewed safety alerts records and processes.
- Visited the Mendlesham location and reviewed peripheral equipment and its storage procedures.
- Looked at information the practice used to deliver care and treatment plans.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 19 October 2016, we rated the practice as requires improvement for providing safe services. The following improvements were needed:

- Ensure that incidents that affect the health, safety and welfare of people using the service are reported, reviewed, investigated and monitored.
- Ensure all dressings that are available for use are safely stored and within their expiry date.
- The practice should review the recording of, and retention of, the documentation used to evidence the checks they have taken to ensure that medicines are within their expiry date.
- Improve the recording of safety alerts to ensure sufficient detail to enable future monitoring.

These arrangements had improved when we undertook a follow up inspection on 13 June 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

We reviewed safety records, incident reports, patient safety alerts and records of meetings where these were discussed. We saw evidence that lessons were shared and action was taken to improve safety in the practice. After our previous inspection the provider had implemented additional electronic recording procedures of significant events and other incidents.

We saw evidence that when things went wrong with care and treatment, patients were informed of the incident, received reasonable support, a written apology and were told about any actions to improve processes to prevent the same thing happening again. We saw that managers investigated incidents immediately if required and shared these at the weekly practice meetings.

Six monthly reviews were undertaken on significant events and complaints, but these were also discussed on a weekly basis.

Safety was monitored using information from a range of sources, including National Institute for Health and Care Excellence (NICE) guidance and alerts from the Medicines and Healthcare products Regulatory Agency (MHRA). The

information was monitored by a designated member of staff for relevance and shared with other staff, as guided by the content of the alert. Any actions required as a result were brought to the attention of the relevant clinician(s) to ensure issues were dealt with. Clinicians we spoke with confirmed that this took place.

Records were detailed and provided a clear oversight of the process and actions taken as a result of updates or alerts. The practice also shared a monthly CCG newsletter containing alert information, paper copies of alerts and electronic versions with all relevant staff. A library containing historical alerts was also maintained on the practice's intranet system so that all staff could access these at any time.

Overview of safety systems and processes

During our inspection on 19 October 2016 we reviewed two personnel files and found appropriate recruitment checks had been undertaken prior to employment (for example, proof of identification, references, qualifications, registration with the appropriate professional body and the appropriate checks through the Disclosure and Barring Service). We noted that the practice did not retain copies of the recruitment process for example, copies of interview records.

The practice informed us that they had amended this approach to ensure documentation would be kept for all recruitment procedures. The practice had undertaken recruitment since the last inspection and had applied interview processes that ensured a fair approach and questioning took place.

Medicines Management

Peripheral and clinical equipment available for use was stored safely. We checked random samples of dressings and all were within their expiry date.

The dispensary in the practice had implemented a new system for checking medicine expiry dates within the dispensary. A comprehensive log was kept indicating which medicines would expire during each month. The procedure allowed the dispensing staff to foresee expiry dates well in advance and act on these accordingly. These records were reviewed quarterly to ensure they remained up to date.