

# Medina Healthcare

## Quality Report

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Newport

Isle of Wight

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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 a focused inspection of Medina Healthcare on 13 December 2016 to check that action had been taken since our previous inspection in March 2015.

Overall the practice was rated as good. At our previous inspection, the practice was rated good for Effective, Caring, Responsive and Well Led services.

However, the practice was rated as requires improvement in the Safe domain due to breaches of regulations relating to the safe delivery of services.

At our previous inspection, we found that the practice had not ensured that procedures for the management of infection control included; an annual infection control statement, a completed audit of the premises and a risk assessment and policy for the management of Legionella. Also there was no system in place to monitor the cleaning of carpets and privacy curtains.

We inspected the practice on 13 December 2016 to check that they had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection of Medina Healthcare on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Our key findings for this inspection were as follows:

- Curtains had been replaced or regularly cleaned in all treatment and consultation rooms.
- Carpets had been steam cleaned bi-annually.
- A Legionella risk assessment had taken place on 31st July 2015 and all actions completed.
- An infection control audit had been undertaken and a training programme for new and existing staff had been instigated.

The practice is now rated good for Safe services.

**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.

- Disposable curtains had been replaced in treatment/consultation rooms and fabric curtains were regularly washed at the required temperature to minimise infection.
- Carpets had been steam cleaned bi-annually by an external contractor.
- A Legionella risk assessment and compliance certificates had been issued on 31 July 2015.
- Infection control audits had been undertaken and infection control training for new and existing staff had been instigated.

**Good**



# Medina Healthcare

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

At this review, our inspection team consisted of a Care Quality Commission Inspector and a GP specialist advisor.

## Background to Medina Healthcare

Medina Healthcare is located at 16 West Street, Newport, Isle of Wight, PO30 1PR, which is close to the centre of Newport. Medina Healthcare is part of the Isle of Wight Clinical Commissioning Group (CCG). The practice operates from premises which are leased by the GP partners. The practice building has four consulting rooms and three treatment rooms.

Medina Healthcare has a branch at Wootton Bridge, Ryde PO33 4NW which is approximately five miles away. The new premises at Wootton Bridge were opened in November 2014. Together the two branches provide care and treatment to 9,000 patients across the two sites. Approximately 5000 patients are registered at West Street and 4000 at Wootton Bridge. All patients have access to appointments at both locations. As part of this inspection we did not visit the branch surgery at Wootton Bridge.

The practice has two male and four female GP partners and a long term locum GP. The GPs in total provide the equivalent of 4.5 full time GPs. Further clinical support is provided by a nurse practitioner, a lead nurse, three further practice nurses and two healthcare assistants. The practice is further supported by a practice manager, reception and administrative staff. The practice has a personal medical services (PMS) contract with NHS England. (This is a locally

agreed alternative to the standard General Medical Services contract. This is used when services are agreed locally with a practice which may include additional services beyond the standard contract.)

At the time of the 13 December 2016 visit, the practice had closed its patient list with the permission of NHS England and the Isle of Wight clinical commissioning group. This was because two of the GP partners had been on long term sick leave and the practice had several members of support staff leave.

The practice is open on Monday to Friday between 08.00 and 18.30. There is late opening on a Monday until 19.00 and the practice opens at 07.20 on a Thursday morning. The practice opens on a Saturday morning to treat patients who have pre-booked appointments only.

The Care Quality Commission draws on existing national data sources and includes indicators covering a range of GP practice activity and patient experience including the Quality and Outcomes Framework and the National Patient Survey. This data showed the practice provides care and treatment to a higher than average number of patients who are over the age of 65 which includes care and treatment to people who are living in a large nursing home and two care homes. GP's from the practice form part of an out of hour's service for which the CCG are responsible. This service is accessed by patients through the 111 service.

## Why we carried out this inspection

At the inspection carried out on 26 March 2015, we made a requirement to address shortfalls with regulation 12.

How the regulation was not being met:

# Detailed findings

The provider had not assessed the risk of, and preventing, detecting and controlling the spread of infections, including those that are health care associated.

We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

## How we carried out this inspection

We revisited Medina Healthcare as part of this review because they were able to demonstrate that they were meeting the standards.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

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

### Cleanliness and infection control.

At our inspection in March 2015, we observed the rooms used to consult or treat patients were visibly clean, tidy and well maintained. Work surfaces could be cleaned easily and were clutter free. Patients we spoke with told us they always found these areas of practice clean and had no concerns about infection control.

An infection control policy and supporting procedures were available for staff to refer to. Personal protective equipment including disposable gloves, aprons and coverings were available for staff to use and staff were able to describe how they would use these to comply with the practice's infection control policy. The practice used single use equipment wherever possible.

The practice consulting rooms had carpeting and fabric privacy curtains. We looked at the cleaning schedules and found that neither of these items were part of that schedule. Carpets were only cleaned when visibly stained and there was no record of the frequency of laundering the privacy curtains. There was no record and staff could not recall the last time the curtains were removed for cleaning.

However, privacy curtains in treatment rooms were disposable and we saw that the date they were fitted was recorded.

The practice did not have a risk assessment or policy for the management, testing and investigation of Legionella (a bacterium found in the environment which can contaminate water systems in buildings). However, the practice manager was in the process of engaging a specialist company to carry out an assessment of the building and a plan for monitoring the water systems, a date for the assessment had not been set.

At our visit on 13 December 2016, we saw that the standard of cleanliness at the practice had been improved.

The practice had contracted a local professional cleaning company to complete a rolling programme of carpet cleaning every six months at the West Street Surgery and a floor cleaning programme at the Wootton branch. The Wootton branch did not have any carpeted areas.

We saw the floor cleaning schedules for 2016 and certificates from the contractors that floor cleaning had been completed.

The disposable privacy curtains in the treatment rooms had the date they were fitted recorded and the fabric curtains in two rooms had been washed every six months and a record completed.

The lead nurse for infection prevention and control attended training in September 2015 to receive updates. The nurse had previously attended infection control study days and taken part in E-learning sessions.

The practice had reviewed all policies relating to infection control in March 2016 and we saw that audits had taken place. For example, a hand hygiene audit of staff had taken place in March 2016 and an infection prevention and control competency checklist had been completed by the lead nurse to ensure that nursing staff were competent in hand hygiene, use of personal protection equipment, decontamination of equipment, sharps management and aseptic non touch techniques.

The practice had commissioned a professional company to complete a full legionella and water quality compliance assessment. This was completed in April 2015. The practice had completed the requirements from this assessment.

The practice recorded hot and cold water temperatures on a monthly basis and had booked the same company to complete another water test in January 2017.