

Dr Ward, Pearce & Partners

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

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 follow up inspection on 24 October 2016 to follow up on concerns we found at Dr Ward, Pearce and Partners on 30 November 2015. This inspection was to ensure that improvement had been made following our inspection in November 2015 when breaches of regulations had been identified. The inspection in November 2015 found breaches of regulation and rated the practice as good overall but requires improvement in safe services.

At the inspection on 24 October 2016 we found that overall the practice had implemented changes and that the service was meeting the requirements of the regulations. The ratings for the practice have been updated to reflect our findings following the improvements made since our last inspection in November 2015. The practice is now rated as good for safe services.

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

- The practice had reviewed protocols and processes involving cold chain recording and reporting and maintain an audit trail of prescription stationery.
- The practice had undertaken a CoSHH assessment and risk assessment in respect of liquid nitrogen.
- The practice had reviewed its complaints systems to provide a complete audit trail of outcomes.
- Reviewed it systems to make sure staff were aware of training expiry dates and ensured the training the practice considered to be mandatory was completed as needed.

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 now rated as good for providing safe services.

Our last inspection in November 2015 identified concerns relating to the cold chain protocol, prescription security and risk assessments for the liquid nitrogen.

At this inspection we saw the concerns had been addressed:

- The practice had an effective practice specific protocol for the cold chain.
- Prescription security had been strengthened and the practice were recording and tracking the blank prescriptions.
- There was a risk assessment in place for the liquid nitrogen.
- The complaints process had been strengthened to provide an audit trail of outcomes and the process for ensuring training was completed had been revised.

Good



Dr Ward, Pearce & Partners

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Why we carried out this inspection

We undertook an announced focussed inspection on 24 October 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection in November 2015 had been made. We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting.

The focused inspection of this service was carried out under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection is planned to check whether the provider has made the necessary improvements and is meeting the legal requirements in relation to the regulations associated with the Health and Social Care Act 2008.

We have followed up to make sure the necessary changes have been made and found the provider is now meeting the regulations associated with the Health and Social Care Act 2008 included within this report.

This report should be read in conjunction with the full inspection report.

We inspected the practice against one of the five key questions we ask about services:

- Is the service safe?

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We carried out an announced visit on 24 October 2016. During our visit we:

- Spoke with a range of staff.
- Requested action plan to be forwarded prior to the inspection.
- Reviewed information given to us by the practice, including audits, policies and procedures.
- Reviewed documents relating to complaints.

Are services safe?

Our findings

When we inspected in November 2015 we identified concerns relating to the cold chain protocol, prescription security and risk assessments for the liquid nitrogen. At this inspection we found the practice had made significant improvements to address the concerns previously identified.

Overview of safety systems and processes

At the inspection in November 2015 we found that the temperature recording template for the two fridges had indicated elevated temperature readings. On two separate occasions the temperature in the fridge had been recorded at +9 degrees Celsius; No incident form was completed for either temperature spike in line with practice policies. Staff told us that this was due to the protocol not being followed correctly and assured us this would be addressed. We also saw that blank prescriptions numbers were not being recorded to prevent these being misused or misappropriated.

At this inspection we saw an effective process had been put in place for the checking of fridge temperatures. The practice had produced a flow chart specific to the practice and their protocol to guide staff in the steps to follow should the temperature be out of range. This showed the process to follow dependant on the level of the temperature. We saw that the practice were recording the temperatures daily on both fridges and that they also used

a data logger which the staff downloaded the data each week. The protocol and process were in line with advice from the Clinical commissioning group was practice specific.

Blank prescriptions were been tracked and recorded to prevent these being misused or misappropriated.

Monitoring risks to patients

In November 2015 there were some procedures in place for monitoring and managing risks to patient and staff safety. Liquid nitrogen for cryosurgery clinics was kept on the premises but no COSHH assessment was in place, nor was there a risk assessment to ensure it was stored correctly and used safely.

At this inspection we saw that there was now a risk assessment in place for COSHH. The practice had also updated the practice health and safety risk assessment to include the liquid nitrogen and this was reviewed every six months.

The practice had updated the complaints process so that they could provide an audit trail for complaints, we saw that the process was in place however there had been no complaints since the previous inspection.

The practice had strengthened the training requirements so that the manager sent an email each quarter to tell staff which training was due for review and this was then checked the following quarter and at appraisal.