

# West Derby 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 well-led?

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 West Derby Medical Centre on 24 April 2017. The overall rating for the practice was good with requires improvement for providing well led services. The practice was issued a requirement notice for being in breach of regulations for governance. The full comprehensive report for the 24 April 2017 inspection can be found by selecting the 'all reports' link for West Derby Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced follow up inspection carried out on 4 October 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 24 April 2017. This report includes our findings in relation to those requirements.

Overall the practice is rated as good and now good for providing well led services.

Since our last inspection, the practice had made some improvements towards the main issues identified. Improvements included:

- The completion of risk assessments for the control of substances hazardous to health (COSHH) and display screen risk assessments for staff.
- A log book for monitoring verbal complaints.

- A log book of prescriptions that were uncollected and destroyed.
- Medicine safety alert information was available on the front page of computer screens with a link for more information for clinicians to access. Safety alerts were discussed at clinical meetings.

In addition:-

- All staff had received safeguarding training and Mental Capacity Act training appropriate for their role.
- The appointment system had been reviewed and more on the day appointments had been introduced to reduce the number of failed appointments.
- The telephone system had been altered to make it easier for patients to get through to the practice.

However, some aspects of improvement were still in progress and the practice should:-

- Review GP national patient survey data and how the practice monitors patient satisfaction with regards to appointment and telephone access and take appropriate action when necessary.
- Record all verbal complaints, the action taken and review verbal complaints to identify patterns and trends.
- Have a separate mechanism for staff to record incidents.
- Review the new procedure for managing uncollected prescriptions to check whether it is working.

# Summary of findings

- Formally record a disability access risk assessment.
- Keep a log of incoming safety alerts and record the action taken.

**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 well-led?**

The practice is rated as good for being well-led. The practice had addressed the main issues identified during the previous inspection. There were improvements in risk assessments and monitoring systems to improve the quality and safety of the service. There were regular staff meetings to support shared learning for the whole team and staff had received further training. However, some work was still in progress and the practice was aware that further improvements should be made.

**Good**



# West Derby Medical Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

a CQC inspector

## Background to West Derby Medical Centre

West Derby Medical Centre is based in Winterburn Crescent, Liverpool. There were 12,779 patients on the practice register at the time of our inspection and the practice population is mainly white British.

The practice is a teaching and training practice managed by six GP partners and there are three salaried GPs. There are three practice nurses and a healthcare assistant. Members of clinical staff are supported by a practice manager, reception and administration staff.

The practice is open 8am to 6.30pm every weekday. Extended hours appointments are offered from 7am on Mondays, Tuesdays and Wednesdays and until 7.30pm on Tuesday evenings.

Patients requiring a GP outside of normal working hours are advised to contact the GP out of hours service, by calling 111.

The practice has a General Medical Services (GMS) contract and has enhanced services contracts which include childhood vaccinations. The practice is part of Liverpool local clinical commissioning group.

## Why we carried out this inspection

We carried out an announced comprehensive inspection at West Derby Medical Centre on 24 April 2017. The overall rating for the practice was good with requires improvement for providing well led services. The practice was issued a requirement notice for being in breach of regulations for governance. The full comprehensive report for the 24 April 2017 inspection can be found by selecting the 'all reports' link for West Derby Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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## How we carried out this inspection

The inspector :-

- Carried out an announced inspection visit on 4 October 2017.
- Reviewed the practice's policies and procedures.
- Spoke with GPs, practice nurses, the deputy practice manager and staff.

# Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

## Our findings

We carried out an announced comprehensive inspection at West Derby Medical Centre on 24 April 2017. The overall rating for the practice was good with requires improvement for providing well led services. The practice was issued a requirement notice for being in breach of regulations for governance. The full comprehensive report for the 24 April 2017 inspection can be found by selecting the 'all reports' link for West Derby Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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At our previous inspection we found the arrangements to monitor and improve quality and identify risk needed improving. For example the practice had:

- Not completed some risk assessments to monitor safety of the premises required by health and safety legislation such as control of substances hazardous to health (COSHH), display screen risk assessments for staff and disabled access.
- Some monitoring systems were in place but these required improvements for example, monitoring verbal complaints, monitoring patient safety alerts, monitoring uncollected prescriptions and monitoring fridge temperatures.

Evidence reviewed demonstrated that the practice had improved some of the systems in place since our last inspection 24 April 2017. For example, the practice had completed risk assessments for control of substances hazardous to health (COSHH) and display screen risk assessments for staff. The practice had considered disabled access around the building and staff were instructed to assist anyone having difficulties. However, the risk assessment had not been documented.

There was a log book within reception called an incident log book. Staff told us any incident would be recorded here. We found this was used by staff to record verbal

complaints too. There were only two entries in the book and it was unclear what action the practice had taken as a result of the complaint. There was no other system for staff to be able to record incidents.

The practice had reviewed the system for managing uncollected prescriptions. Two members of staff were accountable for checking uncollected prescriptions once a month. We were told those prescriptions that hadn't been collected for two to three months, were sent to a GP to review before shredding. There was a new log book of prescriptions shredded and the reason recorded.

There was a pile of prescriptions that had been recently checked and were ready for the GP to review that had been issued in June and July 2017. However, when we checked the box of uncollected prescriptions, there were some still left in the box that had been issued in June and July that had been overlooked.

Since our last inspection, the practice posted any new medicine safety alerts on the home page of their computer system for clinicians to view. These were discussed at clinical meetings. We spoke with GPs and the local medicines management team who showed us that searches were completed to identify any patients who may be at risk. However, it was unclear which alerts had been dealt with and actioned as there was no log kept. We were told there was a meeting scheduled with the local medicines management team that was to include discussions around how the practice monitored drug alerts and recorded the action taken.

The practice did have log books to monitor fridge temperatures. We spoke with one of the practice nurses who told us this had been discussed at nurse's meetings and a data device had been purchased so that fridge temperatures could be monitored more appropriately.

The practice were aware of patient concerns identified in our previous inspection regarding telephone access and appointment access but they had not yet reviewed survey data from the GP national patient survey or carried out any internal surveys. We were told that the appointment system had been reviewed and more on the day appointments had been introduced to reduce the number of failed appointments. The telephone system had been altered to make it easier for patients to get through to the practice.