

Alveley Medical Practice

Inspection report

The Medical Centre Village Road, Alveley Bridgnorth **Shropshire** WV15 6NG Tel: 01746 780553 www.alveleymedicalpractice.co.uk

Date of inspection visit: 04/07/2019 Date of publication: 05/08/2019

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 location	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced focused inspection at Alveley Medical Practice on 7 July 2019. We decided to undertake an inspection of this service following our annual review of the information available to us. This inspection looked at the following key questions: safe, effective and well-led. We based our judgement of the quality of care at this service on a combination of:

- What we found when we inspected
- Information from our ongoing monitoring of data about services and
- Information from the provider, patients, the public and other organisations.

We previously carried out a focused inspection at Alveley Medical Practice on 28 February 2018. The overall rating was good with requiring improvement in providing safe services.

A breach of legal requirement was found, and a requirement notice was served in relation to Good Governance. We also made two good practice recommendations. The report on the February 2018 inspection can be found by selecting the 'all reports' link for Alveley Medical Practice on our website at .

At the last inspection in February 2018, we rated the practice as requires improvement for providing safe services because:

- Some medicines dispensed in packs/trays included tablets surrounded by the foil blister packaging.
- Patient safety alert systems did not include evidence of the actions the practice had taken.
- Improvements were required in respect of patient group directions and fridge temperature monitoring.

At this inspection, we found that the provider had satisfactorily addressed these areas.

We have rated this practice as good overall and good for all population groups.

• The practice had clear systems, practices and processes to keep people safe and safeguarded from abuse.

- The practice had systems for the appropriate and safe use of medicines, including medicines optimisation and had improved their systems for dispensing.
- The practice learned and made improvements when things went wrong. Leaders promoted a culture of reporting and recording all incidents including near misses as significant events.
- The practice understood the needs of its population and tailored services in response to those needs.
- Staff had the skills, knowledge and experience to deliver effective care, support and treatment and worked together and with other organisations to deliver effective care and treatment.
- The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines.
- Clinical audits demonstrated quality improvement.
- Staff felt supported by the management team, proud to work at the practice and comfortable to raise concerns.
- Staff were supported in their roles and with their professional development.
- The practice had an established patient participation group to proactively seek feedback from patients.
- There was compassionate, inclusive and effective leadership. Leaders were visible and approachable and understood the strengths and challenges of the services provided.

The areas where the provider should make improvements are:

- Develop a risk assessment for not stocking opiates as part of the emergency medicines held.
- Ensure all staff complete outstanding essential training including those who act as chaperones receive training.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGPChief Inspector of General Practice

Population group ratings

Older people	Good
People with long-term conditions	Good
Families, children and young people	Good
Working age people (including those recently retired and students)	Good
People whose circumstances may make them vulnerable	Good
People experiencing poor mental health (including people with dementia)	Good

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a member of the CQC medicines team.

Background to Alveley Medical Practice

Alveley Medical Practice is registered with the Care Quality Commission (CQC) as a partnership GP provider located in Alveley Shropshire and is a small rural dispensing GP practice that was purpose built and opened in October 1991. The practice area covers Alveley, Hampton Loade, Quatt, Six Ashes and Romsley and has 2300 registered patients. The practice is part of the NHS Shropshire Clinical Commissioning Group and holds a General Medical Services (GMS) contract with NHS England. A GMS contract is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract.

The practice operates from The Medical Centre, Village Road, Alveley, Bridgnorth, Shropshire,

WV15 6NG and provides regulated activities from this location only. The practice area is one of lower overall deprivation when compared with local and national averages. The practice has a higher proportion of patients aged 65 years and above compared with the CCG locality and practice average across England. For example, 35% of patients registered are aged 65 years plus compared with the CCG average of 25% and the national average of

17%. The patient population is mainly White British (99.6%). The practice has 57.5% of patients registered with a long-standing health condition which higher than local and national averages.

The practice staffing consists of two GP partners, one male and one female, two female practice nurses and two dispensary staff. The practice is supported by a practice manager, a practice administrator and four reception staff, one of whom is a phlebotomist. The practice also employs a part-time cleaner.

The practice and dispensary are open Monday to Friday from 8.30am to 12.30pm and from 2pm to 6pm. GP appointments are available on Monday, Tuesday, Thursday and Friday mornings between 9am and 11am and between 3pm and 5pm in the afternoon. On a Wednesday GP appointments are available between 8.30am and 11am as the practice closes in the afternoon. On a Friday GP appointments are available between 9am and 11.30am and between 2.30pm and 4.30pm. Nurse appointments are available throughout the week between 8.30am and 11.30am and 3pm and 5pm except for Wednesday's when they are available from 8am and 11am only. When the practice is closed the margins are covered by the out of hours provider. The practice does not provide an out-of-hours service to its own patients but has alternative arrangements for patients to be seen

when the practice is closed through Shropdoc, the out-of-hours service provider. The practice is a teaching practice accredited by Keele University and has regular foundation year two GPs on a four-monthly basis.

Further details about the practice can be found by accessing the practice's website at www.alveleymedicalpractice.co.uk