

The Molebridge Practice

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.

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced focused inspection of The Molebridge Practice on 17 November 2015.

We had previously carried out a comprehensive inspection of The Molebridge Practice on 26 August 2015. Breaches of regulations were found and the practice was required to make improvements. Following the comprehensive inspection, the practice sent us an action plan detailing what they would do to meet the regulations. We undertook this focused inspection on 17

November 2015 to check that the provider had followed their action plan and to confirm that they now met the regulations in relation to the safe management of medicines and staff recruitment checks.

This report only covers our findings in relation to those requirements. A further comprehensive inspection will be undertaken to follow up the remaining breaches of regulations and to check that improvements have been made. At this stage the overall rating for the practice will remain unchanged. You can read the report from our last comprehensive inspection by selecting the 'all reports' link on our website at www.cqc.org.uk

Summary of findings

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

- The practice had developed processes to ensure that all necessary recruitment checks were carried out and recorded as part of the recruitment process.
- The practice had developed systems to ensure the safe management of medicines. This included processes for monitoring expiry dates and storage temperatures of medicines and the secure storage of prescription pads.

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?

At this inspection we focused upon two breaches of legal requirements which we found at our last inspection in relation to whether services were safe. We looked at the safe management of medicines and staffing and recruitment procedures. During this inspection we found that the practice had implemented policies and procedures to ensure the proper and safe management of medicines. There were arrangements in place to ensure that appropriate recruitment checks on staff had been undertaken prior to their employment.

The Molebridge Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection was led by a CQC Inspector.

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 on 26 August 2015 as part of our regulatory functions. This inspection was planned to check whether the provider was

meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breaches of regulations were found and the practice was required to make improvements. As a result we undertook this focused inspection on 17 November 2015 to follow up on whether action had been taken to deal with some of the breaches of regulations. We specifically looked at how the practice ensured the safe management of medicines and how the practice ensured that necessary recruitment checks of staff were undertaken as part of the recruitment process.

Are services safe?

Our findings

Medicines management

At our previous inspection we found that medicines were not appropriately managed within the practice and the practice could not be sure that all medicines were safe for use. We checked medicines stored in the nurse's treatment room and medicines refrigerator. We found they were not always stored securely to ensure medicines were only accessible to authorised staff. The practice could not demonstrate that records were kept to ensure medicines were stored at the required temperatures. The practice was unable to demonstrate they had processes in place to check all medicines were within their expiry date and suitable for use. We found inhalers used to treat emergency respiratory conditions within the practice's supply of emergency medicines had expired in April 2014. We also found inhalers prescribed in the name of one patient within the practice's emergency medicines supply.

Blank prescription forms were not handled in accordance with national guidance and were not kept securely at all times. Blank prescription pads were left in unlocked rooms which, due to the layout of the practice, could potentially have been accessed by patients or visitors to the practice.

During this inspection we saw that the practice had developed up to date documented policies for ensuring medicines and vaccines were managed safely. We checked medicines stored in the treatment rooms and medicine refrigerators and found they were stored securely and were only accessible to authorised staff. Emergency medicine supplies had been reviewed and were safe and suitable for use. We saw that monthly checks of all emergency medicines had been undertaken.

There was a policy for ensuring that medicines were kept at the required temperatures without interruption, which described the action to take in the event of a potential failure. Records showed that fridge temperature checks were carried out daily which ensured medicines were stored at the appropriate temperatures. Robust processes were now in place to check medicines were within their expiry date and suitable for use. This included recorded monthly checks of stock and expiry dates. All the medicines we checked were within their expiry dates. Expired and unwanted medicines were disposed of in line with waste regulations.

The practice had implemented procedures to ensure the security of prescription forms. We saw that both blank prescription forms for use in printers and those for hand written prescriptions were handled in accordance with national guidance and were tracked through the practice and kept securely at all times.

Staffing and recruitment

At our previous inspection we examined personnel records and found that the practice had not ensured that appropriate recruitment checks were undertaken prior to employment. The practice had a recruitment policy and a recruitment checklist which set out the standards it should follow when recruiting clinical and non-clinical staff. However the practice had not followed this policy and had recruited staff without checks being undertaken. The practice was unable to demonstrate they had carried out any checks prior to the recent recruitment of a nurse practitioner, the practice manager and a salaried GP. The practice was unable therefore to ensure that fit and proper persons had been employed and to ensure the safe care and treatment of patients. The practice had not undertaken risk assessments of all roles within the practice to determine the need for criminal records checks through the Disclosure and Barring Service (DBS). As a result, some staff, such as those reception staff who were required to act as chaperones, had not been subject to a criminal records check.

At this inspection we reviewed personnel records of seven staff members who had been recently recruited by the practice. We found that the practice had ensured that appropriate recruitment checks had been undertaken. For example, proof of identification, references, qualifications and registration with the appropriate professional body. Recruitment policies and checklists were in place which set out the standards followed when recruiting clinical and non-clinical staff and these had been adhered to. The practice had undertaken an assessment of all roles within the practice to determine the need for criminal records checks through the Disclosure and Barring Service (DBS). Where required staff had been subject to a criminal records check. We saw evidence of these checks.