

Kingsbridge 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 safe?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We previously carried out an announced comprehensive inspection at Kingsbridge Medical Centre on 11 July 2016. The overall rating for the practice was good with requires improvement in providing safe services. The full comprehensive report on the 11 July 2016 inspection can be found by selecting the 'all reports' link for Kingsbridge Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 10 May 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 11 July 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- Improvements had been made in the recruitment of locum GPs however several gaps remained. The

practice took immediate action on the day of the inspection to mitigate the gaps and updated their policy for employing agency workers to ensure the safe recruitment of future locum GPs.

- An appropriate emergency medicine was available at the practice to treat possible complications associated with the insertion of inter uterine coils.
- A system had been implemented to monitor and follow up children who did not attend hospital appointments.
- A system had been put in place to regularly monitor fridge temperatures to ensure vaccines were stored within the manufacture's recommended temperature range.
- A protocol for dealing with uncollected prescriptions had been developed and implemented.

However, there were also areas of practice where the provider needs to make improvements.

The provider should:

- Date all policies to ensure policies are reviewed and updated within an appropriate time frame.

Summary of findings

- Ensure the updated policy for the employment of agency workers is fully implemented.

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?

- Improvements had been made in the recruitment of locum GPs however several gaps remained. The practice took immediate action on the day of the inspection to mitigate the gaps and updated their policy for employing agency workers to ensure the safe recruitment of future locum GPs.
- An appropriate emergency medicine was available at the practice to treat possible complications associated with the insertion of inter uterine coils.
- There was a system in place to monitor and follow up children who did not attend hospital appointments.
- A system was in place to regularly monitor fridge temperatures to ensure vaccines were stored within the manufacture's recommended temperature range.
- A protocol for dealing with uncollected prescriptions had been developed and implemented.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- Date all policies to ensure policies are reviewed and updated within an appropriate time frame.
- Ensure the updated policy for the employment of agency workers is fully implemented.

Kingsbridge Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

a Care Quality Commission (CQC) lead inspector.

Background to Kingsbridge Medical Centre

Kingsbridge Medical Practice is an urban practice situated in Newcastle Under Lyme, Staffordshire. The practice is registered with the Care Quality Commission (CQC) as a partnership provider. The practice holds a General Medical Services contract with NHS England and is part of the NHS North Staffordshire Clinical Commissioning Group. 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. Car parking, (including disabled parking) is available at this practice.

At the time of our inspection the practice had 8474 registered patients. The practice is registered to undertake minor surgery. The practice area has less deprivation when compared with local and national averages. The practice is a training practice for GP registrars and medical students to gain knowledge, experience and higher qualifications in general practice and family medicine.

The practice staffing comprises of:

- Six GP partners (three males and three females)
- An honorary GP partner
- A salaried GP
- Two GP registrars.

- Three practice nurses and two health care support workers.
- A practice manager, deputy practice manager and office manager.
- A team of 13 reception and administrative staff.

The practice is open from 8.30am to 6pm Monday, Tuesday, Wednesday and Friday and 8.30am to 5pm on Thursdays. The practice is also open on Saturdays between 7.45am and 12pm. The practice is closed each Wednesday between 12.30pm and 1.30pm for staff training. Appointments are from 9am to 11.50am on Monday, 8.35am to 11.50am on Tuesday, Wednesday, Thursday and Friday mornings. Afternoon appointments are from 2pm to 5.30pm each day except for Thursday when appointments are from 2pm to 5pm. Extended hours appointments are offered every Saturday between 8am to 10.30am. When the surgery is closed the phone lines are switched to an answering machine message that instructs patients to dial 111 or 999 in an emergency. Out of hours care is provided by Staffordshire Doctors Urgent Care Ltd.

Why we carried out this inspection

We undertook a comprehensive inspection of Kingsbridge Medical Practice on 11 July 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall with requires improvement for providing safe services. The full comprehensive report on the 11 July 2017 inspection can be found by selecting the 'all reports' link for Kingsbridge Medical Practice on our website at www.cqc.org.uk.

We undertook a further announced focused inspection of Kingsbridge Medical Practice on 10 May 2017. This

Detailed findings

inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

Before our inspection, we reviewed a range of information we held about the practice and asked other organisations to share what they knew. We carried out an announced focused inspection on 10 May 2017. During our inspection we:

- Spoke with the practice manager
- Reviewed protocols and looked at information the practice used to deliver care and treatment.

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

At our previous inspection on 11 July 2016, we rated the practice as requires improvement for providing safe services. This was because:

- Systems were not in place to ensure that appropriate recruitment checks had been carried out for locum GPs.
- An emergency medicine was not available at the practice to treat possible complications associated with the insertion of inter uterine coils.
- A system was not in place to monitor and follow up children who did not attend hospital appointments.
- A system was not in place to regularly monitor fridge temperatures to ensure vaccines were stored within the manufacture's recommended temperature range.
- Guidance on dealing with uncollected prescriptions was not in place.

These arrangements had improved when we undertook a follow up inspection on 10 May 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

We reviewed the personnel files of three locum GPs. Two of the locum GPs had not worked at the practice since August 2016. The third locum GP, who continued to work at the practice, had previously been a GP partner at the practice. We found there had been an improvement in the recruitment checks undertaken. For example, proof of identification, evidence of satisfactory qualifications, registration with the appropriate professional body and the appropriate checks through the Disclosure and Barring Service (DBS). However, a full employment history, health assessment and evidence of good conduct in previous employment were not recorded in the records. The practice manager took immediate action on the day of the

inspection. We saw that the practice's policy for employing agency workers was updated to include the gaps we identified. A risk assessment was completed that demonstrated the locum GP who continued to work at the practice was of good conduct and character.

A system had been implemented to monitor and follow up children who failed to attend hospital appointments. We saw that an automated monthly search had been developed within the practice's computer system to identify any children who had failed to attend for a hospital appointment. The results of the search were reviewed by a GP and letters sent to the parents of these children to discuss why their child had failed to attend. The child safeguarding policy had been updated to reflect this requirement however we saw that the policy was not dated.

A system had been put in place to regularly monitor fridge temperatures to ensure vaccines were stored within the manufacture's recommended temperature range. We reviewed records for the two fridges used to store vaccines and saw that the fridge temperatures were checked and monitored on a daily basis.

The 'Repeat Prescription and Medication Review' protocol had been updated since our previous inspection. It included guidance for staff on dealing with uncollected prescriptions. We looked at a sample of repeat prescriptions ready for collection and saw that they were all within date.

Arrangements to deal with emergencies and major incidents

An appropriate emergency medicine was available at the practice to treat possible complications associated with the insertion of inter uterine coils. We saw that it was stored securely with the other emergency medicines and that it was in date.