

# SELDOC OOHs at Queen Mary's Hospital

## Inspection report


Queen Mary's Hospital  
Roehampton Lane  
Roehampton  
London  
SW15 5PN

Date of inspection visit: 21/05/2018 to 22/05/2018  
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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 location

Good 

Are services safe?

Good 

# Overall summary

**This service is rated as Good overall.** The service was previously inspected by the CQC on 10 August 2017. At that inspection the rating for the service was good overall. This rating applied to effective, caring, responsive and well led and all six population groups. Safe was rated as requires improvement.

The report stated where the service must make improvements:

- Develop effective systems and processes to ensure safe care and treatment including ensuring the proper and safe management of medicines, and assessing the risk of not providing Oxygen and Automatic External Defibrillator on service vehicles used for home visits and, where appropriate, mitigate their absence.

The areas where the provider should make improvement are:

- Review how GP equipment trolleys are checked.
- Review how non-clinical staff are regularly communicated with, in line with clinical staff.
- Review how the service ensures information reaches its intended audience, including bank and agency staff.

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out a focused inspection of the SELDOC Out of Hours Service at Queen Mary's Hospital on 21 May (a visit of the hub centre) and 22 May 2018 (a visit of the main site). The focussed inspection was to check if areas within the safe domain which were in breach of CQC regulations were now resolved

At this inspection we found:

- Cars used by the service had Oxygen and an Automatic External Defibrillator available for use.
- The service utilised prescriptions where GPs provided medicines to patients directly in line with guidance.
- The service had implemented new systems for how medicines were supplied to the site. Stocks were monitored and relevant drugs were available.
- Medicines audits had been completed and the service showed improved antibiotic prescribing following audits.
- Equipment trolleys were stocked and contained relevant equipment.
- Regular newsletters had been implemented for communication with staff.

**Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

## Our inspection team

The inspection team consisted solely of a CQC lead inspector.

## Background to SELDOC OOHs at Queen Mary's Hospital

South East London Doctors On Call (SELDOC, the provider) is commissioned to provide a range of GP out of hours services in South London. In South West London, SELDOC Out of Hours Service at Queen Mary's Hospital is one of seven hubs at which patients may attend. There is a single hub that has administrative oversight for the area. Governance arrangements are co-ordinated locally by service managers and senior clinicians for each of the seven service locations, including the service provided from SELDOC Out of Hours Service at Queen Mary's Hospital.

SELDOC Out of Hours service at Queen Mary's Hospital is provided from within the minor injuries unit at Queen Mary's Hospital, Roehampton Lane, Roehampton, London, SW15 5PN. There is a reception desk, waiting area and the provider uses one consultation room to see patients. During the day the consultation room is used by a different provider contracted to provide GP services in the minor injuries unit. The out of hours service operates with one GP and one receptionist on site. Patients have access to toilet facilities and seats in a corridor waiting area. The service is on one level and is accessible to those with reduced or limited mobility.

The service is open between 7pm and 10pm Monday to Sunday. Patients can only attend the service with referral through the NHS 111 service. On average the service sees 29 patients per week.

The service is led by a service manager (who is based at SELDOC's headquarters), and there is a GP on site who has oversight of the out of hours service. Team Leaders are also available via the telephone at the service headquarters to address any problems staff may face.

GPs working at the service were either bank staff (those who are retained on a list of employed staff by the provider and who work across all of their sites) or agency. The site had permanently employed part time reception staff.

The service is registered with the Care Quality Commission (CQC) for the regulated activities of treatment of disease, disorder or injury, and transport services, triage and medical advice provided remotely.

# Are services safe?

At our previous inspection on 10 August 2017, we rated the provider as requires improvement for providing safe services and stated that the practice must:

- Develop effective systems and processes to ensure safe care and treatment including ensuring the proper and safe management of medicines, and assessing the risk of not providing Oxygen and Automatic External Defibrillator on service vehicles used for home visits and, where appropriate, mitigate their absence.

The areas where the provider should make improvement are:

- Review how GP equipment trolleys are checked.
- Review how non-clinical staff are regularly communicated with, in line with clinical staff.
- Review how the service ensures information reaches its intended audience, including bank and agency staff.

**At this inspection we found that these areas had been addressed, and we rated the practice, and all of the population groups, as good for providing safe services.**

## Information to deliver safe care and treatment

Staff had the information they needed to deliver safe care and treatment to patients.

- The service had systems for sharing information with staff and other agencies to enable them to deliver safe care and treatment. There were a series of newsletters containing relevant information which were sent to all staff, and clinical meetings were scheduled where required.

## Safe and appropriate use of medicines

The service had reliable systems for appropriate and safe handling of medicines.

- The systems and arrangements for managing medicines, including medical gases, emergency medicines and equipment, and controlled drugs and vaccines, minimised risks.
- The service kept prescription stationery securely and monitored its use. This included the implementation of lilac prescriptions for medicines which were either administered or dispensed by the GP. Prescriptions were kept securely in the relevant sealed medicines trays.
- Arrangements were also in place to ensure medicines and medical gas cylinders carried in vehicles were stored appropriately. Oxygen and an Automatic External Defibrillator were available in all cars.
- The service had developed a system with an external provider that medicines were stored in secure boxes that were checked once a week. When medicines were used there was a “yellow flag/red flag” system in place to determine whether the box may still be used or would need to be replaced.
- The service had carried out regular audits of the use of broad spectrum antibiotics and prescriptions of painkillers. The analysis of the first audit of antibiotics showed that the service was only prescribing first choice antibiotics for urinary tract infections 50% of the time. Following training of all clinical staff at the second audit this had improved to a compliance rate of 79%.
- Equipment trolleys at the service contained relevant equipment.