

Fitzalan Medical Group

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 carried out an announced comprehensive inspection of this practice on 13 January 2015. Breaches of legal requirements were found in relation to the safe management of medicines. After the comprehensive inspection, the practice wrote to us to say what they would do to meet legal requirements. We undertook this focused inspection on 19 November 2015 to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

Our previous report also highlighted areas where the practice should improve:-

- Ensure the chaperone policy is visible on the waiting room notice board and in the consulting rooms.
- Provide patients with greater flexibility for making appointments.
- Take action to address identified concerns with infection prevention and control practice.
- Provide an opportunity for all practice staff to meet on a regular basis.
- Ensure all staff are familiar with the practice's whistleblowing procedure and that it is included in the staff handbook.

- Provide an opportunity for the virtual patient representative group (VPRG) to meet with the practice on a more regular basis.

Our key findings across the areas we inspected for this focused inspection were as follows:-

- The nurses and the health care assistants were now administering vaccines using directions that had been produced in line with legal requirements and national guidance.
- The chaperone policy was now visibly displayed on the walls of each consulting room.
- The practice had reviewed its appointment system and was in the process of implementing changes that would allow patients more flexibility in making appointments.
- The practice had held meetings which allowed all practice staff to attend. These now took place every six months.
- The practice had addressed concerns identified in relation to infection control. For example, all bins were now pedal operated.
- All staff were familiar with practice's whistleblowing policy which was now included in the employee handbook.
- Arrangements had been put in place to ensure that the VPRG had the opportunity to meet with the practice on a more regular basis.

Summary of findings

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?

The practice is now rated good for delivering safe services

At our last inspection we found that some systems and processes to ensure the safe management of medicines were not in place. The nurses and the health care assistants were not always administering vaccines using directions that had been produced in line with legal requirements and national guidance. For example, one of the health care assistants we spoke with was administering vaccines before seeking authorisation from the GP. At this inspection we found that the practice now had a system for production of Patient Specific Directions to enable Health Care Assistants to administer vaccinations in line with legal requirements and national guidance.

Good



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Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was undertaken by a CQC General Practice 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

13 January 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 legal requirements were found. As a result we undertook a focused inspection on 19 November 2015 to follow up on whether action had been taken to deal with the breaches.

Are services safe?

Our findings

Medicines Management

The practice is now rated good for delivering safe services

At our last inspection we found that some systems and processes to ensure the safe management of medicines were not in place. The nurses and the health care assistants were not always administering vaccines using directions that had been produced in line with legal requirements and national guidance. For example, one of the health care assistants we spoke with was administering influenza or pneumonia vaccines before seeking authorisation from the

GP. At this inspection we found that the practice now had a system for production of Patient Specific Directions to enable Health Care Assistants to administer vaccinations in line with legal requirements and national guidance. We saw that the health care assistant administering vaccines had attended refresher training on administering influenza or pneumonia vaccines and had been assessed as competent by the practice nurse. We also saw that any specific patient eligible for an influenza or pneumonia vaccine had their name, date of birth and exact vaccine required entered on a patient specific directive prior to the health care assistant clinic. We saw that this was checked and signed by the doctor responsible in advance.