

The Mortimer Medical Practice

Inspection report

Croase Orchard Surgery
Kingsland
Leominster
Herefordshire
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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 practice is rated as Good overall. (Previous rating March 2018 – Good)

We carried out an announced comprehensive inspection at The Mortimer Medical Centre on 26 March 2018. The overall rating for the practice was good. The practice was found to be requires improvement in providing safe services. The full comprehensive report on the March 2018 inspection can be found by selecting the 'all reports' link for The Mortimer Medical Practice on our website at .

This inspection was an announced desk top review carried out on 7 September 2018 to confirm that the practice had carried out their plan to make the improvements that we identified in our previous inspection in March 2018. This report covers our findings in relation to those requirements and therefore this inspection is focused on the key question of safe.

Our key findings were as follows:

- There was a process in place to ensure that repeat prescriptions were signed before they were dispensed to patients in accordance with the regulations.
- The provider had reviewed and ensured there was an appropriate stock of emergency medicines available to cover potential emergency situations.
- Action had been taken to strengthen the process of the safe monitoring of medicines into monitored dosage systems.
- The process for monitoring medicines had been strengthened to ensure that patients were kept safe.

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

Please refer to the detailed report and the evidence tables for further information.

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector.

Background to The Mortimer Medical Practice

The Mortimer Medical Practice provides primary medical services from a main surgery, Croase Orchard at Kingsland in Herefordshire and two branch surgeries in Orleton and Leintwardine. Dispensing services are provided at all three surgery sites (dispensary 1.6km). The practice has a registered list of approximately 8531 patients spread over a largely rural area of around 200 square miles. The practice population is the sixth least deprived decile in England. Level one represents the highest levels of deprivation and level ten the lowest.

The Mortimer Medical Practice offers a range of services including, family planning service, travel health, long term conditions, dementia clinics, footcare clinics, hearing screening, young persons clinics, child immunisations, ear syringing and maternity and child health surveillance services. It is also a training practice and regularly supports qualified doctors who are training to become GPs.

A chaperone service is available for patients who request the service. This is advertised throughout the practice

Parking is available on site and the practice has facilities for disabled patients.

The practice team working across the three sites consists of five GP partners, two salaried GPs and a long term locum, supported by a practice manager, six practice nurses, and three healthcare assistants. In addition there is a team of 19 administrative, reception and dispensing staff and four housekeeping staff.

The practice is open Monday to Friday from 8.30am to 6.00pm. Home visits are available for patients who are too ill to attend the practice for appointments.

The practice treats patients of all ages and provides a range of medical services. The practice has a higher than average number of patients over 60 years.

The practice does not provide an out of hours service. When the practice is closed patients are directed to contact Primecare via 111.

The practice website can be viewed at: www.mortimer.gpsurgery.net

Are services safe?

At our previous comprehensive inspection in March 2018, we rated the service as requires improvement for providing safe services. This was because;

- The provider could not assure us that the management of fridge temperatures was being recorded correctly and so we could not be assured that the medicines in the fridge had always been kept safe.
- The process for issuing repeat prescriptions was not in line with current regulations and did not comply with national guidance.
- The process for packing medicines into monitored dosage systems (MDS) needed strengthening as risk assessments produced did not evidence that the packing of foils in MDS had been considered.

When we undertook a desktop review of the service on 7 September 2018 we found improvements had been made.

Appropriate and safe use of medicines

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

At our inspection in March 2018 we found that the provider was not recording the fridge temperature correctly and we were unable to be assured that medicines in the fridge had always been kept safe. After the inspection the provider sent documentary evidence to assure us that they have reviewed their process with staff to ensure patients are kept safe. They had further strengthened their process and had undertaken fridge audits to provide assurance for the safe monitoring of medicines. We saw evidence that this audit had been completed since March 2018 to mitigate the risk associated.

At our inspection in March 2018 we found that in order to turn around prescriptions in 24 hours the provider was issuing repeat prescriptions with the exception of controlled drugs (medicines that require extra checks and special storage because of their potential misuse) that were not produced and signed in accordance with the regulations.

At this inspection we were told that the process for repeat prescriptions had been reviewed in accordance with the regulations and all prescriptions were now produced within 48 hours and signed by a prescriber before they were dispensed. A policy and standard operating procedure has been introduced and reviewed by all staff to take account of the new changes. We saw evidence that the practice had notified its patients and the patient participation group of the changes to prescription collections and information had been updated on its website to reflect these changes.

At the inspection in March 2018 we found that the process for packing medicines into monitored dosage systems (MDS) needed strengthening as risk assessments produced did not evidence that the packing of foils in MDS had been considered. The practice sent us documentary evidence to advise that this had been reviewed. We saw evidence that risk assessments had been reviewed in patients notes to alert staff that the GP had carried out a risk assessment prior to dispensing medicines in MDS.

Please refer to the evidence tables for further information.