

# The Medical Centre

## Quality Report

Boyd Avenue

Padstow

Cornwall

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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

Our previous inspection visit on 2 September 2015 found a breach of regulation 12(2) (g) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to the proper and safe management of medicines.

On 2 September 2015 we found the practice required improvement for the proper and safe management of medicines and was rated as requires improvement for providing safe services. The practice was rated good overall and we rated all patient population groups as good.

This inspection on 26 April 2016 was undertaken to check the practice was meeting regulations. For this reason we have only rated the location for the key questions to which these relate. This report should be read in conjunction with the full inspection report published on 17 December 2015.

We found the practice had made improvements since our last inspection and was meeting the regulation that had previously been breached.

Specifically we found:

- The practice had introduced a new standard operating procedure which ensured that all staff had clear procedures to follow to ensure the security of prescription forms.
- Prescription pads and prescription forms were being stored securely at all times.
- Treatment room doors had new keypad entry locks in order to protect unattended rooms.
- An audit trail was now in place to track all prescription forms and pads through the practice.
- There were formal governance arrangements in place including systems for assessing and monitoring risks to the safe management of medicines.

In addition to making improvements to the regulation breaches the practice had also acted upon suggestions for good practice as detailed in the previous inspection report.

- The practice had introduced the use of the NHS Protect prescription form security risk assessment tool. NHS Protect is part of the NHS Business Services Authority and leads on work to safeguard NHS staff and resources from crime.
- Staff had received training and understood how to use the new systems in place.

# Summary of findings

We have amended the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe, effective, caring, responsive and well-led services.

**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 had taken appropriate action to achieve the rating of good for the provision of safe services.

Records and evidence we reviewed confirmed this.

The practice had addressed the issues judged as contributing to a breach of regulations at our inspection on 2 September 2015. Specifically, improvements had been made to ensure that:

- The practice had introduced a new standard operating procedure which ensured that all staff had clear procedures to follow to ensure the security of prescription forms.
- Prescription pads and prescription forms were being stored securely at all times.
- Treatment room doors had new keypad entry locks in order to protect unattended rooms.
- An audit trail was now in place to track all prescription forms and pads through the practice.
- There were formal governance arrangements in place including systems for assessing and monitoring risks to the safe management of medicines.

Good



# The Medical Centre

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

A CQC Inspector and a GP Specialist Adviser undertook this focused follow up inspection.

## Background to The Medical Centre

The Medical Centre - Padstow is located in the Cornish town of Padstow and belongs to the Petroc Practice Group. The Petroc Practice Group has 14 GPs, eight of whom were partners and six salaried GPs (seven male and seven female). The medical centre at Padstow is managed by the eight GP partners, one of whom is the practice manager. The practice also has three trainee GPs. There is one nurse practitioner, six practice nurses, three health care assistants, one phlebotomist, reception and additional administration staff.

There were a total of 16,157 patients on the Petroc Group Practice list and 96.4% of patients were of white British background. There were a higher proportion of older people on the patient list compared with the national average.

The practice is both a training practice (for qualified doctors training to become GPs) and a teaching practice (for medical students training to become doctors) The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8.30am to 6pm daily. Extended hours surgeries are offered two days a week until 8pm on Tuesdays and Thursdays. Patients requiring a GP outside of normal working hours are advised to contact the GP out of hour's service.

During our inspection we visited The Medical Centre, Boyd Avenue, Padstow, Cornwall PL28 8ER.

The practice has a General Medical Service (GMS) contract and also offers enhanced services for example; extended hours.

Out of Hours services are provided by another organisation. Outside of opening hours a recorded telephone message advises patients of the emergency GP service. Patients are also signposted to contact NHS 111.

## 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 as part of our regulatory functions. This inspection took place on 2 September 2015 and we published a report setting out our judgements. These judgements identified a breach of regulations. We asked the provider to send a report of the changes they would make to comply with the regulation they were not meeting at that time.

This focused follow up 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 review the breach identified and the rating awarded for the safe domain, under the Care Act 2014.

## How we carried out this inspection

Before visiting on 26 April 2016 the practice confirmed they had taken the actions detailed in their action plan.

During our visit we undertook some observations of the environment. We met with the practice manager and the

## Detailed findings

registered manager, who is one of the GP partners at the practice. We reviewed documents relating to the

management of the service. All were relevant to demonstrate the practice had addressed the breach of regulations identified at the inspection of 2 September 2015.

# Are services safe?

## Our findings

### Overview of safety systems and processes

During our previous inspection visit on 2 September 2015 we found a breach of regulation 12(2) (g) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to the proper and safe management of medicines. At that time we identified that the practice did not have clearly defined and embedded systems, processes and practices in place to keep people safe. Blank prescription forms and prescription pads were not handled in accordance with national guidance. There was an audit trail through the practice, however, blank prescription forms and prescription pads were not kept securely at all times.

On our inspection visit of 26 April 2016 we found that significant improvements had been made.

Specifically we found:

- The practice had introduced a new standard operating procedure which ensured that all staff had clear procedures to follow to ensure the security of prescription forms.

- Prescription pads and prescription forms were being stored securely at all times.
- Treatment room doors had new keypad entry locks in order to protect unattended rooms. Printers had locks fitted to secure their contents.
- An audit trail was in place to track all prescription forms and pads through the practice.
- There were formal governance arrangements in place including systems for assessing and monitoring risks to the safe management of medicines and associated paperwork such as prescription forms.

In addition to making improvements to the regulation breaches the practice had also acted upon suggestions for good practice. For example;

- The practice had introduced the use of the NHS Protect prescription form security risk assessment tool. NHS Protect is part of the NHS Business Services Authority and leads on work to safeguard NHS staff and resources from crime.
- Staff had received training and understood how to use the new systems in place.