

Crawley Road 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



Are services well-led?

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 at Crawley Road Medical Centre on 24 November 2016. The practice was rated requires improvement for safe and well-led services which resulted in an overall rating of requires improvement. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Crawley Road Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 12 July 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulation that we identified during our previous inspection on 24 November 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The lead for infection prevention and control at the practice was up to date with infection control training.

- The practice provided evidence that they had made improvements to the premises in line with the infection control audit action plan.
- There were systems in place for the safe management of medicines.
- There were policies in place for managing significant events and uncollected prescriptions.
- Portable electrical testing (PAT) was completed for all electrical items at the practice.
- There was a portable oxygen cylinder available at the practice.
- There was a system in place for monitoring the use of blank prescription pads.
- All staff at the practice had completed information governance training.
- There was a comprehensive system in place for pre-travel vaccination assessments.

However, there was an area of practice where the provider needs to make improvements.

The provider should:

Summary of findings

- Signpost the electrical outlets for both pharmaceutical fridges to reduce the risk of accidental disconnection from the power source.

At our previous inspection on 24 November 2016, we rated the practice as requires improvement for providing safe and well-led services as we found there were gaps in governance arrangements for managing medicines and infection prevention and control training for the infection control lead at the practice. At this inspection we found that the practice had improved systems for managing

medicines. We found that the lead for infection control was up to date with infection control training. Consequently, the practice rating has improved to good for safe and well-led services resulting in an overall rating of good.

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 rated as good for providing safe services.

- Arrangements for managing medicines provided assurance that systems were in place to keep patients safe. For example, fridges used to store vaccines were stocked in line with guidance from Public Health England and temperatures were recorded daily.

Good



Are services well-led?

The practice is rated as good for providing well-led services.

- Governance arrangements for staff training were in place and the infection prevention and control lead was up to date with infection control training.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The provider had resolved the concerns for safety and well-led at our inspection on 24 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for safety and well-led at our inspection on 24 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for safety and well-led at our inspection on 24 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety and well-led at our inspection on 24 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety and well-led at our inspection on 24 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety and well-led at our inspection on 24 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- Signpost the electrical outlets for both pharmaceutical fridges to reduce the risk of accidental disconnection from the power source.

Crawley Road Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was conducted by a lead CQC Inspector.

Background to Crawley Road Medical Centre

Crawley Road Medical Centre is located in Leyton, East London. It is part of the Waltham Forest Clinical Commissioning Group. Crawley Road Medical Practice holds a General Medical Service (GMS) contract with NHS England. The practice is a teaching practice. The practice has a patient list of approximately 5800. Thirty five percent of patients are aged under 18 (compared to the national practice average of 44%) and 15% are 65 or older (compared to the national practice average of 20%). Fifty one percent of patients have a long-standing health condition. The services provided by the practice include child health care, ante and post-natal care, immunisations, sexual health and contraception advice and management of long term conditions. The practice is registered with the Care Quality Commission to carry on the regulated activities of family planning, treatment of disease, disorder or injury and diagnostic and screening procedures.

The clinical team included two GP partners (one male and one female), a female salaried GP, two male registrars and three nurses (two female and one male). The non-clinical team included nine administrator roles and one full time practice manager.

The practice's opening hours are:

- Monday, Tuesday, Wednesday and Friday 9:00am-6:30pm

- Thursday 9:00am to 2pm
- Monday, Tuesday, Wednesday and Friday 6:30pm-7:00pm (extended hours)

Appointments are available at the following times:

- Monday, Tuesday, Wednesday and Friday 9:30am – 1:00pm and 1:30pm – 7:00pm
- Thursday – 9:30am – 2:00pm

In addition to pre-bookable appointments that could be booked up to four weeks in advance, urgent appointments are also available for people that need them. When the practice was closed, patients were directed to a local GP federation number who would direct the call to one of the on call GPs.

Why we carried out this inspection

We undertook a comprehensive inspection of Crawley Road Medical Centre on 24 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on November 2016 can be found by selecting the 'all reports' link for Crawley Road Medical Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Crawley Road Medical Centre on 12 July 2017. This 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.

Detailed findings

How we carried out this inspection

We carried out a desk-based focused inspection of Crawley Road Medical Centre on 12 July 2017. This involved reviewing evidence that:

- There were medicines management systems in place to keep patients safe.
- Governance arrangements for staff training had improved.

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 24 November 2016, we rated the practice as requires improvement for providing safe services as the arrangements for managing medicines did not provide assurance that systems were in place to keep patients safe.

We issued a requirement notice in respect of these issues and found arrangements had significantly improved when we undertook a focused inspection on 12 July 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

At the comprehensive inspection on 24 November 2016 we found that the arrangements for managing medicines, including emergency medicines and vaccines, in the practice did not always keep patients safe (including obtaining, prescribing, recording, handling, storing, security and disposal). The practice's two fridges were over stocked. The temperatures of both fridges were being logged however one of the fridges was unable to display minimum and maximum temperatures and was therefore not able to give an accurate reading. We reviewed the process for monitoring uncollected prescriptions and found no system in place for a check to be carried out by a GP. The practice agreed that the procedure was in need of review. Blank prescription forms and pads were securely stored however there were no systems in place to monitor their use.

At the follow-up focused inspection on 12 July 2017 we found that all of the issues relating to medicines

management had improved. The practice purchased two pharmaceutical fridges for storing vaccines. Both fridges displayed the maximum and minimum temperatures, and a daily log of temperatures was recorded. We reviewed the temperature logs for the last three months and found the maximum and minimum temperatures to be in line with vaccine storage guidance from Public Health England. There were two members of staff named as leads for checking stock levels in both fridges to avoid overstocking.

The practice had an updated practice specific policy in place for uncollected prescriptions. The practice employed a pharmacist one day per week following the November 2016 inspection. The new system in place ensured that all uncollected prescriptions are triaged by the pharmacist. The prescriptions triaged by the pharmacist are reviewed by a GP for a clinical decision and coded on the electronic patient management system. The practice will conduct an audit every six months to review uncollected prescriptions and ensure the new system is working effectively.

The practice follows a comprehensive process for the management of blank prescription forms and pads. All blank prescription forms and pads are securely stored and monitored. The practice maintains a log of all serial numbers. The log was used to record the distribution of pre-printed prescriptions from stock within the practice including the serial numbers, date, time and to whom the prescriptions have been distributed. Monthly stock checks of blank prescription forms and pads are carried out and recorded in the prescription security log.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At our previous inspection on 24 November 2016, we rated the practice as requires improvement for providing well-led services as governance arrangements did not always operate effectively with regard to staff training.

Governance arrangements had significantly improved when we undertook a follow up inspection of the service on 12 July 2017. The practice is now rated as good for being well-led.

Governance arrangements

At the comprehensive inspection on 24 November 2016 we found that governance arrangements did not always operate effectively. Some staff (such as the infection prevention and control lead) had not received training in their role and non-clinical staff had not received information governance training.

At the follow-up focussed inspection on 12 July 2017 we found that governance arrangements for staff training had improved. The practice registered with an online training provider in September 2016 and all staff now have access to training online. The practice manager monitors training through the online system and annual appraisal. We saw evidence that all non-clinical members of staff completed information governance training.

We spoke to the practice nurse about infection prevention and control training and found that training for infection control met requirements. For example, we saw training certificates for in-house infection control training August 2016, clinical infection control online training January 2017, infection control workshop May 2017 and infection control online training July 2017. The nurse demonstrated an understanding of infection prevention and control and was the infection control lead for the practice.