

Lawley Medical Practice

Quality Report

Farriers Green

Lawley

Telford

TF4 2LL

Tel: 01952 560011

Website: www.lawleymedical.co.uk

Date of inspection visit: 15 June 2016

Date of publication: 27/06/2016

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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Lawley Medical Practice	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Lawley Medical Practice on 24 February 2016. A breach of legal requirement was found and a requirement notice was served. After the comprehensive inspection the practice sent us an action plan to say what they would do to meet legal requirements in relation to:

- Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Fit and proper persons employed.

We undertook a focused inspection on 15 June 2016. We did not visit the practice but reviewed information sent to us by the provider. The inspection was to check that the practice had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Lawley Medical Practice on our website at www.cqc.org.uk.

Our key findings were as follows:

- Disclosure and Barring Service (DBS) checks had been obtained for all clinical staff who worked at the practice and acted as chaperones.
- The DBS check protocol had been reviewed and amended to include a clear timeline for new staff to bring in appropriate documentation, and the subsequent consequences of not doing so.
- The practice had introduced a 'Safer Recruitment Self-Declaration Form' as a condition of employment.

Overall the practice is rated as good and good in the safe domain. This recognises the improvements made to the quality of care provided by this service.

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.

- Disclose and Barring Service (DBS) checks had been obtained for all clinical staff who worked at the practice and acted as chaperones.
- The DBS check protocol had been reviewed and amended to include a clear timeline for new staff to bring in appropriate documentation, and the subsequent consequences of not doing so.
- The practice had introduced a 'Safer Recruitment Self-Declaration Form' as a condition of employment. This form asked applicants about any convictions or investigations which may affect their suitability to work with children or adults who may be vulnerable.

Good



Lawley Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Lawley Medical Practice

Lawley Medical Practice was established in April 1999. It moved into purpose built premises in Telford in February 2002. The practice holds a Personal Medical Services (PMS) contract with NHS England. A PMS contract is a locally agreed alternative to the standard General Medical Services (GMS) contract used when services are agreed locally with a practice which may include additional services beyond the standard contract.

The practice area has average deprivation when compared with the national and local Clinical Commissioning Group (CCG) area. At the time of our inspection the practice had 8466 patients. The practice age distribution is higher than the national and CCG average for 0-14 year olds. It has a lower than national average of patients aged 55 and above but was comparable with the local CCG for this age range. The practice is a training practice for GP registrars to gain experience and higher qualifications in general practice and family medicine.

The practice staffing comprises of three GP partners (two male and one female), one salaried GP (female), one advance nurse practitioner, three practice nurses, a practice manager, an office manager, and a team of administrative / reception staff working a range of hours.

The practice is open every week day from 8am until 6pm, except between 12.30pm and 2pm on Wednesdays, when

the practice is closed for staff training. Consultation times vary depending on which GP is working, the earliest at 8.30am and the latest at 5.10pm. Extended hours appointments are available with the GPs, the advanced nurse practitioner and nurses on Monday evenings.

The practice is also part of a network of GP Practice offering extended opening hours for routine appointments. The practice offers routine appointments on a Tuesday evening for patients registered at any of the practices in the network.

The practice has opted out of providing cover to patients in the out-of-hours period. During this time services are provided by Shropdoc, patients access this service by calling 0333 222 66 55.

Why we carried out this inspection

We carried out a comprehensive inspection of the services under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 24 February 2016 had been made. We inspected the practice against one of the five questions we ask about services: is the service safe. This is because we found that the service was not meeting some legal requirements at the previous inspection.

Detailed findings

How we carried out this inspection

The practice sent us information to support that they had completed the improvements required to meet the legal requirements. A Care Quality Commission inspector reviewed the information received. We were able to perform our checks without visiting the practice.

Are services safe?

Our findings

During our previous inspection on 24 February 2016 we found that the practice had not protected patients against the risk of receiving unsafe care and treatment. This was because:

- Disclosure and Barring Service (DBS) checks had not been obtained prior to employment for clinical staff. DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable.

During our inspection on 15 June 2016 we found that:

- DBS checks had been obtained for all clinical staff who worked at the practice and acted as chaperones.
- The DBS check protocol had been reviewed and amended to include a clear timeline for new staff to bring in appropriate documentation, and the subsequent consequences of not doing so.

The practice had introduced a 'Safer Recruitment Self-Declaration Form' as a condition of employment. This form asked applicants about any convictions or investigations which may affect their suitability to work with children or adults who may be vulnerable.