

Windsor Medical Centre

Quality Report

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Website: www.windsormedicalcentre.nhs.uk

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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 at Windsor Medical Centre on 10 May 2017. The overall rating for the practice was good. However, the key question of Safe and the population group of Families, children and young people were both rated as requires improvement. The full comprehensive report on inspection can be found by selecting the 'all reports' link for Windsor Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 26 September 2017 to confirm that the practice had carried out the required improvements that we identified in our previous inspection on 10 May 2017.

This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

The practice is now rated as good for providing safe services and for the care provided for the population group of families, children and young people.

Our key findings were as follows:

- The practice had reviewed their systems and processes for checking expiry dates of medicines and consumables held within the practice and provided assurance they were effective.
- The practice had reviewed their policies and procedures on exception reporting.

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?

This inspection was conducted to review issues that were found at the comprehensive inspection carried out on 10 May 2017. The issues at the previous inspection included:

- Systems and processes for checking expiry dates of medicines and consumables held within the practice were not always effective.
- Policies and procedures around exception reporting required review, in order to reduce their exception reporting overall and to be assured that eligible patients were being encouraged to attend for screening.

At this inspection in September 2017 we found:

- The provider had reviewed their systems and processes for checking expiry dates of medicines and consumables held within the practice and provided assurance they were effective.
- · A recent review of their policies and procedures around exception reporting had been implemented, in order to reduce their exception reporting overall and to be assured that eligible patients were being encouraged to attend for screening.

Good



Summary of findings

The six population groups and what we found

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

Families, children and young people

The provider had resolved the concerns for safe and effective care identified at our inspection on 26 September 2017 which applied to this population group. The population group rating has been updated to good reflect this.

The practice had reviewed their policies and procedures around exception reporting, to reduce their exception reporting overall and to be assured that eligible patients were being encouraged to attend for screening.

Good





Windsor Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Windsor **Medical Centre**

Windsor Medical Centre provides primary care services to 2,050 patients under a Personal Medical Service Contract.

The practice is located at 2 William Street, Leeds Road, Dewsbury, WF12 7BD, in purpose built premises with all patient services at ground level. There is wheelchair access and parking for staff and patients.

The majority of patients live within a three mile radius of the practice. The area is in the fourth most deprived decile. Twenty three per cent of patients are from black and minority ethnic (BME) populations and 6% of patients claim disability living allowance.

There is one female GP, a locum male GP, one female practice nurse, a practice manager, a deputy practice manager and an administrative team.

The practice is open between 8.30am and 6.30pm Mondays, Tuesdays, Wednesdays and Fridays.

Appointments are from 8.45am and 11.45am every morning and Monday 2pm until 4:30pm, Tuesday, Wednesday and Friday 3pm until 5:30pm. The practice is closed from 3pm on Thursday afternoons, cover is provided by a neighbouring GP practice. Extended surgery hours are offered from 7.20am to 8.10am on Mondays. The practice offered a walk in afternoon service Monday to Friday.

Out of hours services are provided by Local Care Direct and NHS 111.

The previously awarded ratings were on display in the practice and on their website.

Why we carried out this inspection

We undertook a comprehensive inspection of Windsor Medical Centre on 10 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report following the inspection on 10 May 2017 can be found by selecting the 'all reports' link for Windsor Medical Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Windsor Medical Centre on 26 September 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 meeting legal requirements.

How we carried out this inspection

We carried out a focused inspection of Windsor Medical Centre on 26 September 2017. This involved reviewing evidence that:

• An effective review of their systems and processes for checking expiry dates of medicines and consumables held within the practice had been completed.

Detailed findings

• The practice had reviewed their policies and procedures on exception reporting. This was to support a reduction in their overall exception reporting and to be assured that eligible patients were being encouraged to attend for screening.

During our visit we:

• Spoke with the practice manager, the lead GP, a nurse and reviewed documentation held by the provider.

• Observed how patients were being cared for in the reception area.

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 10 May 2017, we rated the practice as requires improvement for providing safe services as the arrangements for checking expiry dates of medicines and consumables held within the practice were not always effective.

These arrangements had significantly improved when we undertook a follow-up inspection on 26 September 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- The practice had introduced an effective review of their systems and processes for checking expiry dates of medicines and consumables held within the practice and provided assurance they were effective.
- They had developed a new 'Drugs Expiry Log' which ensured that out of date medicines were identified, removed and disposed of in a safe manner. We saw the log for the previous six weeks which was comprehensively detailed. We also looked at a sample of medicines in the vaccine refrigerator which were all in date.

Monitoring risks to patients

- The practice had reviewed their policies and procedures on exception reporting. This was to support a reduction in their overall exception reporting and to be assured that eligible patients were being encouraged to attend for screening. Patients were excepted if they failed to attend for a review after three reminders.
- However before excepting them the following procedure would be followed:-
 - Exception reporting should be done by a clinician and the practice has now reminded all staff to discuss any exception reporting with a clinician.
 - The patients are invited to see a clinician if they are not sure about the reasons and the significance of the particular review appointment.
 - The clinician will ring the patient as a final invitation to attend for a review discussing the advantages and benefits of this for the patient.
 - Wherever appropriate, the patients would be discussed with secondary care consultants before being exception reported, and this would be documented in the patient notes.
- We saw minutes of the September 2017 practice meeting which made reference to the above procedure.