

Dr G R Murray and Partners

Quality Report

Ulverston Community Health Centre
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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

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 of Dr G R Murray and Partners on 12 May 2015, during which a breach of a legal requirement set out in the Health and Social Care Act (HCSA) 2008 was found. After the comprehensive inspection the practice wrote to us to say what they would do to address the identified breach.

On 8 June 2016 we undertook a focussed inspection where we asked the practice to send us information to evidence that they now met legal requirements. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Dr G R Murray and Partners on our website at www.cqc.org.uk. Overall, the practice is rated as good.

Our key findings were as follows:

- The practice had implemented arrangements to ensure that all clinical staff they employed were registered with the relevant professional body.
- Processes and procedures had been introduced to enable the practice to effectively monitor the cleanliness of the premises and effectively address any issues that may arise either themselves or, if relevant, by referring them to NHS Property Services.
- The practice had implemented a system to safely store prescription pads.
- The contact details for the local safeguarding team and other agencies such as the police had been updated and were readily available to staff.
- A system to record visitors to the practice which could be used in an emergency to account for people in the medical centre had been introduced.

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?

We found the provider had taken steps to address the concerns we identified at the previous inspection in May 2015. Improvements to patient safety had been made. For example:

- The practice had implemented arrangements to ensure that all clinical staff employed by the practice were registered with the relevant professional body.
- Processes and procedures had been introduced to enable the practice to effectively monitor the cleanliness of the premises in order to minimise the risk associated with infection control.
- The practice had implemented a system to safely store prescription pads.
- The contact details for the local safeguarding team and other agencies such as the police had been updated and were readily available to staff.
- A system to record visitors to the practice which could be used in an emergency to account for people in the medical centre had been introduced.

Good



Summary of findings

What people who use the service say

We did not speak with any people who use the service as part of this inspection.

Dr G R Murray and Partners

Detailed findings

Our inspection team

Our inspection team was led by:

The focused inspection was undertaken by a CQC Lead Inspector.

Background to Dr G R Murray and Partners

Dr R G Murray and Partners provides services to approximately 11,000 patients from one location at Ulverston Community Health Centre, Stanley Street, Ulverston, Cumbria, LA12 7BT. The practice provides services under a General Medical Services (GMS) contract.

The practice is located in a purpose built health centre. All patient facilities are situated on first floor which is accessible by stairs or a lift. There are disabled toilet facilities, wheelchair and step-free access to all consulting and treatment rooms. There is a car park available adjacent to the health centre.

The practice has five GPs partners and two salaried GPs (four female and three male), four practice nurses, four health care assistants, a practice manager and a team of reception and administration support staff.

The opening times for the practice are 8am to 8pm on Monday and Tuesday, and 8am to 6.30pm on Wednesday,

Thursday and Friday. Telephone lines are answered from 8am to 6.30pm. The out of hours service for their patients is provided by through the NHS 111 service and Cumbria Health on Call (CHOC).

Why we carried out this inspection

We undertook a focused inspection of Dr G R Murray on 8 June 2016. We asked to see evidence to confirm that improvements to meet legal requirements had been made following our comprehensive inspection on 12 May 2015. This inspection focused on one of the five questions we ask about services; is the service safe? This is because the service was not meeting a legal requirement in this domain when we inspected on 12 May 2015.

How we carried out this inspection

We carried out a focused inspection on 8 June 2016. We contacted the practice manager to request that they send us evidence to show they had implemented the changes outlined to us in an action plan following the publication of the report of the comprehensive inspection in May 2015. On 10 June 2016 we were sent policies, practice documents and photographic evidence of the changes made by the practice in order to comply with legal requirements.

Are services safe?

Our findings

Overview of safety systems and processes

When we visited the practice in May 2015 we identified areas of concern relating to the overview of safety systems and processes.

- The system for checking the professional registration of clinical staff required improvement. On the day of the inspection we found that the registration of one of the nursing staff had lapsed.
- Processes and procedures to enable the practice to effectively monitor the cleanliness of the premises in order to minimise the risk associated with infection control were not in place.
- Consultation rooms where prescription pads were stored in printers were not kept locked when unoccupied.
- Although the practice's safeguarding policy had recently been updated, the contact details for other agencies that may have needed to be informed when concerns arose, such as the local Police and Social Services, were not readily available to staff.

When we contacted the practice in June 2016 we saw evidence that these concerns had been addressed.

- The practice had a list of all staff's professional registration renewal dates and had practice direct debits set up for the GPs to pay the renewals automatically.

The nurses had diary reminders which alerted them to the need to update their registration and provide confirmation of this to the practice manager. All staff registration was up-to-date when we checked.

- A checklist had been implemented and was used to carry out regular checks of the cleanliness of the premises. The practice now held quarterly meetings with NHS Property Services to discuss the cleaning and management of the property. The practice had their own stock of curtains for the consultation rooms and a contract with a private company for these curtains to be cleaned every six months.
- A new protocol was introduced for managing prescription pads. Pads were logged so that the practice had a record of where they were at all times. Clinical staff now had keys to their own rooms and the protocol stated that these should be kept locked at all times when unoccupied.
- A poster containing relevant contacts for safeguarding agencies was created and placed on the walls in the practice.

Arrangements to deal with emergencies and major incidents

At inspection in May 2015 we found there was no signing in process at reception for visitors to the practice. In June 2016 we were shown evidence that a sign in sheet for visitors to the practice was now in operation.