

Two Shires Medical Practice

Quality Report

The Old School Surgery
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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

Two Shires Medical Practice was previously known as Dr Kilpatrick and Partners.

We had previously carried out an announced comprehensive inspection at this practice on 28 July 2016 and found breaches of regulation and rated the practice as 'Requires improvement' in the safe and well-led key question. The practice was rated as 'Requires improvement' overall. The full comprehensive report on the 28 July inspection can be found by selecting the 'all reports' link for Dr Kilpatrick and Partners on our website at www.cqc.org.uk.

Specifically we found that;

- There was no effective system that enabled health care assistants to administer medicines and vaccines in line with the legal requirements.
- The quality and safety of services were not being assessed, monitored and improved and not all the necessary policies and protocols were in place and followed when action was required.

This inspection was an announced focused inspection carried out on 20 April 2017 to confirm that the practice

had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 28 July 2016. 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' in the safe and well-led key questions and 'Good' overall.

Our key findings were as follows:

- There were clear policies and protocols in place to ensure that health care assistants only administered medicine and vaccines in line with the legal requirements.
- The practice had reviewed its arrangements for the checking of emergency equipment and fridges used to store vaccines to ensure their efficacy.

In addition we found that:

- Damaged seating had been replaced.
- Emergency medicines and equipment at the Old School Surgery had been secured to prevent unauthorised access.

Summary of findings

- The practice had continued to actively seek to identify carers.
- Relevant test results of patients on high risk drugs recommended by secondary care were documented.
- There was an increased frequency of meetings for nursing and healthcare assistants.
- The practice was working with the patient participation group to help increase the group's involvement.

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?

At our previous inspection on 28 July 2016 we found that:

- The practice was visibly clean; however we noted that the seating area in the waiting area at Old School Surgery required repairing.
- Arrangements to manage medicines, including emergency medicines and vaccines were not always followed. This included checks on fridge temperatures that stored vaccines at Fleckney Surgery.
- The practice did not have a system of legal authorisation for healthcare assistants to administer medicines to patients.
- Relevant tests were not always recorded in relation to patients on high risk medicines.
- There was no system to ensure that checks on the emergency equipment at Fleckney Surgery were carried out.
- Emergency medicines and equipment at Old School Surgery were not stored securely.

At our inspection on 20 April 2017 we found that:

- The damaged seating at the Old School Surgery had been removed and replaced with easy cleanable chairs.
- There were effective systems in place to manage medicines and vaccines which included a new system for monitoring fridge temperatures across all of the practice surgeries.
- The arrangements to allow medicines administered to patient by healthcare assistants met legal requirements.
- There was an effective system in place to ensure test results were appropriately recorded.
- There was an effective system to ensure that emergency equipment across all of the practice surgeries was checked regularly.
- Emergency medicines and equipment at the Old School Surgery were stored so as to prevent unauthorised access.

Good



Are services well-led?

At our previous inspection on 28 July 2016 we found that:

- The practice had a governance framework which supported the delivery of the strategy and quality care. However, we found some of the framework required strengthening to ensure policies and protocols were followed.

At our inspection on 20 April 2017 we found that:

Good



Summary of findings

- Policies and protocols had been reviewed and updated where appropriate.
- Senior members of the management team and GPs were more visible at the Fleckney surgery.

In addition to nurses attending clinical meetings with GPs, increased meetings for nurses and healthcare assistants had been introduced.

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 identified at our inspection on 28 July 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- Home visits and care plans were carried out by the Community Matron.
- The practice provided outreach clinics in Hallaton and Medbourne for those patients unable to attend the main practice sites.
- Patients were able to telephone for prescription requests and a delivery service was available.
- An integrated care co-ordinator worked with the practice and carried out home visits to review patient's social needs.

Good



People with long term conditions

The provider had resolved the concerns for safety and well-led identified at our inspection on 28 July 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- GPs and nursing staff had lead roles in chronic disease management, including dementia and diabetes.
- Patients at risk of hospital admission were identified as a priority.
- 85% of those diagnosed with diabetes had a blood test to assess diabetes control (looking at how blood sugar levels have been averaging over recent weeks) compared to the national average of 78%.
- Longer appointments and home visits were available when needed.
- All these patients had a named GP.
- 93% of patients identified with a long-term condition had a structured annual review with a GP or nurse to check their health and medicines needs were being met.
- For those patients with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.

Good



Summary of findings

Families, children and young people

The provider had resolved the concerns for safety and well-led identified at our inspection on 28 July 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- There were systems in place to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of A&E attendances.
- Immunisation rates were relatively high for all standard childhood immunisations.
- The practice's uptake for the cervical screening programme was 81%, which was comparable to the CCG average of 78% and better than the national average of 74%.
- Appointments were available outside of school hours and the premises were suitable for children and babies.
- Same day appointments were available for children who needed an urgent appointment.
- We saw positive examples of joint working with midwives, health visitors and school nurses.
- The practice offered a nurse-led travel vaccination service.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety and well-led identified at our inspection on 28 July 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- The needs of the working age population, those recently retired and students had been identified and the practice had adjusted the services it offered to ensure these were accessible and flexible.
- The practice was proactive in offering online services, including requests for repeat prescriptions and booking appointments.
- A full range of health promotion and screening was offered that reflected the needs for this age group.
- Seasonal flu vaccination clinics were provided on Saturdays at each of the surgeries during the flu season.
- Drivers medicals were also available for patients working as taxi and heavy goods vehicle drivers.

Good



Summary of findings

People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety and well-led identified at our inspection on 28 July 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- The practice held a register of patients living in vulnerable circumstances including travellers and those with a learning disability.
- The practice offered longer appointments for patients with a learning disability.
- The Community Matron was the lead for patients with a learning disability.
- The practice regularly worked with other health care professionals in the case management of vulnerable patients.
- The practice informed vulnerable patients about how to access support groups and voluntary organisations.
- Staff knew how to recognise signs of abuse in vulnerable adults and children and were aware of their responsibilities regarding safeguarding concerns.
- The practice's computer system alerted GPs if a patient was also a carer. The practice had identified 173 patients as carers (1% of the practice list). Carer's annual reviews were also offered.
- The practice referred to local groups for additional support regarding the management of patients with alcohol and drug dependency issues.
- The practice registered patients with the practice address if they did not have a fixed abode. Staff were also aware they could contact the travelling families team with help to contact patients, if needed.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety and well-led identified at our inspection on 28 July 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

- 97% of those with a diagnosis of schizophrenia, bipolar affective disorder or other had a comprehensive and agreed care plan in place, compared to the national average of 88%.
- 83% of patients with a diagnosis of dementia had their care reviewed in a face-to-face review, compared to the national average of 84%.

Good



Summary of findings

- The practice regularly worked with multi-disciplinary teams in the case management of patients experiencing poor mental health, including those living with dementia.
- The practice had a system in place to follow up patients who had attended accident and emergency where they may have been experiencing poor mental health.
- Staff had a good understanding of how to support patients with mental health needs and dementia.
- The practice was able to refer patients to the local community psychiatric nurse and counselling services that were hosted on site

Two Shires Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team consisted of a CQC Inspector and a practice manager specialist advisor.

Background to Two Shires Medical Practice

Two Shires Medical Practice provides primary medical services to approximately 15,660 patients predominately living in the South Leicestershire area, as well as parts of North Northamptonshire. All patient facilities are accessible. East Leicestershire and Rutland Clinical Commissioning Group (EL&RCCG) commission the practice's services.

The practice has five GP partners, two salaried GPs and two regular locum GPs (three male and six female). The nursing team consists of a community matron / nurse lead, two advanced nurse practitioners, three practice nurses and three healthcare assistants. The dispensary consists of a Dispensary Manager, two dispensers and a dispensary assistant. They are supported by Practice Director, Practice Manager, Assistant Practice Manager and a team of reception staff and administrative staff.

The practice carries out regulated activities at five sites in total. The main surgery is The Old School Surgery, 2A Station Street, Kibworth, Leicestershire.

Two branch surgeries are located at 6 High Street, Fleckney, Leicestershire and Two Shires Surgery, Torch Way, Market Harborough, Leicestershire.

In addition to this, there are two outreach clinics based in Hallaton, Leicestershire and Medbourne, Leicestershire which offer minor illness clinics on a Monday afternoon.

As part of this inspection, we visited the surgery in Kibworth.

Old School Surgery in Kibworth and Two Shires Surgery in Market Harborough are open between 8am and 5.30pm Monday to Friday. Fleckney Surgery is open from 8am to 12noon and 2pm to 5.30pm Monday to Friday. Extended hours appointments are offered at Old School Surgery on a Monday, Wednesday and Friday between 7.30am and 8am, as well as at Two Shires Surgery on a Tuesday and Thursday between 7.30am and 8am. Extended hours appointments are also offered from 8am to 12.30pm on alternate Saturdays at Two Shires Surgery, Market Harborough.

The dispensary is open from 8am until 5.30pm Monday to Friday.

The practice operates an on-call service between 5.30pm and 6.30pm. The practice also provides details for the nearest urgent care centres, as well as accident and emergency departments.

When the surgery is closed out-of-hours GP services are provided by Derbyshire Health United which is accessed by telephoning the NHS111 service.

The practice is an approved training practice for the training of General Practice Registrars and has three approved trainers.

Why we carried out this inspection

We undertook a comprehensive inspection Two Shires Medical Practice on 28 July 2016 under Section 60 of the

Detailed findings

Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement overall and specifically requires improvement in the safe and well-led key questions. The full comprehensive report following the inspection on July 2016 can be found by selecting the 'all reports' link for Dr Kilpatrick and Partners on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Two Shires Medical Practice on 20 April 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.

This report should be read in conjunction with the full inspection report.

We inspected the practice against two of the five key questions we ask about services:

- Is the service safe?

- Is the service well-led?

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We carried out an announced visit on 20 April 2017.

During our visit we:

- Spoke with members of staff.
- Undertook visual observations of the patient waiting area.
- Reviewed information given to us by the practice, including policies and procedures.

Are services safe?

Our findings

At our previous inspection on 28 July 2016, we rated the practice as requires improvement for providing safe services as we identified concerns that:

- The systems to ensure that healthcare assistants administering medicines and vaccines in line with legal requirements were not effective.
- The arrangements to manage medicines, including emergency medicines and vaccines were not always followed. This included checks on fridge temperatures at Fleckney.
- The systems in place were ineffective in ensuring that checks on emergency medical equipment was always carried out.
- The process for monitoring the temperatures of fridges used to store certain medicines and vaccines were not effective.
- Relevant test results were not always recorded in relation to patients on high risk medicines.
- Emergency equipment and medicines at the Old School Surgery were not stored securely.
- Some fabric covered seating at the Old School Surgery was damaged.

These arrangements had significantly improved when we undertook a follow up inspection on 20 April. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- The practice had invested heavily in a Wi-Fi based system to automatically monitor the temperature of the 11 fridges used to store certain medicines and vaccines across all of the surgeries. This monitored temperatures in real time and sent automated alerts to members of the senior management if temperatures went out of range. We were given an example of how this had already led to a fridge being de-commissioned to negate any possibility of vaccines being subject to temperature out of the normal permitted range.

- We found that the practice had reviewed and revised its policies and procedures in relation to the checking of emergency equipment and medicines across all sites. The nurse who most frequently worked at a particular surgery was responsible for completing the checks monthly and we saw evidence that this requirement was being adhered to.
- We saw that the policies and protocols relating to the administration of medicines and vaccines to patients by healthcare assistants had been reviewed and amended. The majority of patient specific directions had been signed by the practice matron, who was a prescriber in their own right. Others had been signed by GPs. We looked at the written authorities and found them to comply with the legal requirements. Currently in paper format, we were told that the practice were actively seeking to digitise the record keeping.
- At our previous inspection we found that two patients who were being prescribed lithium were not being effectively monitored by the practice. At this inspection we found the practice had updated the shared care protocol and lithium policy. The practice had also recruited a pharmacist to assist with the monitoring of high risk medications. Prescriptions also indicated when patients in this group were due a blood test.

Monitoring risks to patients

- We saw that the damaged bench seating in the patient waiting area at Kibworth had been removed in its entirety and replaced with easily cleaned chairs.

Arrangements to deal with emergencies and major incidents

- The practice had revised its arrangements for storing emergency equipment and medicines at the Kibworth surgery. The trolley was now located in the staff area of reception. Unauthorised access was prevented by the use of punch code door locks.

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 28 July 2016, we rated the practice as requires improvement for providing well led services as we identified concerns that:

- The practice had a governance framework that supported the delivery of quality care; however some of the framework required strengthening to ensure policies and protocols were followed.

We issued a requirement notice in respect of these issues.

We also found that:

- Nurses did not have their own meetings.
- The patient participation group was not well developed or particularly active.
- The practice management team were not actively visible at the Fleckney surgery.
- The number of identified carers was below what would have been expected.

Arrangements had significantly improved when we undertook a follow up inspection of the service on 20 April 2017. The practice is now rated as good for being well-led.

Governance arrangements

- The practice had reviewed a number of policies, procedures and policies since our last inspection. These included those relating to the administration of medicines and vaccines by healthcare assistants and the checking of emergency medicines and equipment.

- The practice had increased the number of identified carers by 13 since the last inspection and was continuing to try and identify more. The latest practice newsletter contained a section on young carers and asked them to identify themselves to the practice. The newsletter was recently published and it was too early to determine if it had been effective in identifying younger carers.

Leadership and culture

- The practice had responded to there being a perception of a lack of management visibility at the Fleckney surgery by ensuring that a senior member of the management team worked from that location on one afternoon a week. In addition the practice tried to ensure, whenever possible that the GP working from that location was one of the GP partners.
- Although nurses attended the monthly clinical meetings, meetings aimed solely at nursing staff and healthcare assistants were now held every three months.

Seeking and acting on feedback from patients, the public and staff

- The patient participation group was an on line 'virtual' group with approximately 60 members. The practice was sighted on the group not being very active or effective and had published an article in the practice newsletter asking people to attend a meeting in the hope of improving the situation. If successful it was planned to hold similar meetings quarterly.