

Theale Medical Centre

Quality Report

Englefield Road

Theale

Reading

RG7 5AS

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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

Our previous inspection in November 2014 found breaches of regulations relating to the safe delivery of services.

We found the practice required improvement for the provision of safe services, and was rated good for providing effective, caring, responsive and well-led services. The population groups were rated as good for the patients registered at the practice.

This inspection was undertaken to check the practice was meeting regulations. For this reason we have only rated the location for the key questions to which these relate. This report should be read in conjunction with the full inspection report of 26 November 2014.

We found the practice had made improvements since our last inspection. At our inspection on the 30 September 2015 we found the practice was meeting the regulations that had previously been breached.

Specifically we found:

- Improvements had been made to maintain the accurate records of patients information. For example home visits had been properly recorded to ensure other staff would be able to access an accurate record of patients most recent care and treatment.
- The practice had instituted systems to manage medicines and nomad or blister packs were checked by a second member of staff.
- Staff were complying with the practice control of infection policy.
- The practice was actively identifying, assessing and managing risks to health and safety of patients, staff and visitors.

We have amended the rating for this practice to reflect these changes. The practice is now rated good for the provision of safe services.

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 had taken appropriate action to become good for the provision of safe services.

Records we reviewed and processes we observed confirmed this.

In September 2015, we noted the practice had addressed the issues, surrounding safeguarding, infection control and medicines management. These were judged as contributing to a breach of regulation at our inspection on 26 November 2014.

The practice had maintained patients accurate records of prescribed medicines, health needs and home visits. Risks to patients were assessed and well managed. The practice had reviewed and implemented the policies for management of medicines and infection control. Legionella and fire risk assessments had been carried out recently and the practice had developed detailed action plans to address the issues identified.

Good



Theale Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

This focused inspection was carried out by a CQC Inspector. The team included a GP specialist adviser and a practice manager specialist adviser.

Background to Theale Medical Centre

Theale Medical Centre has a patient population of approximately 10,850. There were five GP partners and a total of seven GPs, providing five full time equivalent GPs working at the practice. There was a mix of male and female GPs. The nursing team consisted of five practice nurses and one health care assistant. Administrative and reception staff also worked at the practice. Theale Medical Centre was a training practice.

Theale Medical Centre is a purpose built practice with patient services on the ground floor and administration functions on both floors. The practice has completed building extension work including two additional consulting rooms and five extra parking spaces.

We carried out an announced focused inspection of the practice on 30 September 2015. We visited Theale Medical Centre, Englefield Road, Theale, Reading, RG7 5AS as part of this inspection. The practice was located over two sites. The branch practice is called Calcot Surgery and was located at 72a Royal Avenue, Calcot, Reading, RG31 4UR. We did not visit this site as part of the inspection.

The practice has a General Medical Services (PMS) contract. PMS contracts are subject to local negotiations between commissioners and the practice.

The practice has opted out of providing out-of-hours services to their patients. There are arrangements in place for services to be provided when the practice is closed and these are displayed on the website.

The practice is open between 8am and 6.30pm Monday to Friday. Extended hours surgeries are offered on two evenings until 8pm during weekdays and 8:30am to 12:30pm on alternate Saturday mornings.

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection took place on 26 November 2014 and published a report setting out our judgements. These judgements identified two breaches of regulations. We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

We carried out a focused inspection on 30 September 2015 to follow up and assess whether the necessary changes had been made, following our inspection in November 2014. We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection.

This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, review the breaches identified and the rating awarded for the safe domain, under the Care Act 2014.

Detailed findings

How we carried out this inspection

Before visiting on 30 September 2015 the practice confirmed they had taken the actions detailed in their action plan.

During our visit we undertook some observations of the environment. We met with the practice manager and the business support manager. We spoke with two dispensers and a GP. We reviewed documents relevant to the management of the service. All were relevant to demonstrate the practice had addressed the breaches of regulation identified at the inspection of November 2014.

Are services safe?

Our findings

Reliable safety systems and processes including safeguarding

When we visited the practice in November 2014 we found a new patient with long term health condition did not have record of prescribed medicines or a plan for health checks required. There was a risk that patients may not be managed safely by the practice without an appropriate record of their medicine and health needs. We also found some home visits were not recorded properly to ensure other staff would be able to access an accurate record of patient's most recent care and treatment. This could pose a risk to patients if another GP went to see a patient whose previous home visit had not been recorded to indicate any treatment they may have received.

At the inspection on 30 September 2015 the GP advisor looked at 10 patient records and found all contained appropriate record of their medicine and health needs. We saw appropriate records were maintained of 131 home visits carried out in the last two months.

Medicines management

When we visited the practice in November 2014 we found the dispensing fridge minimum or maximum temperatures were not recorded. We found that nomad or blister packs were not checked by a second member of staff and some medicines had no batch number or expiry dates being recorded. We also found that prescription pads were not stored appropriately and pad numbers were not being logged when they were received.

During this visit on 30 September 2015 we saw that the practice purchased a new dispensing fridge and minimum and maximum temperatures were monitored daily and all the readings we checked showed the fridge to be operating within the required temperature ranges. We saw the practice had a clear policy for dispensing medicines and nomad or blister packs were checked by a second member of staff. At the time of inspection, 16 patients were getting nomad packs and staff were dispensing medicines in nomad packs on a fixed day every week. We checked number of records to ensure all medicines had batch numbers and expiry dates being recorded.

We saw there were procedures and policies in place for the management of prescriptions. Hand written prescription

pads were stored in a locked drawer and pad numbers were being logged and monitored. We saw recent audit was carried out in June 2015. Printer blank prescription boxes were stored in a cupboard in the dispensary and prescriptions were always stored in the locker rooms.

Cleanliness and infection control

When we visited the practice in November 2014 we found that some cleaning equipment was not designated for different areas of the practice, to reduce the risk of cross infection. Staff we spoke with were unable to locate the infection control audit. We also found the practice had not undertaken a risk assessment for legionella (a bacterium which can contaminate water systems in buildings) to determine what action may be required to reduce any risk of infection.

During this visit on 30 September 2015 we saw cleaning equipment was designated for different areas of the practice to minimise the risk of cross infection. We noted that the practice was complying with control of infection policy and carried out three repeated infection control audits in last 12 months.

The practice had undertaken a risk assessment for legionella on 24 September 2015 (delayed due to building extension work). The practice had received a legionella risk assessment report from the external contractor few days after the inspection, which had identified number of high risk areas. The practice had developed a detailed action plan to address the issues identified and further appointment was booked with contractor to complete the work by 30 November 2015.

Staffing and recruitment

When we visited the practice in November 2014 we found some GPs registration certificates had not been checked to ensure their registration with the General Medical Council was up to date.

During this visit on 30 September 2015 we saw GPs registration checks were completed and annual checks were diarised to ensure consistency.

Monitoring safety and responding to risk

When we visited the practice in November 2014 we found the practice had not undertaken a risk assessment for fire safety.

Are services safe?

During this visit on 30 September 2015 we saw the practice had undertaken a risk assessment for fire safety on 29 September 2015 (delayed due to building extension work). The practice had received a fire safety risk assessment report from the external contractor few days after the inspection, which had identified some risk areas. The practice had developed a detailed action plan to address the issues identified and further appointment was booked with contractor to complete the work by 30 November 2015.

Arrangements to deal with emergencies and major incidents

When we visited the practice in November 2014 we found the practice was in the process of reviewing a business continuity plan.

During this visit on 30 September 2015 we saw the practice had reviewed a business continuity plan. The new plan included a reciprocal arrangements to provide patients with a practice to attend in emergencies at another practice and also with church hall across the road in the event that Theale Medical Centre and Calcot practice were closed.