

Stockwood Medical Centre

Quality Report

Hollway Road
Stockwood
Bristol
BS14 8PT
Tel: 01275 833103
Website: www.stockwoodmedicalcentre.co.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 Stockwood Medical Centre on 16 December 2015. Overall the practice was rated as good with requires improvement for the safe domain. Following the inspection we issued a requirement notice. The notice was issued due to a breach of Regulation 12 of The Health and Social Care Act (Regulated Activity) Regulations 2014, Safe care and treatment.

The issues were:

- There was not a robust system in place to ensure that the agreement by the clinical governance lead for Patient Group Directions had been recorded to allow nurses to administer medicines in line with legislation.
- Staff who provided chaperone support when clinical staff were not available had not had appropriate training and checks to evidence that background security had been undertaken were not in place.
- There were gaps in the information retained in the practice to show that appropriate checks were carried out on locum GPs employed at the practice.

A copy of the report detailing our findings can be found at www.cqc.org.uk.

We carried out this announced focused inspection at Stockwood Medical Centre on 28 November 2016 to follow up the requirement notice which was issued on 16 December 2015 and to assess if the practice had implemented the changes needed to ensure patients who used the service were safe.

Our key findings across all the areas we inspected during this inspection were as follows:

- We saw evidence the provider had ensured there were safe systems in place for Patient Group Directions. These were adopted by the practice to allow nurses to administer medicines in line with legislation and had been signed by the clinical governance lead for the nursing staff.
- We saw evidence the provider had ensured that an appropriate system was in place for locum personnel employed to carry on the regulated activities. The practice held the required specified information in respect of persons employed by the practice as listed in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- We saw evidence that the policy and procedure for providing chaperones had been reviewed and updated. We found staff carrying out the role were suitably trained and appropriate employment checks had been carried out.

Summary of findings

Following this inspection the practice was rated overall as good across all domains.

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 domain for safe is now rated as good. This is because:

- The provider had ensured there were safe systems in place for Patient Group Directions. These were adopted by the practice to allow nurses to administer medicines in line with legislation had been signed by the clinical governance lead for the nursing staff.
- The provider had ensured there was appropriately training for staff in place to provide a chaperone service who had been Disclosure and Barring Service (DBS) checked.
- The provider had ensured that an appropriate system was now in place for employment checks for locum GPs.

Good



Stockwood 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 Stockwood Medical Centre

Stockwood Medical Centre, Holloway, Road, Bristol, BS14 8PT provides support for approximately 9248 patients in the Stockwood area of Bristol.

Stockwood Medical Centre is in a central position in the community of Stockwood. The practice building hosts NHS services such as the District Nursing Team. The building is accessible to patients with restricted mobility, wheelchair users and using pushchairs.

There are eight consulting rooms, two treatment rooms and a treatment suite. The waiting room is accessible and in a central area. There are administrative offices, meeting and staff rooms.

There are five partners and one salaried GP, four male and two female. There are two nurse practitioners and three practice nurses and two health care assistants. The practice employs a pharmacist to attend the practice for 15 hours per week. The clinical staff are supported by a practice business manager and an administration team.

The surgery is open from 8.30 am to 6.30 pm, Monday to Friday. Appointments can be made via the telephone between 8.00am and 6.30 pm Monday, Wednesday or Friday and 8.00am and 7.30 pm Tuesday and Thursday.

Patients who find it difficult to access a surgery during normal working the practice is open for additional hours 6.30 - 7.30 pm Tues and Thurs plus 8am – 10am every other Saturday for routine pre-booked appointments only.

The practice has a General Medical Services contract with NHS England. The practice is contracted for a number of enhanced services including extended hours access, facilitating timely diagnosis and support for patients with dementia, patient participation, minor surgery and childhood vaccination and immunisation scheme.

The practice does not provide Out Of Hour's services to its patients, this is provided by BrisDoc. Contact information for this service is available in the practice and on the website.

Patient Age Distribution

0-4 years old: 6% (similar to the national average)

5-14 years old: 10% (similar to the national average)

The practice had 10.7% of the practice population aged 75 years and above (above the national average 7.6%).

Other Population Demographics

% of Patients in a Residential Home: 1.4 %

Disability Allowance Claimants (per 1000) 59 (above the national average of 50.3)

% of Patients in paid work or full time education: 58.7 % (similar to the national average of 60.2%)

Practice List Demographics / Deprivation

Index of Multiple Deprivation 2010 (IMD): 20.9 (National average 23.6)

Income Deprivation Affecting Children (IDACI): 18 (National average 22.5)

Detailed findings

Income Deprivation Affecting Older People (IDAOPI): 16
(National average 22.5)

Why we carried out this inspection

We carried out a focused inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The 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, and to provide a rating for the service under the Care Act 2014.

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 28 November 2016.

During our visit we:

- Spoke with the practice manager.
- Reviewed documents relating to the recruitment and employment of staff, staff training, and the records relating to the management of medicines specifically Patient Group Directions, for the administration of vaccines.

Are services safe?

Our findings

Overview of safety systems and processes

At the last comprehensive inspection of Stockwood Health Centre undertaken on 16 December 2015 we found the arrangements for managing Patient Groups Directions (PGDs), chaperones and the recruitment of staff did not keep patients safe.

The concerns identified were:

- There was not a robust system in place to ensure that the delegation of authority agreement by the clinical governance lead for Patient Group Directions (PGD) had been signed to allow nurses to administer medicines in line with legislation.
- Staff who provided chaperone support when clinical staff were not available had not had appropriate training or Disclosure and Barring Service (DBS) checks in place.
- There were gaps in the information retained in the practice to show that appropriate checks were carried out on locum GPs employed at the practice.

At this announced focused inspection on 28 November 2016 we reviewed what steps the practice had taken in line with the information they had supplied in their action plan which was submitted following the inspection in December 2015.

At this inspection we found:

The practice staff had implemented changes which ensured that the PGD documents and information was monitored and kept up to date. We saw the PGD documents were organised, held the appropriate information, were in date and had been signed by the responsible GP.

We saw that the partners had reviewed their policy and procedure for providing a chaperone service. The reviewed policy and procedure now clearly outlined that the chaperone service would be provided by a clinician only, all of the clinicians at the practice had been trained and had, had a Disclosure and Barring Service (DBS) check carried out.

We looked at the improvements the provider had put in place regarding obtaining the necessary information before the employment of locum GPs. We saw that practice's locum employment check list had been updated and included detail of the required information that needed to be obtained by the practice prior to commencement of employment. For example, professional registration, qualifications and proof of identity had been corroborated. We saw that there was a small number of locum GPs used at the practice and that the practice had recently implemented a system to check and ensure that the detail and information about the locums was reviewed and approved by one of the GP partners.