# **Care Quality Commission**

## **Inspection Evidence Table**

## **Hockley Medical Practice (1-2301538212)**

Inspection date: 28 March 2019

Date of data download: 15 March 2019

## **Overall rating: Good**

# Safe Rating: Good

During our inspection in March 2018 we rated the practice as requires improvement for providing safe services. The practice did not have effective systems for monitoring and managing staff immunisation and safety training information. The practice had not done all that was reasonably practicable to mitigate risks in the security of prescription stationery, and we found examples where patients had not received the appropriate reviews.

During this inspection in March 2019 we found the practice had acted to improve their medicines management systems and their systems to manage staff information. The practice is now rated as good for providing safe services.

#### Safety systems and processes

The practice had clear systems, practices and processes to keep people safe and safeguarded from abuse.

Recruitment systems	Y/N/Partial
Staff vaccination was maintained in line with current Public Health England (PHE) guidance and if relevant to role.	Υ

Explanation of any answers and additional evidence:

During this inspection, we saw the practice had improved their processes and collected relevant immunisation status information for all non-clinical staff.

All staff had also been offered the flu vaccination.

Safety systems and records	Y/N/Partial
There was a record of fire training for staff.  Date of last training: from records we viewed all staff had completed fire training.	Υ
Explanation of any answers and additional evidence:	

During this inspection, we saw the practice had established a system that allowed them to monitor all staff training. From records we viewed all staff had completed mandatory training.

Staff told us all new staff were provided with an induction which included mandatory training and the practice offered all staff protected time for training.

#### Information to deliver safe care and treatment

Staff had the information they needed to deliver safe care and treatment.

	Y/N/Partial
There was a documented approach to the management of test results and this was managed in a timely manner.	Υ

Explanation of any answers and additional evidence:

During our inspection in March 2018 we found not all test results had been actioned in a timely manner. During this inspection, from records we viewed all tests results had been managed appropriately.

The practice had reviewed their systems to ensure all blood results were actioned on the day they arrived at the practice and no later than 24 hours after.

The practice had systems in place to monitor electronic inboxes and to prompt clinicians to review any un-actioned results.

#### Appropriate and safe use of medicines

# The practice had systems for the appropriate and safe use of medicines, including medicines optimisation

Medicines management	Y/N/Partial
Blank prescriptions were kept securely and their use monitored in line with national guidance.	Y
There was a process for the safe handling of requests for repeat medicines and evidence of structured medicines reviews for patients on repeat medicines.	Υ
The practice had a process and clear audit trail for the management of information about changes to a patient's medicines including changes made by other services.	Y
There was a process for monitoring patients' health in relation to the use of medicines including high risk medicines (for example, warfarin, methotrexate and lithium) with appropriate monitoring and clinical review prior to prescribing.	Y

Explanation of any answers and additional evidence:

Since our last inspection the practice had responded appropriately and reviewed their systems to ensure prescription stationery was stored securely and the practice now had an effective monitoring and audit system in place.

We saw that patients received appropriate monitoring and reviews before prescribing. The practice ran daily searches using their electronic system to identify patients requiring a review. The practice used alerts on the record system to help identify those patients requiring a review.

### **Medicines management**

Y/N/Partial

The practice had reviewed their systems to ensure all correspondence was actioned by a GP on the day it arrived at the practice and no later than 24 hours after.

The practice had systems in place to monitor electronic inboxes and to prompt clinicians to review any un-actioned clinical correspondence.

## **Effective**

#### Effective needs assessment, care and treatment

During our inspection in March 2018 we rated the population group, people whose circumstances make them vulnerable as requires improvement because the practice was not able to demonstrate they were carrying out annual reviews or engaging with patients with learning disabilities to encourage attendance for their review. **This population group is now rated as good.** 

People whose circumstances make them vulnerable

Population group rating: Good

#### **Findings**

- The practice continued to maintain a register of patients with learning disabilities.
- Staff told us since our inspection in March 2018 they had invited all patients with a learning disability to attend for a structured annual review.
- The practice gave us data that showed they had increased the number of face to face annual reviews from nil in 2017/2018 to 45% in 2018/2019.
- The practice told us they offered patients with learning disabilities home visits if they were needed for example, for annual reviews and for the flu vaccines.
- Staff told us it remained a significant challenge for the practice to improve uptake of appointments with this population group however they were trying to be proactive in their approach.