

St John's Medical Practice

Quality Report

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Date of inspection visit: 11 January 2017
Date of publication: This is auto-populated when the report is published

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 St John's Medical Practice on 23 August 2016. The overall rating for the practice was good but was rated as requires improvement for providing safe services. The full comprehensive report on the August 2016 inspection can be found by selecting the 'all reports' link for St John's Medical Practice on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 11 January 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 23 August 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

At our previous inspection on 23 August 2016, we rated the practice as requires improvement for providing safe services as not all clinical staff had received training on safeguarding vulnerable adults which was relevant to

their role and appropriate recruitment checks had not been undertaken prior to employment of new staff. At this inspection we found that all clinical staff had received and completed safeguarding vulnerable adults training that was relevant to their role and that systems and processes had been implemented to ensure appropriate recruitment checks were completed before new staff were employed at the practice.

Additionally, the practice provided evidence to show that they had taken action to address the areas where they should make improvements.

- A system had been implemented in order to help ensure that expiry dates of single use items were being routinely monitored and recorded.
- The written audit trail of complaint investigations had been improved.
- The minutes of meetings held at the practice had been improved in order to ensure they were fully auditable.

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 23 August 2016, we rated the practice as requires improvement for providing safe services as not all clinical staff had received training on safeguarding vulnerable adults which was relevant to their role and appropriate recruitment checks had not been undertaken prior to employment of new staff.

These arrangements had significantly improved when we undertook a follow up inspection on 11 January 2017. The practice is now rated as good for providing safe services.

The practice provided documentary evidence to show that they had taken action to address the areas where they must make improvements.

- All staff had received and completed training in safeguarding vulnerable adults
- Personnel files for newly recruited staff had been updated to include pre-employment recruitment checks.

The practice provided documentary evidence to show that they had taken action to address the areas where they should make improvements.

- The incident recording form had been updated to include the duty of candour as a consideration (The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment).
- The written audit trail of incident investigations had been improved.
- A system had been implemented to help ensure that single use items were being routinely monitored and recorded.

Good



St John's Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to St John's Medical Practice

St Johns Medical Practice is situated in Sevenoaks, Kent. There are 10001 patients registered with the practice.

Sevenoaks is a commuter town and 64% of patients are either working or in full-time education. Fourteen percent of patients are aged 65 years and over, which is lower than the national average at 17%. Two hundred patients are over the age of 75 and 331 patients registered with the practice are living with long-term conditions. There are 1966 patients between the ages of 20 and 74. The practice is on two levels and accessible for those patients using a wheelchair. There is a lift from the ground floor to the first floor. There is a car park at the premises, which is available for patients to use.

The practice holds a General Medical Services contract and consists of five GP Partners (all female) and one salaried GP (male). The GPs are supported by two practice nurses, a health care assistant, a practice manager and an administrative team. A wide range of services and clinics are offered by the practice including asthma and diabetes.

The practice is open from 8am to 6.30pm Mondays, Tuesdays, Thursdays and Fridays and from 8.15am to 8.30pm on Wednesdays. The practice closes between 1pm to 2pm on Mondays and Fridays for staff meetings.

Appointments are offered between the hours of 8.30am to 11.30am and 2.30pm to 5.30pm on Mondays, Tuesdays, Thursdays and Fridays and 8.30am to 11.30am and 2.30pm to 8pm on Wednesdays.

The practice telephones are answered between the hours of 8am and 6.30pm on Mondays, Tuesdays, Thursdays and Fridays and between 8am to 8.30pm on Wednesdays. There are arrangements with other providers, Integrated Care 24, to deliver services to patients outside of the practice's working hours. Patients requiring care between 6.30pm and 8am and when the practice is closed at weekends are asked to call the NHS 111 service to access that care.

The practice is not a teaching practice.

Services are delivered from:

- St Johns Medical Practice, 39 St John's Hill, Sevenoaks, Kent, TN13 3NT

Why we carried out this inspection

We undertook a comprehensive inspection of St John's Medical Practice on 23 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement for providing safe services. The full comprehensive report following the inspection in August 2016 can be found by selecting the 'all reports' link for St John's Medical Practice on our website at www.cqc.org.uk.

We undertook a follow up desk-based inspection of St John's Medical Practice on 11 January 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.

Detailed findings

How we carried out this inspection

We carried out a desk-based focused inspection of St John's Medical Practice on 11 January 2017. This involved reviewing documentary evidence that:

- Relevant staff had now completed their required safeguarding adult training.
- An ongoing recruitment check system had been implemented.

Are services safe?

Our findings

At our previous inspection on 23 August 2016, we rated the practice as requires improvement for providing safe services as not all clinical staff had received training on safeguarding vulnerable adults which was relevant to their role and appropriate recruitment checks had not been undertaken prior to employment of new staff.

These arrangements had significantly improved when we undertook a follow up inspection on 11 January 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

The practice provided documentary evidence to show that they had taken action to address the areas where they should make improvements.

- The incident recording form had been updated to ensure it identified the recording of notifiable incidents under the duty of candour.
- The written audit trail of investigations, actions taken and outcomes had been improved in order to help ensure they contained a unique identifier for each event, as well identifying the dates of actions taken, method, by whom and when those actions were completed.

Overview of safety systems and process

The practice provided documentary evidence to show that they had taken action to address the areas where they must make improvements.

- All staff had received and completed training in safeguarding vulnerable adults, which was relevant to their role. This included clinical and non-clinical staff.
- Personnel files for newly recruited staff had been updated to include photographic proof of identification/residence, satisfactory evidence of previous employment/full employment history and proof of professional qualifications, where necessary. Additionally, a checklist for recruitment checks had been implemented in order to help ensure, all appropriate checks had been obtained before staff commenced employment at the practice.

The practice provided documentary evidence to show that they had taken action to address the areas where they should make improvements.

- A system had been implemented in order to help ensure that expiry dates of single use items were being routinely monitored and recorded.