

Dr P D Miles

Quality Report

Meir Primary Care Centre,
Weston Road,
Stoke On Trent,
Staffordshire,
ST3 6AB
Tel: 0300 7900 169
Website: www.drmilesandpartner.co.uk

Date of inspection visit: 5 July 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

Contents

| | Page |
|---|------|
| Summary of this inspection | |
| Overall summary | 2 |
| The five questions we ask and what we found | 3 |
| <hr/> | |
| Detailed findings from this inspection | |
| Our inspection team | 4 |
| Background to Dr P D Miles | 4 |
| Why we carried out this inspection | 4 |
| How we carried out this inspection | 4 |
| Detailed findings | 6 |

Overall summary

Letter from the Chief Inspector of General Practice

We previously carried out an announced comprehensive inspection at Dr P D Miles on 17 August 2016. The overall rating for the practice was good with requires improvement in providing safe services. The full comprehensive report on the 17 August 2016 inspection can be found by selecting the 'all reports' link Dr P D Miles on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 5 July 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 17 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:

- There were emergency medicines available.
- There was an open and transparent approach to safety and an effective system in place for reporting and recording significant events. The practice had implemented a system to ensure the whole staff team were involved in the discussion and learning associated with the significant events.
- A log of verbal complaints received by the practice was kept and action taken recorded.
- Practice policies and procedures had been reviewed.
- The practice's business continuity plan had been reviewed to include staff contact numbers.

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 is rated as good for providing safe services.



- There was a system in place for reporting and recording significant events and lessons were shared with the rest of the team to make sure action was taken to improve safety in the practice.
- We found there were emergency medicines available to treat a range of sudden illness.
- The practice had a business continuity plan in place, which included staff telephone numbers.

Dr P D Miles

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection was carried out by one Care Quality Commission (CQC) inspector.

Background to Dr P D Miles

The practice of Dr P D Miles is registered with CQC as a partnership provider operating out of modern purpose built premises in Stoke on Trent. The practice holds a General Medical Services contract with NHS England and is part of the NHS Stoke on Trent Clinical Commissioning Group. Car parking, (including disabled parking) is available at this practice.

The practice area is one of more deprivation when compared with the local and the national average. The practice has more female patients over the age of 60 and more male patients over the age of 65 than the national average.

At the time of our inspection the practice had 3,961 registered patients. The practice is registered to undertake minor surgery.

The practice is a teaching and training practice and supports medical students from Keele University.

The practice staffing comprises of:

- Two GP's in partnership (two males).
- One practice nurse and one health care support worker.
- The practice manager, assisted by an assistant practice manager, oversees the operational delivery of services with a team of administrative and reception staff.

The practice is open 8am to 7pm Monday, Tuesday and Wednesday and 8am to 1pm on Thursday and 8am to 6pm Friday.

Appointments are from 8am to 12.30pm each morning. Afternoon appointments are from 2.30pm to 7pm on Monday, Tuesday and Wednesday and 3pm to 6pm on Friday.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr P D Miles on 17 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good with requires improvement in providing safe services. The full comprehensive report following the inspection on 17 August 2016 can be found by selecting the 'all reports' link for Dr P D Miles on our website at www.cqc.org.uk.

We undertook an announced follow up focused inspection of Dr P D Miles on 5 July 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.

How we carried out this inspection

We carried out an announced focused inspection of Dr P D Miles on 5 July 2017.

During our visit we:

- Spoke with the practice manager and the assistant practice manager.

Detailed findings

- Reviewed protocols and looked at information the practice used to deliver care and treatment.
- Checked the practice's emergency medicines.
- Looked at significant event logs and minutes of meetings where these were discussed.
- Reviewed the practice's business continuity plan.

- Reviewed the log of verbal complaints kept by the practice.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 17 August 2016, we rated the practice as requires improvement for providing safe services and issued a requirement notice. This was because we found:

- The practice did not have medicines available to treat possible complications associated with diabetes. Medicine used to treat a suspected heart attack had passed its expiry date.

We also issued good practice recommendations because:

- Although there was a system in place for reporting and recording significant events, lessons were not shared with the rest of the team to make sure action was taken to improve safety in the practice.
- Staff telephone numbers were not included within the business continuity plan.

These arrangements had significantly improved when we undertook a follow up inspection on 5 July 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

At our last inspection we looked at the practice's system for reporting and recording significant events. There was an open and transparent approach to safety and an effective system in place for reporting and recording significant events. We saw evidence that lessons were shared between the two partners and the practice manager, however they were not shared with the wider team. It was recommended that the practice considered implementing a recorded system of sharing practice wide learning and governance issues with the whole staff team.

During this inspection we found that the practice held meetings to discuss significant events. We saw minutes of these meetings which showed that the whole staff team were now involved in the discussion and learning associated with the significant events.

Arrangements to deal with emergencies and major incidents

At our last inspection we checked the arrangements in place to respond to emergencies and major incidents. We found that whilst there were emergency medicines available to treat a range of sudden illness, the practice did not have medicines available to treat possible complications associated with diabetes. Another medicine used to treat a suspected heart attack had passed its expiry date.

At our last inspection we also found that the practice had a comprehensive business continuity plan in place for major incidents such as power failure or building damage. The plan however did not include emergency contact numbers for staff.

During this inspection we checked the emergency medicines available. We found that the practice had obtained medicines for treating low blood sugar and all medicines checked were within their expiry date. We were told that the emergency medicines were checked on a monthly basis. We were told that a prompt had also been added to the practice's electronic calendar one month before each drug was due to expire as a reminder to order replacement medicines.

During this inspection we looked at the practice's business continuity plan. We found that the practice had actioned the best practice recommendation of the last report by including staff contact numbers to the plan. We were told that a copy of this plan could be accessed remotely.