

# Staines Thameside Medical

## Inspection report

5 Chertsey Lane

Staines

Middlesex

TW18 3JH

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[www.stainesthamesidemedical.co.uk/index.html](http://www.stainesthamesidemedical.co.uk/index.html)

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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 location

Good



Are services safe?

Requires improvement



# Overall summary

**This practice is rated as Good overall.** (Previous rating October 2017 – Good overall and in all domains with the exception of safe which was rated as required improvement)

The key questions at this inspection are rated as:

Are services safe? – Requires improvement

We carried out an announced focused inspection at Staines Thameside Medical on 6 November 2018. This was to follow up on a breach of regulations identified at our previous inspection. At our previous inspection on the 4 October 2017 we found that the provider did not demonstrate they had taken action where risks were identified and there was no documented evidence that learning from incidents and significant events was shared. The details of these can be found by selecting the 'all reports' link for Staines Thameside Medical on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

At this inspection we found:

- Annual infection control audits were undertaken and we saw evidence that some action had been taken to address the risks identified. We saw that the practice had not taken steps to mitigate all of the risks identified.
- Some fire risk assessments had been undertaken.
- The practice carried out analysis of significant events and shared the learning with colleagues.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

**Professor Steve Field** CBE FRCP FFPH FRCGP Chief Inspector of General Practice

**Please refer to the detailed report and the evidence tables for further information.**

## Our inspection team

Our inspection team consisted of a Care Quality Commission (CQC) lead inspector.

## Background to Staines Thameside Medical

Staines Thameside Medical is located in a two storey converted residential property with patient access rooms on both floors. At the time of our inspection there were approximately 4,200 patients on the practice list. The practice holds a General Medical Services (GMS) contract and provides GP services commissioned by NHS England. A GMS contract is one between the practice and NHS England and the practice where elements of the contract such as opening times are standard.

The practice has two GP partners (both female) who are supported by two nurses, a practice manager, as well as reception and administration staff.

The practice is open from 8am to 6:30pm Monday to Friday. Patients requiring a GP outside of normal hours are advised to call the NHS 111 service or 999 for medical emergencies.

The practice is part of a federation of GP practices that offer evening appointments until 9pm and weekend appointments 9am until 12pm. These appointments are run from locations in Walton-on-Thames, Ashford, Sunbury-on-Thames and Woking.

For further details about the practice please see the practice website:

The practice is registered with CQC to provide the following regulated activities; Diagnostic and screening procedures, Treatment of disease, disorder or injury, Family planning services and Surgical procedures.

The service is provided at the following location:

5 Chertsey Lane, Staines, Surrey TW18 3JH.

# Are services safe?

**We rated the practice as requires improvement for providing safe services.**

**At our previous inspection on 4 October 2017, we rated the practice as requires improvement for providing safe services as the provider did not demonstrate they had taken action where risks were identified and there was no documented evidence that learning from incidents and significant events was shared.**

**There had been improvement in the arrangements for documenting shared learning. However, arrangements for managing risk had not improved sufficiently when we undertook a follow up inspection on 6 November 2018. The practice remains rated requires improvement for providing safe services.**

## Safety systems and processes

The practice did not have clear systems to keep people safe and safeguarded from abuse.

- There was not an effective system to manage infection prevention and control.
- The practice had arrangements to ensure that facilities and equipment were safe and in good working order.

- Arrangements for managing waste and clinical specimens kept people safe.

## Track record on safety

The practice did not have a good track record on safety.

- There were not up to date comprehensive risk assessments in relation to safety issues. The risks identified were not all mitigated.

## Lessons learned and improvements made

The practice learned and made improvements when things went wrong.

- Staff understood their duty to raise concerns and report incidents and near misses. Leaders and managers supported them when they did so.
- There were adequate systems for reviewing and investigating when things went wrong. The practice learned and shared lessons, identified themes and took action to improve safety in the practice.

**Please refer to the evidence tables for further information.**