

Morrab Surgery

Quality Report

2 Morrab Road

Penzance

Cornwall

TR18 4EL

Tel: 01736 363866

Website: <http://www.morrabsurgery.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

Outstanding



Are services safe?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out a desktop review of Morrab Surgery on 26 November 2015. This was to review the actions taken by the provider as a result of our issuing a legal requirement.

Overall the practice has been re-rated as OUTSTANDING following our findings.

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

- The provider had established and is operating effective recruitment procedures to ensure that information regarding pre-employment checks are kept regarding persons employed.

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 now rated as good for safe having improved systems and processes to reduce safety risks. These included recruitment processes for staff, which demonstrate that pre-employment checks were consistently performed.

Our findings at the last inspection were that staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses. Lessons were learned and communicated widely to support improvement. Information about safety was recorded, monitored, appropriately reviewed and addressed. Risks to patients were assessed and well managed. There were enough staff and the practice demonstrated they reviewed resources in line with patient needs.

Good



Morrab Surgery

Detailed findings

Why we carried out this inspection

We carried out an inspection of Morrab Surgery on 11 March 2015 and published a report setting out our judgements. We asked the provider to send us a report of the changes they would make to comply with the regulations they were not meeting.

We have followed up to make sure the necessary changes have been made and found the provider is now meeting the fundamental standards included within this report. This

report should be read in conjunction with the comprehensive inspection report.

How we carried out this inspection

We reviewed information sent to us by the practice, which included evidence showing how the improved recruitment procedures had been followed.

Are services safe?

Our findings

Staffing and recruitment

Following the comprehensive inspection in March 2015, the practice sent us an action plan and provided evidence showing the improvements made. The improvements have shown that effective standard operating procedures for recruitment are now in place and being followed.

For this desktop review we reviewed the new recruitment policy and procedures, which were being followed. For example, a standardised checklist had been developed to track all the checks carried out for new staff prior to employment. This included recording that the performers list held by the local area team had been checked prior to appointment of a GP, including locum GPs. We saw an example of records held showing the checks carried out for a new member of staff, which demonstrated this process had been followed.

In March 2015, we had no other concerns about staffing arrangements. Staff told us about the arrangements for planning and monitoring the number of staff and mix of staff needed to meet patients' needs. We saw there was a rota system in place for all the different staffing groups to ensure that enough staff were on duty. There was also an arrangement in place for members of staff, including nursing and administrative staff, to cover each other's annual leave.

Staff told us there were usually enough staff to maintain the smooth running of the practice and there were always enough staff on duty to keep patients safe. Records demonstrated that actual staffing levels and skill mix were in line with planned staffing requirements. The turnover was low.