

# The Crescent Surgery

## Quality Report

38 Marion Crescent  
St Mary Cray  
Orpington  
Kent  
BR5 2DD

Tel: 01689 818696

Website: [www.the-crescent-surgery.co.uk](http://www.the-crescent-surgery.co.uk)

Date of inspection visit: 30 January 2018

Date of publication: 26/02/2018

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

### Summary of this inspection

Overall summary

Page

2

### Detailed findings from this inspection

Our inspection team

3

Background to The Crescent Surgery

3

Why we carried out this inspection

3

Detailed findings

4

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at The Crescent Surgery on 25 May 2017. The overall rating for the practice was Good. However, a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was identified, and we rated the practice as requires improvement for providing safe services. The full comprehensive inspection report published July 2017 can be found by selecting the 'all reports' link for The Crescent Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based follow up inspection, we looked at photos, certificates, audits, minutes of meetings and policies, carried out on 30 January 2018 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 25 May 2017. This report covers our findings in relation to those requirements.

The practice is rated as Good for providing safe services.

Our key findings were as follows:

- The practice assessed the risk of, and preventing, detecting and controlling the spread of infections, including those that are health care associated.
- Staff were following a cleaning schedule.

- Mops and buckets were colour coded.
- Disposable curtains were used in the nurses' room.
- Orange top sharps bin were used in the GP and nurse rooms, and a poster was displayed in both rooms explaining the difference in colour coded sharp bins.
- An infection control audit had been conducted in November 2017.
- The healthcare assistant had undertaken infection control training.
- A meeting had taken place which discussed key staff members, sharps bins and a cleaning schedule for all staff.
- The service had updated their policy on the storage of medicine.
- The 2017 GP patient survey results for access to appointment showed 89% of patients found it easy to get through on the phone local 72% national 81%. 80% of respondents were satisfied with the surgery's opening hours 74% local 76% national. 86% of patients were able to get an appointment 85% local 84% national. 87% of patients say the last appointment they got was convenient local 81% national 81%.

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

# The Crescent Surgery

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a CQC lead inspector.

## Background to The Crescent Surgery

The practice operates from one site in Bromley. It is one of 47 GP practices in the Bromley Clinical Commissioning Group (CCG) area. There are approximately 2800 patients registered at the practice. The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, maternity and midwifery services, and treatment of disease, disorder or injury.

The proportion of people using the service aged 50-74 are above both the England and CCG averages for female patients. The proportions for male patients are broadly in line with both England and the CCG averages except for the number of male patients aged 65-69, which is higher than both averages.

The practice facilities include two consulting rooms, induction loop, wheelchair access, step-free access, accessible toilet, and baby changing facilities. The Crescent Surgery is run by a single GP, supported by a salaried GP. The GPs work a combined total of nine sessions per week. Other practice staff include a practice nurse, a healthcare assistant, a practice manager and four administration/reception staff reception.

The practice is currently open between 8am and 6.30pm Monday, Tuesday, Wednesday and Friday. On Thursday it is open 8am to 1pm. It offers extended hours from 6.30pm to 7.15pm Tuesday and every other Wednesday from 6.30pm to 7pm. Appointments are available from 8.30am to 12.30pm and from 4.30pm to 6pm Monday, Tuesday, Wednesday and Friday, and Thursday 8.30am-1pm. There are two treatment/consulting rooms on the ground floor.

The practice has opted out of providing out-of-hours (OOH) services and directs patients needing care outside of normal hours to the local out-of-hours service through the 111.

## Why we carried out this inspection

We undertook a comprehensive inspection of The Crescent Surgery on 25 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Overall, the practice was rated as good, but was rated requires improvement for providing safe services.

We sent the provider a requirement notice as follows:

Regulation 12 HSCA (Regulated Activities) Regulations 2014 (Safe care and treatment) as the practice did not assess the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated.

We undertook this follow up desk-based focused inspection of The Crescent Surgery on 30 January 2018. This inspection was carried out to check that the provider had taken action to comply with legal requirements.

# Are services safe?

## Our findings

At our previous inspection on 25 May 2017, we rated the practice as requires improvement for providing safe services as the practice did not assess the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated. For example: staff were not following cleaning schedules, mops and buckets were not colour coded, fabric curtains were used in the nurses' room and orange top sharps bins were not used.

These arrangements had improved when we undertook this desk-based follow up inspection on 30 January 2018. The service is now rated as good for providing safe service.

### **Safety systems and processes**

- There were cleaning schedules and monitoring systems in place. Staff were aware of and followed the schedule.
- Mops and buckets were coloured coded.
- Disposable curtains were used in the nurses' room.
- Orange top sharp bins were used in all clinical rooms.