

# The Knoll Surgery

## Quality Report

Princeway Health Centre  
Princeway  
Frodsham  
Cheshire  
WA6 6RX

Tel: 0844 477 3936

Website: [www.theknollsurgery.co.uk](http://www.theknollsurgery.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

Good



Are services safe?

Good



# Summary of findings

## Contents

### Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4
Areas for improvement	5

### Detailed findings from this inspection

Our inspection team	6
Background to The Knoll Surgery	6
Why we carried out this inspection	6
How we carried out this inspection	6
Detailed findings	7

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of The Knoll Surgery on 2 November 2016. The overall rating for the practice was good. However, the practice was rated as requires improvement for providing safe services. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for The Knoll Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on 23 August 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation that we identified at our previous inspection on 2 November 2016. This report covers our findings in relation to those requirements and additional improvements made since our last inspection.

Overall the practice is rated as good and now as good for providing safe services.

Our key findings were as follows:

- Action had been taken to improve the safety of the premises.

In addition, the practice had made the following improvements:

- Action had been taken to improve the security of medication at the branch practice
- The system for ensuring that the protocol around the safe management of vaccines had been reiterated to relevant staff.
- Checks of the stocks of controlled drugs were continuing to be carried out by two staff members.
- The system for identifying dispensing errors and monitoring uncollected prescriptions had been reviewed.
- The system for ensuring staff were provided with the training needed for their roles had been improved.

The areas where the provider should make improvements are:

- Carry out and document weekly in-house checks of the fire alarm and monthly checks of the emergency lighting.
- A copy of the report to confirm the electrical wiring at the branch practice is satisfactory should be forwarded to CQC.

# Summary of findings

**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. Overall action had been taken to ensure that the premises were safely maintained. The service should provide CQC with a copy of the electrical wiring certificate for the branch practice and ensure weekly in-house checks of the fire alarm and monthly in-house checks of emergency lighting are recorded.

**Good**



# Summary of findings

## Areas for improvement

### Action the service **SHOULD** take to improve

- Carry out and document weekly in-house checks of the fire alarm and monthly checks of the emergency lighting.
- A copy of the report to confirm the electrical wiring at the branch practice is satisfactory should be forwarded to CQC.

# The Knoll Surgery

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

The inspection was undertaken by a CQC inspector.

## Background to The Knoll Surgery

The Knoll Surgery is responsible for providing primary care services to approximately 12,170 patients. The practice is situated in Princeway Health Centre in Frodsham, Cheshire. There is a branch practice which is situated in the village of Kingsley, approximately three miles from the main health centre. A medication dispensary service is provided at The Knoll Surgery and medication for acute conditions is dispensed from the branch practice. The practice is based in an area with lower levels of economic deprivation when compared to other practices nationally.

The staff team includes eight partner GPs and a partner who is the manager of the service. A nurse clinician, three practice nurses, two health care assistants, a phlebotomist, practice manager, administration, reception and medication dispensary staff. The Knoll Surgery is open 8am to 6.30pm Monday to Friday. The branch practice is open one afternoon and four mornings each week. The dispensary services are open the same hours as the practices. An extended hour's service for routine appointments and an out of hour's service are commissioned by West Cheshire CCG and provided by Cheshire and Wirral Partnership NHS Foundation Trust. The extended hour's service is based in the nearby village of Helsby on Monday and Tuesday evenings.

The practice has a General Medical Services (GMS) contract. The practice offers a range of enhanced services such, minor surgery, timely diagnosis of dementia and avoidance of unplanned hospital admissions.

## Why we carried out this inspection

We undertook a comprehensive inspection of The Knoll Surgery on 2 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. However, the practice was rated as requires improvement for providing safe services. The full comprehensive report following the inspection on 2 November 2016 can be found by selecting the 'all reports' link for The Knoll Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook an announced desk-based focused inspection on 23 August 2017. This inspection was carried out to review 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 a desk-based focused inspection of The Knoll Surgery on 23 August 2017. This involved reviewing:

- Records sent to us by the practice and an action plan developed by the practice indicating how improvements had been made to safety.

# Are services safe?

## Our findings

At our previous inspection on 2 November 2016 we rated the practice as requires improvement for providing safe services. Improvements were needed to ensure the premises were safe. An up to date electrical wiring certificate was not available for the branch practice, the emergency lighting had not been inspected and in-house fire safety checks were not recorded.

When we undertook a follow up inspection on 23 August 2017 we found that improvements had been made. New lighting had been obtained to provide lighting at the premises of the branch practice in the event of a power cut. This had been checked to ensure it was working but a regular system to check this was not in place. Checks of the fire alarm had been carried out weekly recently but since the last inspection they had not occurred weekly on a consistent basis. An electrical wiring inspection of the branch was carried out in June 2017 which found that some improvements were required. The practice manager

told us that these improvements had been carried out but that a new certificate to confirm this had not been issued. The practice manager confirmed that they had arranged for further testing and certification to be completed on 30th September 2017.

In addition we found that further improvements had been made to ensure the safety of the service. Action had been taken to improve the security of the storage of medication and the arrangements for dispensing medication at the branch practice. The system for ensuring that the protocol around the safe management of vaccines was followed whenever the fridge temperature fell outside the recommended guidelines had been reiterated to all staff. Checks on the stocks of controlled drugs were continuing to be carried out by two staff members. The system for identifying dispensing errors and monitoring uncollected prescriptions had been reviewed. The system for ensuring staff were provided with the training needed for their roles had been improved.