Crest Medical Centre

Quality Report

Crest Medical Centre
157 Crest Road
Neasden
London
NW2 7NA
Tel: 020 8452 5155
Website: None

Date of inspection visit: 5 September 2016
Date of publication: 24/10/2016

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

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of Crest Medical Centre on 25 March 2015. At that time we found the practice was breaching legal requirements in relation to its recruitment practice and the practice was rated as requires improvement for providing safe care. The previous comprehensive inspection report can be found by selecting the 'all reports' link for Crest Medical Centre on our website at www.cqc.org.uk.

Following that inspection, the practice wrote to us with details of the actions they would take to meet the legal requirements.

We undertook this focused inspection to check that the practice had followed their plan and to confirm that they now met the legal requirements. This inspection did not include a visit to the practice. This report covers our findings from the focused inspection.

We found the practice was now providing safe services and have rated the practice as good for providing safe care.

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

- Systems and processes were in place to keep people safe. The practice had taken steps to ensure risks to patients were assessed and well managed.
- The practice had carried out all necessary recruitment checks and could evidence this. The practice recruitment policy specified the recruitment checks which were required and these were in line with the relevant regulations.
- All staff had completed training on safeguarding children and vulnerable adults to the relevant level. The practice kept a record of staff training and alerted staff members when refresher training was due.

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?

Good

The practice is rated as good for providing safe services.

Improvements had been made in the way the practice ensured risks to patients were assessed and managed.

Crest Medical Centre

Detailed findings

Background to Crest Medical Centre

Crest Medical Centre is located in a residential area of Brent and provides a general practice service to around 4,300 patients. The practice has a younger, more diverse population than the English average.

The clinical practice team comprises of four GPs (male and female). The practice also offers appointments with the practice nurses, health care assistants and phlebotomy appointments. The practice employs a practice manager and receptionists.

The practice opens from 8:45am until 12:45pm every weekday and then from 4:45pm until 7.00pm Monday, Tuesday and Wednesday and until 6:30pm on Friday. The practice provides information about out of hours services at the practice and by telephone. The practice does not have a website.

The practice is registered to provide the regulated activities of diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder and injury.

Why we carried out this inspection

We undertook a focused, desk-based inspection of Crest Medical Centre. This was because the service had been identified as not meeting all legal requirements and regulations at our previous inspection on 25 March 2015. Specifically, breaches of regulations 18 Staffing and 19 Fit and proper persons employed of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 were identified.

We found that patients were at risk of harm because there were gaps in recruitment checks undertaken prior to employing staff, in particular the practice did not have evidence of new staff members' conduct in their previous employment.

We also found that not all staff members had received mandatory training updates on safeguarding although we noted that the practice had unsuccessfully sought to book suitable training.

This focused inspection was carried out to check that improvements to meet legal requirements had been made. We inspected the practice against one of the five questions we ask about services: Are services safe?

Good

Are services safe?

Our findings

Overview of safety systems and processes

The practice had taken steps to mitigate the risks to patients in relation to staff recruitment.

- The practice's recruitment policy and procedure clearly stated the recruitment checks that were required before new recruits started work at the practice. These checks included references from any previous employer as evidence of satisfactory conduct. The practice's recruitment process was in line with the regulations.
- The practice also confirmed that it had retrospectively received references for one staff member where these had been missing and made this available for CQC to view.
- The practice manager used a recruitment checklist to ensure that all checks were requested and followed up.

The practice had taken steps to mitigate the risks in relation to safeguarding children and vulnerable adults from abuse.

- The practice submitted documentary evidence showing that all staff had received training in safeguarding children and vulnerable adults within the last year.
- The GPs and practice nurses had been trained in safeguarding children to 'level 3' as required.
- The practice manager kept a training record and tracked when mandatory training updates were due and alerted staff accordingly.