

New Pond Row Surgery

Quality Report

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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

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Why we carried out this inspection	4
Detailed findings	5

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of New Pond Row Surgery on 7 January 2015. The practice was found to require improvement for providing safe services.

Following the comprehensive inspection, the practice sent us an action plan detailing what they would do to meet the regulations in relation to the following:

- Ensure that all recruitment checks are carried out and recorded as part of the staff recruitment process.
- Ensure risk assessment and monitoring processes effectively identify, assess and manage risks relating to the risk of exposure of staff and patients to legionella bacteria.

Our previous report also highlighted areas where the practice should improve:

- Ensure all investigation records and responses to complaints are stored centrally to provide a clear audit trail of actions taken.
- Continue to review and improve access to the practice by phone.
- Repair the key cupboard within the practice to ensure the security of all areas of the practice.
- Ensure adequate staffing levels at all times, particularly to ensure reception staff are adequately supported.

We undertook this focused inspection on 19 August 2015 to check that the provider had followed their action plan and to confirm that they now met the regulations. At this inspection we found the practice was good for providing safe services.

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

- The practice had developed processes to ensure that all necessary recruitment checks were carried out and recorded as part of the recruitment process.
- The practice had undertaken a comprehensive risk assessment in order to identify, assess and manage risks relating to the potential exposure of staff and patients to legionella bacteria.
- Complaints were well managed and all records and responses relating to complaints had been stored centrally to ensure a clear audit trail of all actions taken.
- The practice had installed call management software to monitor patient access to the practice by telephone. Patient access to the practice by telephone had been improved as a result.
- The practice had carried out and recorded a risk assessment to identify and ensure minimum staffing levels.
- The practice had replaced the key cupboard to ensure the security of all areas of the practice.

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 providing safe services.

At our last inspection we found that the practice had not considered the risks associated with potential exposure to legionella bacteria which is found in some water systems. Some staff felt that reception staffing levels were sometimes too low, with occasions when reception staff worked alone at certain times of the day. The main key cupboard within the practice, which was intended to ensure that keys were stored securely, was not fit for purpose. The practice had not ensured that all recruitment checks were carried out and recorded as part of the staff recruitment process.

At this inspection we found that the practice had undertaken a comprehensive assessment to identify, assess and manage the risks relating to the potential exposure of staff and patients to legionella bacteria. The practice had carried out and recorded a risk assessment to identify and ensure minimum staffing levels. The key cupboard had been replaced to ensure the security of all areas of the practice. The practice had developed processes to ensure that all necessary recruitment checks were carried out and recorded as part of the recruitment process.

Good



New Pond Row Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 on

7 January 2015 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breaches of regulations were found and the practice was required to make improvements. As a result we undertook a focused inspection on 19 August 2015 to follow up on whether action had been taken to deal with the breaches of regulations.

Are services safe?

Our findings

Cleanliness and infection control

At our previous inspection we found that the practice had not considered the risks associated with potential exposure to legionella bacteria which is found in some water systems. There were no processes in place to ensure regular checks were carried out to reduce the risk of exposure of staff and patients to legionella bacteria.

At this inspection we reviewed the comprehensive risk assessment undertaken by an external advisor in July 2015. We saw that remedial works to the practice building which had been recommended within the risk assessment had been scheduled for September 2015. The practice manager had received training to monitor water temperatures within the practice. We saw that water temperature monitoring had been recorded on a weekly basis. The external advisor had taken water samples for testing at the time of the risk assessment and the testing was scheduled to be repeated every six months.

Staffing and recruitment

At our previous inspection we reviewed personnel records and found that appropriate recruitment checks had not always been undertaken prior to employment. For example, the records we reviewed did not all contain proof of identification including photographic identification, evidence of professional registration and evidence of professional qualifications achieved.

At this inspection we reviewed personnel records of three staff members who had been recently recruited by the

practice. We found that the practice had ensured that appropriate recruitment checks were undertaken prior to employment. For example, proof of identification, references, qualifications and registration with the appropriate professional body. There were recruitment policies and checklists in place which set out the standards followed when recruiting clinical and non-clinical staff. The practice had undertaken an assessment of all roles within the practice to determine the need for criminal records checks through the Disclosure and Barring Service (DBS). As a result, where required, staff had been subject to a criminal records check. We saw evidence of these checks.

At our previous inspection most 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. However, some staff felt that reception staffing levels were sometimes too low, with occasions when reception staff worked alone at certain times of the day. At this inspection we found that the practice manager had carried out and recorded a risk assessment to identify and ensure minimum staffing levels. The risk assessment was on display within the practice.

Equipment

At our previous inspection we found that the main key cupboard within the practice which was intended to ensure that keys were stored securely was not fit for purpose. The lock on the cupboard was not working effectively and presented a risk that keys could be accessed. At this inspection we noted that the practice had replaced the key cupboard and had ensured the safe and secure storage of all keys within the practice.