

Albion Street Surgery

Quality Report

10 Albion Street Heckmondwike WF16 9LQ Tel: 01924 402073 Website: www.albionsurgery.co.uk

Date of inspection visit: 14 July 2016 Date of publication: 27/09/2016

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	
Are services well-led?	Good	

Contents

Summary of this inspection	Page
Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	5
Detailed findings from this inspection	
Our inspection team	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 at Albion Street Surgery on 17 December 2015. The practice was rated as requires improvement for safe and well led. The overall rating was requires improvement. Breaches of legal requirements were found.

Following on from the inspection the practice provided us with an action plan detailing the evidence of the actions they had taken to meet the legal requirements in relation to providing safe and well led services to the patients.

We undertook a focused follow up inspection and visited the practice on 14 July 2016. This was to review in detail the information the practice had sent to us, observe the improvements made to the premises and to confirm that the practice were now meeting legal requirements. This report only covers our findings in relation to those legal requirements.

The full comprehensive report which followed the inspection in December 2015 can be found by selecting the 'all reports' link for Albion Street Surgery on our website at www.cqc.org.uk.

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

- Risks to patients were assessed and well managed.
 Risk assessments relating to health and safety, fire
 safety and COSHH (Control of Substances Hazardous
 to Health) had been undertaken. A fire alarm system,
 emergency lighting and exit signage had been
 installed.
- The practice had a system to ensure patient safety alerts were received and acted upon.
- Testing of the electrical hard wiring of the building had been undertaken and electrical fixtures had been replaced to meet modern standards.
- The practice manager and practice nurse were infection prevention and control leads. The practice had carried out IPC audits. Cleaning schedules had been introduced and were being followed.
- Clinical equipment was checked to ensure it was working properly.
- The practice carried out and documented actions such as flushing toilets and running taps in the disused bathroom which were necessary to prevent legionella contamination. Legionella is a term for a particular bacterium which can contaminate water systems in buildings.
- Staff had cleared the premises of inappropriate items and clutter had been removed.
- Practice specific policies were updated and were available to all staff.

• Effective arrangements had been made to identify, record and manage risks, issues and implement mitigating actions.

Professor Steve Field (CBE FRCP FFPH FRCGP) Chief Inspector of General Practice on our website at www.cqc.org.uk

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.

- Risks to patients were assessed and well managed. Risk assessments relating to health and safety, fire safety and COSHH (Control of Substances Hazardous to Health) had been undertaken. A fire alarm system, emergency lighting and exit signage had been installed.
- The practice had a system to ensure patient safety alerts were received and acted upon.
- Testing of the electrical hard wiring of the building had been undertaken and electrical fixtures had been replaced to meet modern standards.
- The practice manager and practice nurse were infection prevention and control leads. The practice had carried out IPC audits. Cleaning schedules had been introduced and were being followed.
- Clinical equipment was checked to ensure it was working properly.
- The practice carried out and documented actions such as flushing toilets and running taps in the disused bathroom which were necessary to prevent legionella contamination. Legionella is a term for a particular bacterium which can contaminate water systems in buildings.
- Staff had cleared the premises of inappropriate items and clutter had been removed.

Are services well-led?

The practice is rated as good for being well-led.

- Practice specific policies were updated and were available to all staff.
- Effective arrangements had been made to identify, record and manage risks, issues and implement mitigating actions.

Good



Good

The six population groups and what we found

We always inspect the quality of care for these six population groups.

we always inspect the quality of care for these six population groups.	
Older people The provider had resolved the concerns identified for safety and well-led which applied to everyone using the practice, including this population group. The population group ratings have been updated to reflect this.	Good
People with long term conditions The provider had resolved the concerns identified for safety and well-led which applied to everyone using the practice, including this population group. The population group ratings have been updated to reflect this.	Good
Families, children and young people The provider had resolved the concerns identified for safety and well-led which applied to everyone using the practice, including this population group. The population group ratings have been updated to reflect this.	Good
Working age people (including those recently retired and students) The provider had resolved the concerns identified for safety and well-led which applied to everyone using the practice, including this population group. The population group ratings have been updated to reflect this.	Good
People whose circumstances may make them vulnerable The provider had resolved the concerns identified for safety and well-led which applied to everyone using the practice, including this population group. The population group ratings have been updated to reflect this.	Good



Albion Street Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The focused inspection was carried out by a CQC inspector.

Why we carried out this inspection

We carried out an announced comprehensive inspection at Albion Street Surgery on 17 December 2015. The practice was rated as requires improvement for safe and well led. The overall rating was requires improvement. Breaches of legal requirements were found.

Following on from the inspection the practice provided us with an action plan detailing the evidence of the actions they had taken to meet the legal requirements in relation to providing safe and well led services to the patients.

How we carried out this inspection

We undertook a focused follow up inspection and visited the practice on 14 July 2016. This was to review in detail the information the practice had sent to us, observe the improvements made to the premises and to confirm that the practice were now meeting legal requirements. This report only covers our findings in relation to those legal requirements.

The full comprehensive report which followed the inspection in December 2015 can be found by selecting the 'all reports' link for Albion Street Surgery on our website at www.cqc.org.uk.



Are services safe?

Our findings

The practice is rated as good for providing safe services.

This focused inspection was conducted in order to review safety issues which were identified at the comprehensive inspection carried out on 17 December 2015. This inspection found that the practice required improvement in relation to providing safe services to patients. At this focused inspection we rated the practice as good for providing safe services.

At this inspection we found:

- Risks to patients were assessed and well managed. Risk assessments relating to health and safety, fire safety and COSHH (Control of Substances Hazardous to Health) had been undertaken. A fire alarm system, emergency lighting and exit signage had been installed.
- We saw that the practice had a system to ensure patient safety alerts were received and acted upon.

- Testing of the electrical hard wiring of the building had been undertaken and electrical fixtures had been replaced to meet modern standards. New plug sockets had been installed and the practice had discarded electrical extension leads.
- The practice manager and practice nurse were infection prevention and control leads (IPC). The practice had carried out IPC audits. Cleaning schedules had been introduced and we saw that they were being followed.
- All clinical equipment was checked to ensure it was working properly.
- We saw that staff had reinstated actions such as flushing toilets and running taps in the disused bathroom which were necessary to prevent legionella contamination. Legionella is a term for a particular bacterium which can contaminate water systems in buildings.
- Staff had cleared the premises of inappropriate items and clutter had been removed.



Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

The practice is rated as good for being well-led.

This focused inspection was conducted in order to review governance issues which were identified at the comprehensive inspection carried out on 17 December 2015. This inspection found that the practice required improvement in relation to providing well-led services to patients. At this focused inspection we rated the practice as good for being well-led.

- We saw that the practice had reviewed all practice specific policies. These were updated and available to all staff.
- Effective arrangements had been made to identify, record and manage risks, issues and implement mitigating actions. Staff had lead roles and systems were in place to assess and manage risks.