

Emmer Green Surgery

Quality Report

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Emmer Green
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Date of inspection visit: We have not revisited Emmer Green Surgery as part of this review because they were able to demonstrate that they were meeting the standards without the need for a visit
Date of publication: 03/09/2015

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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out a comprehensive inspection on 19 November 2014 and published a report setting out our judgements. We found improvements were required regarding provision of safe services. In July 2015 we carried out a focussed desktop review (an inspection where we did not need to visit the practice) to ensure that since our last inspection, in November 2014, systems had been put in place to manage medicines safely. We also received evidence from the provider showing the practice had expanded and improved training for staff on how to reduce the risks of cross infection and in chaperone duties. We found the improvements had been made and the practice was providing safe services.

Our findings from this review were:

- Evidence sent to us showed medicines were kept securely and vaccines administered in accordance with legislation.
- The practice had also taken action on matters relating to cleanliness and infection control, safeguarding and recruitment which improved the way they managed these aspects of their service

We have changed the rating for this practice in respect of the safe domain to reflect these improvements. The practice is now rated good for the provision of safe, effective, caring, responsive and well led services.

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?

On 18 May 2015 the practice produced written evidence that showed they had addressed the issues surrounding management of medicines that we judged a breach of regulation at our inspection of 19 November 2014.

Appropriate arrangements had been made to ensure medicines were managed safely and the risks associated with medicines had been reduced.

The practice had also taken action on matters relating to cleanliness and infection control, safeguarding and recruitment which improved the way they managed these aspects of their service.

Good



Emmer Green Surgery

Detailed findings

Background to Emmer Green Surgery

Over 9,000 patients are registered at Emmer Green Surgery. There are six GP partners at the practice who work the equivalent of 5.05 full time GPs. Three female and three male. A female GP assistant is also employed and is included in the 5.05 GP complement. A nurse practitioner leads the nursing team. The practice manager is supported by a team of administrative and reception staff. Services are provided via a personal medical services (PMS) contract held with the local team of NHS England.

Appointments are offered between 8.30am and 5.30pm each weekday. After 5.30pm patients in urgent need of an appointment are seen up to 6pm. The practice takes part in enhanced services for example, extended surgery hours are two mornings every week from 7.30am and on three evenings a month up until 8pm.

The practice has opted out of providing out of hours services to their patients. There are arrangements in place for services to be provided when the surgery is closed by Westcall via NHS 111.

Why we carried out this inspection

We carried out a comprehensive inspection on 19 November 2014 and published a report setting out our judgements and our overall rating of the practice. On 11 February 2015 we asked the provider to send an action plan of the changes they would make to comply with the regulation they were not meeting. On 3 June 2015 we followed up with the provider the information they had provided to us. This was in order to make sure the necessary changes had been made. From the information supplied we found that the provider is now meeting the fundamental standards included within this report.

This report should be read in conjunction with the full inspection report. We have not revisited Emmer Green Surgery as part of this review because the practice was able to demonstrate compliance without the need for an inspection.

How we carried out this inspection

We reviewed information given to us by the practice. We have not revisited Emmer Green Surgery as part of this review.

Are services safe?

Our findings

Reliable safety systems and processes including safeguarding

Staff who undertook chaperone duties received relevant training in the role and the training was documented. The practice sent us a record of the training session that took place on 11 March 2015. This included details of what this training covered and who had undertaken this training.

Medicines management

The practice had updated their procedures for dealing with medicine alerts. GPs checked that action had been taken on medicine alerts via reviews at GP meetings. The minutes of a meeting held on 17 April 2015, the provider sent to us, showed us this had taken place.

The practice had made arrangements to lock the medicines fridge which was not lockable at the time of our previous inspection. We were sent a copy of the invoice for the fridge keys and confirmation from the provider that the keys fitted the lock and were in use. The practice sent us a copy of a control sheet that showed the nurses checked the fridge was locked when they took the daily fridge temperature readings.

We were also sent a copy of the practice updated fridge failure protocol. The practice gave us written assurance that this had been discussed at a meeting on 11 March 2015 and a copy was held next to all medicines fridges.

At our last inspection we found a health care assistant had, on rare occasions, administered flu vaccinations without written authorisation from a prescriber. The practice made arrangements during our last visit for this to cease immediately. We have received written assurance from the provider that the practice had not been resumed since the last visit.

Cleanliness and infection control

On 18 May 2015 we were sent a training record from the provider which confirmed that the lead for infection control at the practice had undertaken additional training on 11 February 2015. This training had been undertaken to enable them to train others in the systems and processes at the practice to reduce the risk of cross infection. In addition we received copies of training certificates from the provider confirming all GPs and nurses had received refresher training on infection control on 28 January 2015. We were sent an updated practice control of infection policy which reflected the processes and procedures in place at the practice.

Staffing and recruitment

The practice recruitment policy was updated by the provider on 8 May 2015 to include the requirement to retain copies of proof of identity. The practice had employed one member of staff since our last inspection in November 2014. The provider sent us proof of the member of staff's identity and we were also given written assurance that a copy had been retained in personnel records.