

Green Street Green Medical Centre

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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of the practice on 15 March 2016. Breaches of legal requirements were found. After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements in relation to the breach of regulation 17(2) (b) Good Governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We undertook this desk-based focussed inspection on 19 October 2016 to check that they had followed their plan and to confirm that they now met the legal requirements. This report covers our findings in relation to those requirements and also where additional improvements

have been made following the initial inspection. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Green Street Green Medical Centre on our website at www.cqc.org.uk.

Overall the practice is rated as Good. Specifically, following the focussed inspection we found the practice to be good for providing safe services.

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

- Risks to patients were assessed and well-managed, including those related to electrical equipment checks, fire safety and infection control.

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 as improvements had been made.

- Risks to patients were assessed and well-managed, including those related to electrical equipment checks, fire safety and infection control.

Good



Summary of findings

The six population groups and what we found

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

People with long term conditions

This population group was rated as requires improvement in our comprehensive inspection carried out on 15 March 2016. In our recent inspection we are satisfied that the issues identified in our previous inspection were resolved and we changed the rating to good.

Good



Green Street Green Medical Centre

Detailed findings

Why we carried out this inspection

We undertook a desk-based focussed inspection of Green Street Green Medical Centre on 19 October 2016. This is because the service had been identified as not meeting some of the legal requirements and regulations associated with the Health and Social Care Act 2008. From April 2015, the regulatory requirements the provider needs to meet are called Fundamental Standards and are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Specifically a breach of regulation 17(2) (b) Good governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was identified.

This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 15 March 2016 had been made. We inspected the practice against

one of the five questions we ask about services: is the service safe. We also inspected the practice against one of the five population groups: people with long-term conditions.

During the comprehensive inspection carried out on 15 March 2016 we found that the practice did not have adequate arrangements in place for fire safety and infection control. They did not carry out regular fire drills including evacuations and infection control audits were not undertaken on an annual basis as required.

We also found that electrical equipment was not regularly checked to ensure the equipment was safe to use. Some of the staff who acted as chaperones were not trained for the role and had not received a recent Disclosure and Barring Service Check (DBS Check). However staff who acted as chaperones understood their role. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). Not all staff had yearly appraisals due to the availability of the senior members of staff for good reason.

Are services safe?

Our findings

During the comprehensive inspection carried out on 15 March 2016 we found that the practice did not have adequate arrangements in place for fire safety and infection control. They did not carry out regular fire drills including evacuations and infection control audits were not undertaken on an annual basis as required. We also found that electrical equipment was not regularly checked to ensure the equipment was safe to use. Some of the staff who acted as chaperones were not trained for the role or had received a recent Disclosure and Barring Service Check (DBS Check). However staff who acted as chaperones understood their role. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).

Overview of safety systems and processes

The practice changed their chaperone system so that only clinical staff acted as chaperones. However the practice told us they were planning to apply for DBS checks and train non-clinical staff to act as chaperones in the future.

The practice undertook an infection control audit in June 2016; we saw evidence that action was taken to address any improvements identified as a result. The practice also had a system in place where they undertook quarterly infection control audits/checks; this was last done in September 2016. The practice had an action plan which was regularly monitored and updated.

Monitoring risks to patients

The practice had carried out a fire drill (complete evacuation) on 16 April 2016 and put a system in place to undertake yearly fire drills and weekly fire alarm checks. They also performed a detailed review of the fire drill which included learning points for staff. The practice had an electrical equipment check in March 2016 after the initial inspection and had put a system in place for this to be completed annually in future.