

Penshurst Gardens Surgery Quality Report

39 Penshurst Gardens Edgware London HA8 9TN Tel: 020 8958 3141 Website: http://www.penshurstsurgery.co.uk/

Date of inspection visit: 2 February 2017 Date of publication: 10/04/2017

Good

Good

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

Are services safe?

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced focussed inspection at Penshurst Gardens Surgery on 2 February 2017. We found the practice to be good for providing safe services and it is rated as good overall.

We previously conducted an announced comprehensive inspection of the practice on 13 April 2016. As a result of our findings, the practice was rated as good for being responsive, effective, caring and well led; and rated as requires improvement for being safe which resulted in a rating of good overall. We found that the absence of a recent fire risk assessment and of a Legionella water temperature monitoring regime had breached Regulation 12 HSCA (RA) Regulations 2014 (Safe care and treatment) of the Health and Social Care Act 2008.

The practice wrote to us to tell us what they would do to make improvements and meet the legal requirements. We undertook this focussed inspection to check that the practice had followed their plan, and to confirm that they had met the legal requirements.

This report only covers our findings in relation to those areas where requirements had not been met. You can

read the report from our last comprehensive inspection by selecting the 'all reports' link for Penshurst Gardens Surgery on our website at http://www.cqc.org.uk/ location/1-540418399.

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

- The practice had introduced a new fire safety policy and we saw that, in accordance with the policy, six monthly fire drills and weekly fire alarm tests were taking place. We also saw that an annual fire risk assessment had taken place.
- The practice had recently commissioned a Legionella risk assessment and management plan; and we saw that, in accordance with assessment, a monthly water temperature monitoring regime had been introduced. We also noted that the practice manager and a partner GP had received legionella awareness training and that a Legionella policy had been introduced.
- The systems introduced since our last inspection in April 2016 enabled the provider to manage risk and provide a current picture of safety.

Summary of findings

- At this inspection we also noted that the practice had made improvements to aspects of care highlighted in our April 2016 report which, although not breaching Regulations were listed as areas where the practice could improve.
- For example, we noted that the practice had introduced weekly checks of its emergency medical equipment and that a new protocol had been

introduced for monitoring and actioning incoming scanned correspondence. The practice had also improved its systems for identifying and providing support to carers. For example, records showed that the percentage of patients identified as carers had increased from 1% to 2%.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

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.

When we inspected in April 2016, we noted that risks to patients were assessed and well managed with the exception of those relating to fire safety, water temperature monitoring, systems for monitoring incoming clinical correspondence and systems for regularly checking the practice's emergency oxygen. We asked the provider to take action.

At this inspection we noted that the practice regularly monitored and reviewed risk in the above areas which provided staff with an accurate and current picture of safety. Good

Summary of findings

The six population groups and what we found We always inspect the quality of care for these six population groups. **Older people** The practice is rated as good for the care of older people. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against. People with long term conditions The practice is rated as good for the care of people with long term conditions. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against. Families, children and young people The practice is rated as good for the care of families, children and young people. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against. Working age people (including those recently retired and students)

Good

Good

Good

Good

Good

Good

The practice is rated as good for the care of working age people (including those recently retired and students). As the practice was found to be providing good services overall, this affected the rating

for the population groups we inspect against.

People whose circumstances may make them vulnerable The practice is rated as good for the care of people whose circumstances may make them vulnerable. As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.

People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia). As the practice was found to be providing good services overall, this affected the rating for the population groups we inspect against.



Penshurst Gardens 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 focused inspection of this service on 2 February 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This was because the service was not meeting some legal requirements during our previous visit on 13 April 2016. The inspection was conducted to check that improvements planned by the practice to meet legal requirements had been made.

How we carried out this inspection

During our focussed inspection on 2 February 2017, we reviewed a range of information provided by the practice and spoke with the practice manager and two GP partners.

Are services safe?

Our findings

Overview of safety systems and processes

When we inspected in April 2016, we noted that although a risk assessment for Legionella (a bacterium which can contaminate water systems in buildings) had taken place, we noted that elements of the risk assessment's action plan had not been implemented. For example, the practice was not implementing a monthly water temperature monitoring regime.

At this inspection we noted that the provider had introduced a monthly water temperature monitoring regime. We also noted that in October 2016, the practice had commissioned a Legionella risk assessment and management plan and we saw that, in accordance with the assessment, key staff had received Legionella awareness training. We also noted that following the assessment, the practice's Legionella management policy had been revised to reflect best practice and identify responsible persons. When we inspected in April 2016 we noted that the practice had previously undertaken a fire risk assessment in 2014. At this inspection we noted that two fire risk assessments had taken place since our April 2016 inspection. We also noted that the practice had introduced a new fire safety policy and that, in accordance with the policy, the practice was undertaking six monthly fire drills and weekly fire alarm tests.

At this inspection we also noted that the practice had made improvements to aspects of care highlighted in our April 2016 report which, although not breaching Regulations were listed as areas where the practice could improve.

For example, we noted that the practice had introduced weekly checks of its emergency medical equipment and that a new protocol had been introduced for monitoring and actioning incoming scanned correspondence. The practice had also improved its systems for identifying and providing support to carers. For example, records showed that the percentage of patients identified as carers had increased from 1% to 2%.