

Elm Lodge Surgery

Quality Report

2 Burbage Road

London

Southwark

SE24 9HJ

Tel: 02072746138

Website: www.elmlodgesurgery.co.uk

Date of inspection visit: 10 April 2017

Date of publication: 26/05/2017

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	4

Detailed findings from this inspection

Background to Elm Lodge Surgery	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Elm Lodge Surgery on 10 May & 7 June 2016. The practice was rated good overall and requires improvement for key question: Are services safe? The full comprehensive report from this inspection can be found by selecting the 'all reports' link for Elm Lodge Surgery on our website at www.cqc.org.uk.

This inspection was an announced desk-based review carried out on 10 April 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 10 May & 7 June 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

At our previous inspection undertaken on 10 May & 7 June 2016, we rated the practice as requires improvement for providing safe services as:

- The practice had not taken the necessary action to mitigate risks associated with infection control.
- The practice did not have a supply of chlorphenamine (used to treat allergic reactions)

and hydrocortisone for injection (used to treat swelling or inflammation) in their supply of emergency medicines in accordance with current legislation and guidance.

- Not all equipment in the doctor's emergency bags had been calibrated to ensure that it was functioning and safe to use.
- Not all staff had received essential training including safeguarding, basic life support training and infection control.

In addition to the breaches in regulation we found areas where we suggested the practice should make improvement. For example:

- The practice had identified a lower number of patients with chronic obstructive pulmonary disease compared to rates of identification in other practices locally and nationally.
- The practice's system of recruitment checks was not sufficiently comprehensive.
- One member of staff was not chaperoning in accordance with current guidance.

The practice is now rated as good for the key question: Are services safe?

Our key findings were as follows:

Summary of findings

- The practice had taken actions to ensure that risks associated with infection control had been addressed.
- The practice had a supply of emergency medicines which reflected current guidelines.
- All staff had completed essential training in accordance with current recommendations and guidance.
- All clinical equipment had been calibrated.

We also saw evidence the practice had:

- Undertaken comprehensive recruitment checks for their most recently recruited member of staff.

- Sent a reminder to staff regarding chaperone procedures within the practice.
- Not taken action to increase the identification of patients with Chronic Obstructive Pulmonary Disease. However, the practice had reviewed their performance and attributed lower prevalence to being located in an area of low pollution and as a result of having a lower proportion of smokers on their patient list.

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 key question: Are services safe?

- The practice had purchased absent emergency medicines of chlorphenamine (used to treat allergic reactions) and Hydrocortisone for injection (used to treat swelling or inflammation).
- The practice had taken the necessary steps to ensure that risks associated with infection control had been addressed: they had records to confirm the immunity status to common communicable diseases for all clinical staff, infection control risks in the toilets had been addressed, damaged chairs had been replaced and all staff had received training.
- In addition to infection control training practice staff had completed basic life support and safeguarding training.
- All clinical equipment had been calibrated including items kept within the doctor's emergency bags had been calibrated.

Good



Elm Lodge Surgery

Detailed findings

Background to Elm Lodge Surgery

Elm Lodge Surgery is part of Southwark Clinical Commissioning Group (CCG) and serves approximately 7700 patients. The practice is registered with the CQC for the following regulated activities; surgical procedures, diagnostic and screening procedures, maternity and midwifery services, treatment of disease, disorder or injury and family planning. The practice informed the inspector that they were no longer providing maternity and midwifery services.

The practice population is largely reflective of national averages in terms of age. The practice is located in an area ranked within the third least deprived decile on the Index of Multiple Deprivation Scale.

The practice is run by two male GP partners and one female partner. The practice has one salaried GP and one GP who provides a weekly dermatology clinic. There are three nurses and one nurse practitioner, a diabetes specialist nurse and an elderly care nurse. The practice has a healthcare assistant. The practice is a teaching practice but there were no students on placement at the time of our inspection. The practice offers 23 GP sessions and six Advanced Nurse Practitioner sessions per week.

We were informed at the time of our original inspection that the practice had experienced challenges following the departure of the former practice manager two years ago which related to practice finances and a high rate of staff turnover.

The practice is open between 8.00 am and 6.30 pm Monday to Friday. The practice offered both booked and emergency appointments.

The Elm Lodge Surgery operates from 2 Burbage Road, Southwark; London, SE24 9HJ which are purpose built premises owned by one of the current partners and two former partners. The service is accessible for patients with mobility problems. The practice was located over two floors with consulting and treatment rooms available on the ground floor.

Practice patients are directed to contact the local out of hours provider when the surgery is closed.

The practice operates under a Personal Medical Services (PMS) contract, and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract). These are: childhood vaccination and immunisation scheme, facilitating timely diagnosis and support for people with dementia, improving patient online access, influenza and pneumococcal immunisations, minor surgery, patient participation, rotavirus and shingles immunisation and unplanned admissions.

The practice is a member of GP federation Improving Health Limited.

Why we carried out this inspection

We undertook a comprehensive inspection of Elm Lodge Surgery on 10 May & 7 June 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the previous inspection can be found by selecting the 'all reports' link for Elm Lodge Surgery on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up desk-based focused inspection of Elm Lodge Surgery on 10 April 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

We carried out a desk-based focused inspection of Elm Lodge Surgery on 10 April 2017. This involved reviewing evidence that:

- Staff had completed all required training.
- Clinical equipment had been checked to ensure that it was functioning correctly and safe to use.
- Emergency medicines had been purchased.
- The practice had taken action to address risks associated with infection control.

Are services safe?

Our findings

At our previous inspection on 10 May and 7 June 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of cleanliness and infection control were not adequate, not all staff had received training, not all medical equipment had been tested to ensure it was safe to use and the arrangements to enable the practice to respond effectively in an emergency were not adequate.

These arrangements had improved when we undertook a follow up inspection on 10 April 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

We identified that one of the nursing staff had not received safeguarding training at the time of our last inspection though this was completed shortly after the inspection.

Monitoring risks to patients

- At our last inspection we identified that items of clinical equipment stored within doctors emergency bags had not been calibrated to ensure that they were safe to use. The practice have since provided certificates to show that all of the clinical equipment kept within the doctors emergency bags had been calibrated to ensure that they were functional and safe to use.
- On the previous inspection we found that systems and processes to assess and mitigate risks associated with infection control were not always effective. For example

we found that a number of the chairs in clinical areas were damaged and that the toilets were not cleaned to a satisfactory standard; specifically the light cords were dirty and the extractor fans were dusty. In addition mops and buckets used to clean the practice were left outside and were full of stagnant rain water. The practice provided photographs both of the chairs which they have replaced and to evidence action taken in respect of the concerns identified in the toilets. We were also provided with evidence after the inspection that the supplier of cleaning services had agreed to move the cleaning equipment indoors.

- At our last inspection we found that not all staff had completed infection control training. We were provided with certificates after our last inspection which showed that all staff had completed this.

Arrangements to deal with emergencies and major incidents

- There was an absence of chlorphenamine (used to treat allergic reactions) and hydrocortisone for injection (used to treat swelling or inflammation) when we last inspected the practice and no risk assessment had been completed regarding the need for these medicines. We were provided with evidence that these medicines were ordered after our last inspection.
- During the last inspection we found a number of staff had not received basic life support training. For this desk based review the practice produced certificates which showed that all staff had received this training within the last 12 months.