

Ongar War Memorial Medical Centre

Quality Report

Fyfield Road
Ongar
Essex
CM5 0AL
Tel: 01277 367200
Website: weccg.ongarhc@nhs.net

Date of inspection visit: 13 November 2014
Date of publication: 19/02/2015

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.

Contents

Summary of this inspection

	Page
Overall summary	1
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	5
Background to Ongar War Memorial Medical Centre	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

At our previous inspection in September 2014 we found the provider did not have sufficient procedures in place to assess the risk of and prevent, detect and control

the spread of healthcare associated infection. The practice did not have systems in place to ensure the maintenance of appropriate standards of cleanliness and hygiene.

At this inspection, we found that improvements had been made and that patients, staff and other visitors were protected from the risks of acquiring an infection by

Summary of findings

introducing systems and standards of cleanliness. The infection control lead had undergone specialist training and implemented a policy and guidance for infection, prevention and control. This was implemented immediately after our initial inspection and this identified roles within the practice for clinical and non-clinical leads.

We observed the premises to be clean and tidy. We saw there were cleaning schedules in place and cleaning records were kept. We discussed the training, supervision

and audits with the lead for environmental cleaning. They informed us that all cleaning training and schedules were kept by them and the practice manager completed spot checks or informed them if any member of staff identified an area of cleaning had not been completed. We saw that this was dealt with on the same day by viewing the log of actions they kept.

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?

We found that improvements had been made with regard to the identification, assessment and management of infection prevention control. Patients, staff and other visitors were protected from the risks of acquiring an infection by systems and standards of cleanliness.

The infection control lead had undergone specialist training and implemented a policy and guidance for infection, prevention and control. This was implemented immediately after our initial inspection in September 2014 and specific roles within the practice were identified for clinical and non-clinical leads.

We found the premises to be clean and tidy and cleaning schedules were in place and cleaning records were kept.

Summary of findings

Ongar War Memorial Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Inspector.

Background to Ongar War Memorial Medical Centre

The Ongar War Memorial Medical Centre is based in a purpose built medical centre on the outskirts of Ongar village. It is a dispensing practice.

Why we carried out this inspection

The inspection was following up on previous areas of non compliance we found in our earlier inspection conducted in September 2014.

How we carried out this inspection

The inspection was conducted by a CQC Inspector with specialist knowledge in infection prevention control.

Are services safe?

Our findings

At our previous inspection conducted in September 2014 we found the practice did not have sufficient procedures in place to assess the risk of and to prevent, detect and control the spread of healthcare associated infection. The practice did not have systems in place to ensure the maintenance of appropriate standards of cleanliness and hygiene.

On our return in November 2014 we found that improvements had been made and that patients, staff and other visitors were protected from the risks of acquiring an infection by systems and standards of cleanliness. The infection control lead had undergone specialist training

and implemented a policy and guidance for infection, prevention and control. This was implemented immediately after our initial inspection, identifying roles within the practice for clinical and non-clinical leads.

We found the premises to be clean and tidy. We saw there were cleaning schedules in place and cleaning records were kept. We discussed the training, supervision and audits with the lead for environmental cleaning. They informed us that all cleaning training and schedules were kept by them and the practice manager completed spot checks or informed them if any member of staff identified an area of cleaning had not been completed. We saw that this was dealt with on the same day by viewing the log of actions they kept.