

Kings Medical Centre

Quality Report

23 Kings Avenue

Buckhurst Hill

Essex

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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

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 desk based review for Kings Medical Centre on 20 July 2016. This was to follow up on actions we asked the provider to take after our announced comprehensive inspection on 23 October 2015.

During the inspection in October 2015, we identified that the practice had not considered the need to complete a Disclosure and Barring Service check for all staff who acted as a chaperone. Some staff had not received training to undertake the role.

The practice wrote to tell us how they would make improvements and we have reviewed records they provided to show their actions had been completed.

Our key findings were;

- Staff acting as chaperones had received appropriate training and safety checks in order to safeguard patients.

There was one area where the provider should make an improvement:

- Review the provision for chaperone training so that staff are updated in the responsibilities of the role.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice

Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- Review the provision for chaperone training so that staff are updated in the responsibilities of the role.

Kings Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

This desk based review was completed by a CQC inspector.

Background to Kings Medical Centre

The Kings Medical Centre is located in Buckhurst Hill, Essex. The practice has a general medical services (GMS) contract with the NHS. There are approximately 7350 patients registered at the practice. The practice is a training practice.

The practice is registered with the Care Quality Commission as a partnership and there are four partners. The GPs are supported by three nurses working a variety of part-time hours. There is a practice manager, a reception manager and an IT lead. There are a number of administration staff carrying out reception and clerical duties. There are a total of 19 staff working at the practice.

The surgery is open Monday to Friday between 8am and 6.30pm and GP surgeries run in the mornings and afternoons at various times. The practice is closed on a Wednesday afternoon and patients requiring care or treatment could contact the out of hour's service. The practice is taking part in the Prime Ministers Challenge Fund initiative, providing bookable appointments at the

weekend for their patients at a practice in the locality. This is a local initiative supported by a number of GPs from a variety of practices working at the weekends on a rota basis. Appointments are available on Saturdays and Sundays during the day.

The practice has opted out of providing 'out of hours' services which is now provided by Partnership of East London Co-operatives. Patients can also contact the non-emergency 111 service to obtain medical advice if necessary.

Why we carried out this inspection

We carried out a desk based inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

How we carried out this inspection

We reviewed the action plan and supporting evidence that had been supplied by the practice.

Are services safe?

Our findings

During the inspection we completed on 23 October 2015, we found that some members of staff who were used as chaperones had not received formal training or a Disclosure and Barring Service check (DBS) and a risk assessment was not in place to show why one was not necessary. 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.

The practice wrote to tell us how they would put this right. They subsequently provided us with further evidence that the actions had been completed.

The evidence showed that four staff had completed chaperone training. One member of staff had completed this in 2005 and there was no evidence that a training update had been attended. All four members of staff had received DBS checks.

The practice has taken reasonable steps to ensure that appropriate safeguards are in place when staff act as a chaperone for patients.