

The Valkyrie Surgery

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 an announced focused inspection at the practice on 15 January 2016. This inspection was carried out to check improvements made following our comprehensive inspection, which was carried out on 7 July 2015. At that time we identified areas which required improvement within the safe domain. We issued a requirement notice under Regulation 19 of the Health and Social Care Act 2014 in relation to improvements that were required when recruiting new staff.

Additionally we identified some areas where the provider should make improvements. These were around more detailed recording of significant safety events and reviewing policies and procedures so that they were up to date and reflected current best practice and relevant guidance.

The overall rating for the practice was good.

When we visited the practice on 15 January 2016 we reviewed the improvements made by the practice within the safe domain. We found:

- Improvements had been made in how new staff were recruited to work at the practice. All of the appropriate checks including employment references, proof of identification and disclosure and barring services (DBS) checks had been carried out.
- Improvements had been made in how risks were assessed and managed. Where non-clinical staff did not have a DBS check the practice had conducted a risk assessment to determine the level of risk and to provide a rationale for their decision.
- Audits were carried out to test the effectiveness of infection control procedures within the practice.
- Records were detailed in respect of how significant events were investigated, reviewed and how this information was shared with staff to support improvements.
- The practice policies and procedures were under review so that they were up to date, specific to the practice and in line with current guidance and best practice.

Following our inspection we rated the safe domain as good. This report should be read in conjunction with the 7 July 2015 comprehensive inspection report.

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.

The practice had made all of the improvements identified at the comprehensive inspection carried on 7 July 2015:

- Appropriate checks were carried out when new staff were employed to work at the practice. These included proof of identification, employment references and disclosure and barring service (DBS) checks.
- Risks to patients were assessed and managed. The practice had conducted risk assessments to determine whether DBS checks were required for non-clinical staff who had been employed at the practice for a number of years. These assessments took into consideration the persons role within the practice and described the rationale where a DBS check had not been obtained.
- Audits were carried out to test the effectiveness of the infection control procedures within the practice.
- There were systems put in place for periodic review of learning from when things went wrong so that learning and improvements were imbedded into practice.
- Policies and procedures were being reviewed so that they were practice specific and reflected current best practice and guidance.

Good



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Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was carried out by a CQC inspector.

Why we carried out this inspection

We carried out this inspection to check that the required improvements as identified during the inspection on 7 July 2015 had been made to the service.

Are services safe?

Our findings

Overview of safety systems and processes

The practice had procedures in place for the safe recruitment of staff. We looked at the files for three members of staff and found that these procedures had been followed consistently. Checks including proof of identity, employment references and disclosure and barring services (DBS) checks had been obtained prior to staff commencing work.

A number of non-clinical staff had worked at the practice for many years. We saw that where DBS checks had not been obtained for these staff a detailed risk assessment

had been conducted to support this decision. The risk assessment considered the staff members roles and responsibilities, unsupervised access to vulnerable patients and lone working.

The practice had introduced a process for scheduling reviews for previous significant events and these were diarised into clinical meetings. This allowed for learning and any changes in practice to be reviewed and to provide assurances that any areas for improvement and actions arising from these were imbedded into staff practices.

There were arrangements to carry out regular audits to test the infection control procedures within the practice.

Policies and procedures were being reviewed, updated and amended so that they were practice specific and in line with current best practice and relevant guidance.