

The Orchard Practice

Inspection report

www.orchardpracticechessington.co.uk


Date of inspection visit: 1 December 2018

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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 location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at The Orchard Practice on 18 December 2018 as part of our inspection programme.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as good overall and good for all population groups.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm; however, there were some areas where processes required review to ensure they continued to adhere to best practice.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

Whilst we found no breaches of regulations, the provider **should:**

- Update their safeguarding policies to include reference to the process for identifying and reporting people at risk of female genital mutilation.
- Review their infection control audit to ensure that all necessary actions have been completed.
- Provide information and training to reception staff on identifying patients with potential sepsis.
- Review the arrangements for the monitoring of blank prescription stationery.
- Review and risk assess the arrangements in place for prescribing Warfarin.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

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

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector who was accompanied by a second CQC inspector and a GP specialist advisor.

Background to The Orchard Practice

The Orchard Practice provides primary medical services in Chessington to approximately 8,500 patients and is one of 21 practices in Kingston Clinical Commissioning Group (CCG).

The practice population is in the second least deprived decile in England. The proportion of children registered at the practice who live in income deprived households is 14%, which is higher than the CCG average of 12%; for older people the practice value is 11%, which is lower than the CCG average of 13%. The age profile of patients registered at the practice is broadly the same as the CCG averages. Of patients registered with the practice, the largest group by ethnicity are white (84%), followed by Asian (9.5%), mixed (3%), black (2%) and other non-white ethnic groups (1.5%).

The practice is situated in a purpose-built medical centre. The building comprises of a reception and waiting area, nurse and GP consultation rooms and administrative space. Patient and staff toilets area available, including an accessible toilet with baby changing facilities.

The practice team at the surgery is made up of three part time GPs who are partners in the provider organisation (Churchill Medical Centre) six female part time salaried GPs and two male part time salaried GPs. The clinical team also consists of a nurse manager, three part time

practice nurses and three part time healthcare assistants. The administrative team is led by a practice manager, secretarial manager and reception manager, and the team consists of four administrators, a secretary and eight receptionists.

The practice operates under a Kingston Medical Services (KMS) 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).

The practice opens at 7:30am Monday to Friday and closes at 6:30pm on Mondays and Fridays, and at 8pm Tuesday to Thursday. Saturday appointments are also available from 8:30am to 11:30am. In total 41 GP sessions are available per week. Patients can also access appointments via the CCG seven-day opening Hub, which offers appointments from 8am until 8pm every day.

When the practice is closed patients are directed to contact the local out of hours service.

The practice is registered as a partnership with the Care Quality Commission to provide the regulated activities of diagnostic and screening services; maternity and midwifery services; treatment of disease, disorder or injury; surgical procedures; and family planning.