

Kings Corner Surgery

Quality Report

Kings Corner Surgery
Kings Road
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Berkshire
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Date of inspection visit: 15 July 2015

Date of publication: 20/08/2015

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.

Ratings

Overall rating for this service

Good



Are services safe?

Good



Are services effective?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced focused inspection of Kings Corner Surgery, Kings Road, Sunninghill, Ascot, Berkshire SL5 0AE on 15 July 2015.

We carried out this inspection to check the practice was meeting regulations. Our previous inspection in October 2014 had found breaches of regulations relating to safe and effective delivery of services.

The ratings for the practice have been updated to reflect our findings.

We found the practice had made improvements since our last inspection on 9 October 2014. At our inspection on the 15 July 2015 we found the practice were meeting regulations that had previously been breached.

Specifically the practice was:

- Operating safe systems of recruitment.
- Systems were in place to manage infection control processes to reduce risk of cross infection.
- Procedures were in place to ensure consistent application of current clinical guidelines were documented within patient records.

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 safe.

In July 2015 the practice produced written evidence and whilst on inspection we saw they had addressed the issues surrounding infection control and recruitment that we judged a breach of regulation at our inspection of 9 October 2014.

The practice had taken action on matters relating to implementing issues identified from infection control audits and revised their recruitment process. This had improved the way they managed these aspects of their service.

Good



Are services effective?

The practice is rated as good for effective.

In July 2015 the practice produced written evidence and whilst on inspection we saw they had addressed the issues surrounding documenting safety advice and potential risks in patient records that we judged a breach of regulation at our inspection of 9 October 2014.

Our findings at inspection showed the practice had taken action and systems were in place to ensure that all clinicians were up to date with both National Institute for Health and Care Excellence (NICE) guidelines and other locally agreed guidelines. Information about the outcomes of patients' care and treatment was collected and monitored through audit and data collection.

Good



Kings Corner Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a **CQC Lead Inspector** and included a GP specialist advisor.

Background to Kings Corner Surgery

Kings Corner Surgery has been established for over 100 years. The practice has been using the current purpose built premises for 28 years and is located in the semi-rural village of Sunninghill in Ascot, Berkshire. The practice occupies a two storey building, which comprises of eight consulting rooms and administrative office space.

The practice has approximately 7600 registered patients, with low deprivation scores. The practice serves population which is one of the more affluent areas of England.

The practice has core opening hours from 8:00am to 6:30pm Monday to Friday to enable patients to contact the practice. Patients can book appointments in person, via the phone and online. Appointments can be booked in advance for the doctors and for the nursing clinics.

The practice opted out of providing the out-of-hours service. This service is provided by accessed via the out-of-hours NHS 111 service. Advice on how to access the out-of-hours service is clearly displayed on the practice website and over the telephone when the surgery is closed.

Why we carried out this inspection

We carried out this inspection on 15 July 2015 to follow up and assess whether the necessary changes had been made following our inspection on 9 October 2014. We asked the provider to send a report of the changes they would make to comply with the regulations they were not meeting at that time.

We focused on the aspects of the service where we found the provider had breached regulations during our previous inspection.

How we carried out this inspection

Before visiting, we reviewed information sent to us by the provider. This told us how they had addressed the breaches of regulations identified during the comprehensive inspection. During our visit we spoke with three GP partners and the practice manager.

We reviewed information, documents and records kept at the practice.

Are services safe?

Our findings

Cleanliness and infection control

At the last inspection in October 2014 we saw evidence of recently completed infection control audits. At the inspection in July 2015 we found action had not been taken to address areas of improvement that had been identified.

We saw evidence the practice continued to carry out regular infection control audits, revisit the areas of improvement and implement those changes.

Staffing and recruitment

At the last inspection in October 2014 we had concerns that patients were not assured that they were supported or cared for by staff who had been suitably recruited because appropriate checks were not always completed before new staff commenced employment.

In July 2015 we received an action plan from the provider informing us of the action they had taken to meet

regulation. The provider confirmed that they had taken appropriate action to ensure all staff were subject to suitable checks prior to commencing employment and that these checks had been undertaken for all staff. This included a check that employment histories were full and that any gaps were accounted for.

At the inspection on the 15 July 2015 we saw four staff files which contained documented information to demonstrate that appropriate recruitment checks had been undertaken prior to the employment of staff. For example, proof of identification, references, qualifications, and registration with the appropriate professional body and criminal records checks through the Disclosure and Barring Service (DBS). The information we reviewed met legal requirements

The practice had a revised recruitment policy that set out the standards it followed when recruiting all staff and a standardised list had been developed to help ensure all relevant checks and information was obtained during the recruitment process. We saw evidence that staff recruited since our inspection in October 2014 have had a full DBS check.

Are services effective?

(for example, treatment is effective)

Our findings

At the last inspection in October 2014 the CQC GP specialist advisor reviewed three medical records for patients who had been prescribed a blood thinning medication. We found patients were receiving appropriate treatment. However, safety advice and potential risks to patients had not always been documented in patient records.

For example, we saw one patient was prescribed a blood thinning medicine, and the patient had been having falls. However, there was no written evidence of discussion with patient regarding risks of blood thinning drugs with falls.

Since the last inspection we received an action plan from the provider informing us of specific actions they were taking to address this issue.

At our inspection on the 15 July 2015 the CQC GP specialist advisor reviewed a sample of eight patient records. All eight were documented and recorded correctly. We saw the practice had adapted a recording template which prompted the GPs and Nurses to add a written summary. This ensured the record was accurately documented and recorded.

We were shown meeting minutes confirming the practice had agreed and adopted British Medical Journal guidance for blood thinning in primary care. (The British Medical Journal is a global healthcare knowledge provider of journals, clinical decision support, medical education and intelligent software tools.) The guidance had been shared with all GPs and Nurses.

We saw the training log which showed all GPs and Nurses had completed British Medical Journal training.