

Blessing Medical Centre

Quality Report

307 Kilburn Lane
London W9 3EG
Tel: 020 8964 6260
Website: [www. **blessingmedical**.co.uk](http://www.blessingmedical.co.uk)

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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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Why we carried out this inspection	4
Detailed findings	5

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of Blessing Medical Centre on the 11 March 2015. The practice was rated as requires improvement for providing safe care. After the comprehensive inspection, the practice submitted an action plan, outlining what they would do to ensure the care they provided was effective and met the standard required by CQC.

We undertook this focussed inspection on 30 July 2016 to check that the practice had followed their plan and to confirm that they were now providing safe care. This report covers our findings in relation to those requirements and also where additional improvements have been made following the initial inspection. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Blessing Medical Centre on our website at www.cqc.org.uk.

Overall the practice was rated as Good.

Following the focussed inspection we found the practice to be good for providing safe care.

Our key findings across all the areas we inspected were as follows:

- All staff have received adult safeguarding training.
- All staff that act as chaperones had received chaperone training.
- All staff had been Disclosure and Barring Service checked. (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).
- Patient Group Directions had been adopted by the practice and all were signed by the GP.
- The practice nurse had attended Mental Capacity Act and Gillick competency training.
- The nurse carried out weekly checks to the automated external defibrillator and these were all documented.

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.

- Risks to patients were assessed and well managed
- The practice had clearly processes and practices in place to keep patients safe and safeguarded from abuse.
- Staff had access to appropriate training to cover the scope of their work

Good



Blessing Medical Centre

Detailed findings

Why we carried out this inspection

We undertook a focussed inspection of Blessing Medical centre on 25 July 2016. This is because the service had been rated as 'requires improvement' for providing safe care during the comprehensive inspection carried out on 11 March 2015.

We had found that staff had not received adult safeguarding and staff that acted as chaperones had not received appropriate training. There were no Disclosure and Barring Service checks on file for any staff and there

were no risk assessments in place. We also found that the PGDs were not signed by a GP (PGDs are written instructions for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for treatment), the nurse was not familiar with the Gillick competency consent expectations and there was no evidence to confirm that regular documented checks were made to the automated external defibrillator.

This inspection was carried out to check that improvements have been made. We inspected the practice against one of the five questions we asked about services: is the service safe.

Are services safe?

Our findings

Overview of safety systems and processes

The practice had clearly defined processes and practices in place to keep people safe, which included:

- All staff had received relevant role specific training on safeguarding adults and children. Clinicians were trained to level 3 and non-clinicians level 1.
- All staff who acted as chaperones had received appropriate training. All staff providing these duties had been Disclosure and Barring Service checked. (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).

- All staff had received training and understood the relevant consent and decision-making requirements of legislation and guidance, including the Mental Capacity Act 2005 and Gillick competency.
- Patient Group Directions had been adopted by the practice to allow nurses to administer medicines in line with legislation, which had been signed by the GP. (PGDs are written instructions for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for treatment).

Arrangements to deal with emergencies and major incidents

The practice had an automated external defibrillator (used to attempt to restart a person's heart in an emergency) nurse carried out weekly checks to the automated external defibrillator and these were all documented.