

Cross Hall 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



Summary of findings

Contents

Summary of this inspection	Page
Overall summary	2
The five questions we ask and what we found	3
The six population groups and what we found	4
Detailed findings from this inspection	
Our inspection team	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We undertook an announced focused inspection of Cross Hall Surgery on 6 September 2016. We found the practice to be good for providing safe care, and it is rated as good overall.

We had previously conducted an announced comprehensive inspection of Cross Hall Surgery on 18 February 2016. As a result of our findings during that visit, the practice was rated as good for being effective, caring, responsive and well-led, and as requires improvement for being safe and for providing good care for vulnerable patients. We found that the provider had breached Regulation 12 (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014; safe care and treatment.

The practice wrote to us to tell us what they would do to make improvements and meet the legal requirements. We undertook this focused inspection to check that the practice had followed their plan, and to confirm that they had met the legal requirements.

This report only covers our findings in relation to those areas where requirements had not been met. You can

read the report from our last comprehensive inspection by selecting the 'all reports' link for Cross Hall Surgery on our website at http://www.cqc.org.uk/location/ 1-1738880838.

Our key findings across all the areas we inspected were that the practice had met the legal requirements by having:

• Purchased and installed oxygen and a defibrillator to ensure that they were suitably equipped to manage medical emergencies.

The practice had made additional improvements as follows:

- Conducted regular fire drills to ensure that staff were updated on the fire evacuation procedure.
- Provided information on the avenues of support available to patients that were carers.
- Advertised translation services for patients that did not speak or understand English.
- Created a register for homeless people so that they could register as patients to receive on-going care at the practice.

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 purchased and installed oxygen and a defibrillator to ensure that they were suitably equipped to manage medical emergencies.
- They conducted regular fire drills to ensure that staff were updated on the fire evacuation procedure.

Good

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

Good

During our previous inspection on 18 February 2016, some vulnerable people were not able to access on-going care at the practice; the GP told us that homeless people would not be registered as patients.

During this inspection on 6 September 2016, we found that the practice had created a registration policy stating that homeless patients would be allowed to register as patients, and they had created a register for homeless patients on their computer system.



Cross Hall Surgery Detailed findings

Our inspection team

Our inspection team was led by:

a Care Quality Commission lead inspector.

Why we carried out this inspection

We carried out an announced, focused inspection of this service on 6 September 2016 under Section 60 of the

Health and Social Care Act 2008 as part of our regulatory functions. This is because the service was not meeting some legal requirements during our previous comprehensive inspection on 18 February 2016.

The inspection was conducted to check that improvements planned by the practice to meet legal requirements had been made. We inspected against the practice being safe.

How we carried out this inspection

During an announced, focused inspection on 6 September 2016, we reviewed a range of information provided by the practice. We spoke with the practice manager.

Are services safe?

Our findings

Monitoring risks to patients

During our previous inspection on 18 February 2016, we found that the practice had not conducted regular fire drills to ensure that staff were kept updated on the fire evacuation procedure.

During this inspection on 6 September 2016, we found that the practice had conducted regular fire drills that involved all staff on duty.

Arrangements to deal with emergencies and major incidents

During our previous inspection on 18 February 2016, we found that the practice was not suitably equipped to manage medical emergencies because they did not have oxygen or a defibrillator, and they had not formally assessed the risks in relation to this.

During this inspection on 6 September 2016, we found that the practice had purchased and installed oxygen and a defibrillator.