

Ripley Medical Centre

Quality Report

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Date of inspection visit: 28 August 2018
Date of publication: 21/09/2018

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



Key findings

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Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Ripley Medical Centre on 10 May 2016. The overall rating for the practice was 'Good', but the practice was rated 'Requires Improvement' for providing safe services. The full comprehensive report on the May 2016 inspection can be found by selecting the 'all reports' link for Ripley Medical Centre on our website at www.cqc.org.uk.

This inspection was a desk-based follow up review carried out on 28 August 2018 to review actions taken by the practice since our previous inspection in May 2016. This report covers our findings in relation to actions taken by the practice since our last inspection in the area of 'Safe' and other areas for improvement which we had identified at the May 2016 inspection.

Overall the practice remains rated as 'Good'. The practice is now also rated 'Good' for providing safe services.

Our key findings were as follows:

- The practice had reviewed their chaperone protocol and consent policy since our last inspection. In addition, all staff who acted as chaperones had been trained and had had their competency to carry out the role assessed to ensure that they were competent to act as chaperones when required to do so.

- The practice had introduced room-specific cleaning schedules and carried out audits to monitor and ensure that cleaning had been undertaken to the required specification.
- The practice had trained all relevant staff in the area of basic life support to ensure staff were competent in this area.
- The practice had reviewed their systems for recalling patients with chronic diseases. The practice had amended their recalls protocol to include telephone calls and text reminders as methods for recalling patients, in addition to contact by letter, to ensure that appropriate efforts were made to recall patients with chronic diseases for review.
- The practice had made a number of changes to improve patient access to appointments. These included improvements to the appointments system and providing extended hours' appointments on Tuesdays and Thursdays.
- The practice had provided staff with more time for training to ensure that staff completed all mandatory training as identified by the provider.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Ripley Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Ripley Medical Centre

Ripley Medical Centre provides care to patients residing in the areas of Ripley, Heage, Swanwick, Loscoe and Codnor, located within Derbyshire. The surgery provides primary care medical services via a Personal Medical Services (PMS) contract commissioned by NHS England, and services commissioned by NHS Southern Derbyshire Clinical Commissioning Group (CCG). The practice operates from a purpose-built building.

The practice has been run by Derbyshire Community Health Services (DCHS) NHS Foundation Trust since 1 April 2016.

The practice opens from 8am until 6.30pm Monday to Friday. Bookable morning surgeries run from 8.30am to 11.30am, and bookable afternoon surgeries run from 3.30pm to 6pm. Telephone consultations with patients are also available. Extended hours' appointments are available on Tuesdays and Thursdays from 6.30pm to 7.15pm.

The practice has opted out of providing out-of-hours services to its own patients. When the practice is closed patients are directed to Derbyshire Health United (DHU) via the 111 service.

Are services safe?

Our findings

At our previous inspection on 10 May 2016, we rated the practice as 'Requires improvement' for providing safe services as staff were not clear about their responsibilities when acting as a chaperone and the arrangements in respect of cleanliness and infection control required improvement.

These areas had improved when we undertook a desk-based follow up review on 28 August 2018. The practice is now rated as 'Good' for providing safe services.

Safety systems and processes

Following our announced desk-based follow up review on 28 August 2018, the practice provided evidence that they had reviewed their chaperone protocol and consent policy since our last inspection.

The practice provided evidence that staff who acted as chaperones had been trained and had had their competency to carry out the role assessed to ensure that they were competent to act as chaperones when required to do so.

The practice provided evidence of room-specific cleaning schedules that had been introduced and audits carried out to monitor and ensure that cleaning had been undertaken to the required specification.