

# Dr Gerald Eko

## 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

Overall rating for this service

Good



Are services safe?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Gerald Eko practice on 11 April 2016. The inspection identified areas of practice where the provider needed to make improvements. We carried out this announced follow up inspection to review the improvements made. This report only includes the areas we reviewed. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dr Gerald Eko on our website at [www.cqc.org.uk](http://www.cqc.org.uk). Overall the practice is rated as good.

Following this inspection we have rated the practice as good in the safe domain.

- The practice manager confirmed that staff documented in the patient's notes when they had acted as a chaperone. The practice had a chaperone policy that clearly instructed staff to document in the patient's notes when they had acted as a chaperone.
- The practice had a system in place to monitor and track the use of blank prescriptions within the practice.
- The practice had a policy in place that ensured the locum GP reviewed patient test results in the GPs absence.

**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.

- Staff record in a patients notes whey they have acted as a chaperone. The practice had a chaperone policy that clearly instructed staff to document in the patient's notes when they had acted as a chaperone.
- The practice had a system in place to monitor and track the use of blank prescriptions within the practice.
- The practice had a policy in place that ensured the locum GP reviewed patient test results in the GPs absence.

**Good**



# Dr Gerald Eko

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

A CQC inspector.

### Why we carried out this inspection

We carried out an announced comprehensive inspection at Dr Gerald Eko practice on 11 April 2016. The inspection identified areas of practice where the provider needed to make improvements. We carried out this announced follow up inspection to review the improvements made.

### How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations to share what they knew. We carried out an announced follow up visit on 13 December 2016. During our visit we:

- Spoke with the practice manager and a receptionist.
- Reviewed policies and procedures.

To get to the heart of patients' experiences of care and treatment, we asked the the following question: Is it safe?

# Are services safe?

## Our findings

### Overview of safety systems and processes

The practice had reviewed its systems, processes and practices in place to keep patients safe and safeguarded from abuse.

- At the inspection on 11 April 2016 we found all staff who acted as chaperones were trained for the role and had a Disclosure and Barring Service check in place. (A DBS check identifies 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 vulnerable adults.) However, the staff had not documented in the patient's notes when they had acted as a chaperone for a patient. At this inspection we talked with the practice manager and receptionist who both confirmed that when a member of staff act as a

chaperone they record it in the patient notes. The chaperone policy also clearly instructed staff to document in the patient's notes when they had acted as a chaperone.

- At the inspection on 11 April 2016 we found although staff securely stored the prescription pads, the practice did not have a system in place to monitor or track them within the practice. At this inspection the receptionist demonstrated how they monitored and documented the use of prescriptions in the practice.
- At the inspection on 11 April 2016 we found the practice did not have a robust system in place to review patient test results when the GP was on leave. At this inspection the practice manager explained that the locum GP, who was normally known to the practice, would check the results daily. In addition, the practice had implemented the results locum doctor policy, which clearly informs the locum GP of the process to review and respond to test results daily in the GPs absence.