Care Quality Commission

Inspection Evidence Table

Woolton House Medical Centre 1-544510806

Inspection date: 7 November 2018

Safe

Safety systems and processes

Source	Y/N
There was a lead member(s) of staff for safeguarding processes and procedures.	Yes
Safety and safeguarding systems, processes and practices were developed, implemented and communicated to staff.	Yes
Policies were in place covering adult and child safeguarding. They were updated and reviewed and accessible to all staff.	Yes
Partners and staff were trained to appropriate levels for their role (for example level three for GPs, including locum GPs)	Yes
The practice worked in partnership with other agencies to protect patients from abuse, neglect, harassment, discrimination and breaches of their dignity and respect. Information about patients at risk was shared with other agencies in a timely way.	Yes
Systems were in place to highlight vulnerable patients on record. There was a risk register of specific patients	Yes
Reports and learning from safeguarding incidents were available to staff.	Yes
Disclosure and Barring Service (DBS) checks were undertaken where required	Yes
Staff who acted as chaperones were trained for the role and had a DBS check.	Yes
Explanation of any 'No' answers:	

Recruitment Systems	Y/N
The registered person provided assurances that safety was promoted in their recruitment practices.	Yes
Recruitment checks were carried out in accordance with regulations (including for agency staff, locums and volunteers).	Yes
Staff vaccination was maintained in line with current PHE guidance and if relevant to role.	Yes
Systems were in place to ensure the registration of clinical staff (including nurses and pharmacists) was checked and regularly monitored.	Yes
Staff who require medical indemnity insurance had it in place	Yes
Explanation of any 'No' answers:	

Safety Records	Y/N
Health and safety	Yes

Additional comments:

- At our last inspection we observed that overall the premises were clean and tidy but there had been a leak in the practice nurse room ceiling and this had not been maintained at the time of inspection
- At this inspection we found that maintenance work had been completed in this room removing the infection control risks related to this.
- The practice had arrangements to ensure facilities and equipment were safe and in good working order. A planned preventative maintenance program was not in place, however work had been carried out in areas that required maintenance. For example, the reception area had new flooring and works completed. We found that all electrical works and certificates were now in date.

Risks to patients

Information to deliver safe care and treatment

Question	Y/N
Individual care records, including clinical data, were written and managed in line with current guidance and relevant legislation.	No
Additional evidence:	

- At our previous inspection we found that past medical records were not stored safely.
- At this inspection we found that some new storage facilities had been purchased by the practice.
- However, the storage arrangements remained inadequate for the volume of patient's records needing safe storage.
- Therefore, the records remained at risk of accidental loss, corruption, damage and destruction.

Safe and appropriate use of medicines

Medicine Management	Y/N
Staff had the appropriate authorisations in place to administer medicines (including PGDS or PSDs).	Yes

Additional information:

- At our last inspection we observed that Health Care Assistants (HCA) were delivering vaccination
 programmes but this was undertaken without written patient specific directions (PSD). A PSD is a
 written instruction to staff to administer a medicine to a list of named patients where each patient on
 the list has been individually assessed by that prescriber.
- We saw evidence at this inspection that this had been introduced immediately following inspection.