

Care Quality Commission

Inspection Evidence Table

Rudgwick Medical Centre (1-565308619)

Inspection date: 23 May 2019

Date of data download: 22 May 2019

Overall rating: Good

Please note: Any Quality Outcomes Framework (QOF) data relates to 2017/18.

Safe

Rating: Good

Appropriate and safe use of medicines

The practice had systems for the appropriate and safe use of medicines, including medicines optimisation

Medicines management	Y/N/Partial
Blank prescriptions were kept securely, and their use monitored in line with national guidance.	Y
<p>Explanation of any answers and additional evidence:</p> <p>The practice had introduced a more detailed system for monitoring the use of blank computer prescription paper. We saw that stock deliveries were recorded in a log book together with the serial numbers and associated delivery paperwork. These were held in a locked cupboard within the dispensary. Key access was also controlled by the dispensary staff. Prescription paper was monitored with individual records for each clinician/room. Paper prescriptions returned to the dispensary were held separately to the stock items with an identifying note and returned to the same consultation room when required.</p> <p>The practice had also relocated all emergency medicines to the dispensary to make them accessible from one central point in the practice.</p>	

Dispensary services (where the practice provided a dispensary service)	Y/N/Partial
Prescriptions were signed before medicines were dispensed and handed out to patients. There was a risk assessment or surgery policy for exceptions such as acute prescriptions.	Y
Information was provided to patients in accessible formats for example, large print labels, braille, information in a variety of languages etc.	Y
<p data-bbox="57 479 1098 515">Explanation of any answers and other comments on dispensary services:</p> <p data-bbox="57 577 1513 792">The practice had updated their standard operating procedures and policies for prescription management since our last inspection. We checked a sample of private prescriptions and noted that these had been checked and authorised by a clinician before they were dispensed to the patient or, in the case of travel vaccinations, to the practice nurse for administration. We also checked the procedure for managing repeat prescriptions and noted that medicines were only dispensed when authorised. Exceptions were made for acute prescriptions in line with national guidance.</p> <p data-bbox="57 855 1513 1178">The dispensary staff understood the importance of understanding patient communication needs. During our interview they were able to demonstrate knowledge of patients they saw and the best way to communicate with them. The dispensary staff had a record of patients who had additional communication requirements, and this included patients who had a visual impairment, hearing impairment or patients with a learning disability. Patient information leaflets were printed in accessible formats from a website for these patients. The practice manager told us that further work was ongoing to develop a more detailed register for patients with communication issues. The dispensary staff had access to the accessible information standards. An accessible information policy poster was on display in the dispensary together with a patient information leaflet.</p>	