# **Care Quality Commission**

### **Inspection Evidence Table**

### Abbey Road Medical Practice (1-545686588)

Inspection date: 20 April 2021

Date of data download: 20 April 2021

# **Overall rating: Good**

Please note: Any Quality Outcomes Framework (QOF) data relates to 2019/20.

# Safe

**Rating: Good** 

The provider was rated as Requires improvement for safe at the previous inspection 18 November 2019 due to insufficient safety arrangements, including fire safety, premises safety, Control of Substances Hazardous to Health (COSHH), and staff employment checks.

#### Safety systems and processes

The practice was rated as Good at this inspection because it had remedied all previous concerns. Systems, practices and processes to keep people safe were in place.

Safeguarding	Y/N/Partial
Disclosure and Barring Service (DBS) checks were undertaken where required.	Y
Explanation of any answers and additional evidence:	

At our previous inspection 18 November 2019 there was gaps in staff DBS checks, there was no related DBS risk assessment process and no overall recruitment policy or procedure.

At this inspection, the practice had undertaken relevant DBS checks for staff in accordance with their role and kept a DBS check register. The practice had reviewed and updated its HR policies including the recruitment policy that included appropriate consideration for DBS and assessment of risk. For example, the recruitment policy included reviewing the level of employees contact with adults and children and basing DBS check level decisions on the activity that an employee undertakes, rather than the job title.

Recruitment systems	Y/N/Partial
Recruitment checks were carried out in accordance with regulations (including for agency staff and locums).	Y

Staff vaccination was maintained in line with current Public Health England (PHE) guidance if relevant to role.	Y
There were systems to ensure the registration of clinical staff (including nurses and pharmacists) was checked and regularly monitored.	Y

Explanation of any answers and additional evidence:

At our previous inspection 18 November 2019, recruitment systems were in place but not consistently effective. Most recruitment checks were carried out, but there were gaps in staff immunity status checks for clinical and non-clinical staff, and GPs GMC (General Medical Council) and nurses NMC (Nursing and Midwifery Council) registration monitoring. The practice recruitment policy did not include or refer to all necessary considerations needed at the point of recruitment, such as occupational health and immunity status.

At this inspection, the practice had updated its policies and individual records of staff checks in accordance with staff role including the occupational health policy, staff immunity status record, and clinician's registration checks.

Safety systems and records	Y/N/Partial
There were risk assessments for any storage of hazardous substances for example, liquid nitrogen, storage of chemicals.	Y
There were fire marshals.	Y
Actions from fire risk assessment were identified and completed.	Y

Explanation of any answers and additional evidence:

At our previous inspection 18 November 2019, there were gaps in arrangements for fire safety, premises safety, and Control of Substances Hazardous to Health (COSHH).

At this inspection, the practice had considered COSHH including safety data sheets for chemicals in use.

Fire marshals were appointed including enough fire marshals and contingency plans to cover across the rota. The most recent fire risk assessment was undertaken by an external consultant on 7 December 2020 the risk relating to a room door closer was remedied. The practice demonstrated a track record of more proactive fire safety consideration and action since our previous inspection. For example, it had taken at least six further remedial fire safety actions such as signage and premises related repairs including to the fire panel, electrics, and the boiler. There were ongoing fire drills, and fire alarm, extinguisher and fire point checks.

Health and safety	Y/N/Partial
Premises/security risk assessment had been carried out.	Y
Date of last assessment: 3 March 2021	
Health and safety risk assessments had been carried out and appropriate actions taken.	Y
Date of last assessment: 3 March 2021	
Explanation of any answers and additional evidence:	

At our previous inspection 18 November 2019, there was no specific health and safety or premises/security risk assessment. Some elements of health and safety were considered in a risk assessment undertaken by staff, but there was no verification to ensure it this suitable or sufficient.

At this inspection the practice was supported by an external consultancy for its overall health and safety policy review, its most recent health and safety risk assessment was undertaken by an external consultant on 3 March 2021. Remedial actions were undertaken in line with such as working at a height (ladder checks) and emergency lighting checks.

The practice also implemented its own risk managements frameworks such as premises and equipment spot checks, and an annual incident review that included medicines, diagnosis errors and significant events.

#### Appropriate and safe use of medicines

The practice could demonstrate the prescribing competence of non-medical prescribers,	
and there was regular review of their prescribing practice supported by clinical supervision	Y
or peer review.	

Explanation of any answers and additional evidence:

At our previous inspection 18 November 2019, there was insufficient evidence of clinical oversight of practice nurse and pharmacist staff.

At this inspection, the practice held monthly meetings with GP, practice nurse and pharmacist staff to check prescribing. Nurses and pharmacists also attended peer group meetings such as practice nurse forums and MDT meetings.

The lead GP was the delegated supervisor for GP for pharmacists who received regular one to one sessions with a GP, as well as appraisals via the PCN lead pharmacists.

Support for both practice nurses and pharmacists regarding individual patients was always available via the GP on call.