

Selborne Road Medical Centre

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

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3

Detailed findings from this inspection

Our inspection team	4
Background to Selborne Road Medical Centre	4
Why we carried out this inspection	4
How we carried out this inspection	4
Detailed findings	5

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of this practice on 17 February 2016. The practice was rated as requires improvement for 'safe'. After the comprehensive inspection, the practice sent us an Action Plan to state what they would do to improve their service.

We carried out an announced focused inspection on 16 February 2017 to check that the practice had followed their action plan. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Selborne Road Medical Centre on our website at www.cqc.org.uk.

Overall the practice is rated as good.

At our focused inspection on the 16 February 2017, we found the practice to be good for providing safe services.

Our key findings across all the areas which required improvement were as follows:

- We saw evidence that an infection prevention and control audit had been carried out and there was a completed action plan in place.
- We saw evidence that regular fire alarm testing had been carried out.
- We checked a number of staff files which identified that all relevant staff and in particular those undertaking chaperoning duties had received DBS checks.
- We saw that the practice cleaning schedule had been updated and included relevant detail in order to monitor completed tasks.
- A risk assessment was in place for Legionella testing.
- A risk assessment of the decision not to have a defibrillator on the premises was in place.

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?

- An infection prevention and control audit had been carried out and there was a completed action plan in place.
- Regular fire alarm testing had been carried out.
- Staff files identified that all relevant staff and in particular those undertaking chaperoning duties had received current DBS checks.
- The practice cleaning schedule had been updated and included relevant detail in order to monitor completed tasks.
- A risk assessment was in place for Legionella testing.
- A risk assessment was in place because there was no defibrillator on the premises.

Good



Selborne Road Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

a CQC inspector.

Background to Selborne Road Medical Centre

Why we carried out this inspection

We carried out an announced comprehensive inspection of this practice on 17 February 2016. The practice was rated as requires improvement for 'safe'. After the comprehensive inspection, the practice sent us an Action Plan to state what they would do to improve their service. We carried out a focused inspection on 16 February 2017 to check that the practice had followed their action plan.

We inspected the practice against one of the questions we ask about services: Is the service safe? This was because the practice was rated as requires improvement for 'safe'.

During the February 2016 comprehensive inspection we found a number of issues: the practice cleaning schedule did not include enough detail to clearly monitor completed tasks; there was no risk assessment in place for Legionella testing; there was not a defibrillator on the premises and no risk assessment for this; an infection control audit had

been completed but there was no action plan in place; we did not see evidence of regular fire alarm testing; not all relevant staff and in particular those undertaking chaperoning duties did not have a current DBS check in place.

This focused inspection was carried out to check that improvements planned by the practice after our comprehensive inspection on 17 February 2016 had been made. We inspected the practice against one of the five questions we ask about services: is the service safe.

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and the action report submitted to us in February 2017. We also asked other organisations to share what they knew. We carried out an announced visit on 16 February 2017. During our visit we:

- Spoke with the practice manager and reception staff.

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

- Is the service safe?

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

Overview of safety systems and processes

- At the comprehensive inspection in 2016 we reviewed a number of personnel files and found that appropriate checks had not been carried out, for five reception staff who carried out chaperoning duties, through the Disclosure and Barring Service (DBS checks identify 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 adults who may be vulnerable). At this inspection we reviewed a number of personnel files and found that DBS checks had been carried out for all staff.
- At the comprehensive inspection in 2016 we noted that the practice cleaning schedule was incomplete. At this inspection we saw that the practice had updated their practice cleaning schedule. The revised schedule included further detail in order to enable monitoring of completed daily, weekly and monthly tasks.
- At the comprehensive inspection in 2016 we noted that the practice did not have an action plan to address improvements arising from their infection prevention and control audit. At this inspection we saw that an infection prevention and control audit had been undertaken and we saw evidence that actions had been taken to address any improvements identified as a result. The next infection prevention and control audit was scheduled to take place in September 2017.

Monitoring risks to patients

Risks to patients were generally assessed and well managed.

There were procedures in place for monitoring and managing risks to patient and staff safety. At the comprehensive inspection in 2016 we noted that the practice did not have up to date fire risk assessments. During this inspection we noted that the practice had up to date fire risk assessments and carried out regular fire drills. The fire alarm had been serviced in February 2016 and the next service had been booked to take place later in the week.

- At the comprehensive inspection in 2016 we noted that the practice did not have a risk assessment in place for Legionella (Legionella is a term for a particular bacterium which can contaminate water systems in buildings). On the day of inspection we were shown a comprehensive a risk assessment for Legionella which was due a review in June 2017

Arrangements to deal with emergencies and major incidents

At the comprehensive inspection in 2016 we noted that the practice did not have a defibrillator on the premises. On the day of inspection we saw a risk assessment for this which identified to staff that there was a defibrillator available at a nearby clinic and Accident and Emergency Services were close by. This risk assessment was comprehensive and was due for review in February 2018.