

# Woodingdean 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	4

### Detailed findings from this inspection

Our inspection team	5
Why we carried out this inspection	5
Detailed findings	6

## Overall summary

### Letter from the Chief Inspector of General Practice

The practice was rated good overall and is now rated good for providing safe services.

We carried out an announced comprehensive inspection of this practice on 5 November 2015. A breach of legal requirements was found during that inspection within the safe domain. After the comprehensive inspection, the practice sent us an action plan detailing what they would do to meet the legal requirements. We conducted a focused inspection on 23 November 2016 to check that the provider had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

During our previous inspection on 5 November 2015 we found the following areas where the practice must improve:

- Ensure that action is taken as a result of the Legionella risk assessment.
- Ensure that disposable curtains are replaced in line with infection control guidance.

Our previous report also highlighted the following areas where the practice should improve:

- Ensure that all clinical audits are full cycle and clearly demonstrate improvements have been made as a result.

- Ensure there is a consistent approach to care planning for patients with long term conditions and that records of care plans are kept on file, as well as being handed to the patient.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

During the inspection on 23 November 2016 we found:

- All recommendations made in the Legionella risk assessment from May 2015 had been implemented and a further risk assessment dated 5 February 2016 showed that there were no outstanding risks.
- Disposable curtains in clinic rooms had been replaced, in accordance with infection control guidance and practice policy, every six months. There was a schedule in place for checking and recording this.

We also found in relation to the areas where the practice should improve:

- The practice had conducted second cycles of four clinical audits, which all showed that improvements had been made. The practice now had an on-going programme of clinical audit in place.
- There was a consistent approach to care planning for patients with long term conditions and records of care were kept on file, as well as being handed to the patient.

# Summary of findings

**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 now rated Good for delivering Safe services

At our last inspection, the practice had not taken recommended action in a timely way following a Legionella risk assessment. We also found that the disposable privacy curtains in the treatment rooms were overdue for replacement by a month.

At this inspection, we found that the practice had implemented all recommendations made in the Legionella risk assessment from May 2015 and a further risk assessment dated 5 February 2016 showed that there were no outstanding risks. We also found that disposable curtains in the treatment rooms were replaced, in accordance with infection control guidance and practice policy, every six months. There was a schedule in place for checking and recording this.

Good



# Woodingdean Medical Centre

## Detailed findings

### Our inspection team

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

The inspection was led by a CQC inspector.

### Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 on

5 November 2015 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breaches of legal requirements were found. As a result, we undertook a focused inspection on 23 November 2016 to follow up on whether action had been taken to deal with the breaches.

# Are services safe?

## Our findings

### Overview of safety systems and processes

At our previous inspection, we saw that the practice had not implemented the recommended remedial action identified in a Legionella risk assessment that was undertaken in May 2015. We also found that the disposable privacy curtains in the treatment rooms had not been replaced when they were due, a few weeks prior to our inspection. At our previous inspection it was noted that consultation rooms were not always kept locked during the day when a GP was out of the room which meant the practice could not guarantee the safety of blank prescriptions for use in printers. Although this was not highlighted in our inspection on 5 November 2015 as an issue, we have now followed it up.

At this inspection we found that the practice had actioned all recommendations made in the Legionella risk assessment from May 2015 and a further risk assessment dated 5 February 2016 showed no outstanding risk. There was an updated Legionella policy in place, dated March 2016.

At this inspection we also found that disposable curtains in the treatment rooms were replaced, in accordance with infection control guidance and practice policy, every six months. We saw that the curtains had last been changed on 1 July 2016. There was an appropriate schedule for checking and recording their replacement.

At this inspection we noted that the consulting rooms were kept locked during the day when a GP was out of the room so that blank prescriptions were safe. There was an appropriate policy for the safety of prescription pads in place.