

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Teehey Lane Surgery - A Sagar

66 Teehey Lane, Wirral, CH63 2JN

Tel: 01516082519

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We inspected the following standards to check that action had been taken to meet them. This is what we found:

Requirements relating to workers

✓ Met this standard

Supporting workers

✓ Met this standard

Details about this location

Registered Provider	Teehey Lane Surgery - A Sagar
Registered Manager	Dr Mohammad Salahuddin
Overview of the service	<p>Teehey Lane Medical Centre has four GPs, a practice manager, a practice nurse, two health care assistants, a phlebotomist, physiotherapist, counsellor and pharmacist supported by reception and administrative staff. A midwife and health visitor are based at the service. The service treats people of all ages and provides a range of medical services. A range of clinics are provided.</p>
Type of services	<p>Doctors consultation service</p> <p>Doctors treatment service</p>
Regulated activities	<p>Diagnostic and screening procedures</p> <p>Family planning</p> <p>Maternity and midwifery services</p> <p>Surgical procedures</p> <p>Treatment of disease, disorder or injury</p>

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Summary of this inspection

Why we carried out this inspection

We carried out this inspection to check whether Teehey Lane Surgery - A Sagar had taken action to meet the following essential standards:

- Requirements relating to workers
- Supporting workers

This was an announced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 8 May 2014, talked with staff and reviewed information given to us by the provider.

What people told us and what we found

When we inspected Teehey Lane Surgery in January 2014 we found that improvements were needed to the systems used by the provider to ensure that people using the practice were cared for, or supported by, suitably qualified, skilled and experienced staff. Also suitable arrangements were not in place to demonstrate that all staff were appropriately supported in relation to their responsibilities by receiving appropriate training, supervision and appraisal.

Following that visit the provider carried out improvements and we carried out this inspection to follow up on the actions taken by the provider to ensure people were safe.

We looked at the records and the documents relating to the recruitment, selection support, supervision and training of staff.

We found that improvements had been made and that the requirements of these essential standards were being met.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

Reasons for our judgement

When we visited Teehey Lane Surgery in January 2014 the provider was not meeting this essential standard. We found that the people using the practice or its services could not always be assured that their health and welfare needs were met by staff that were able to do their job. This was because not all relevant checks had been carried out and recorded.

Following that inspection the provider put into place necessary actions to bring about improvements. The practice manager told us how processes had been put in place since our last inspection and what employment checks had been implemented. These checks would be used as standard for the appointment of any new staff prior to the person starting work at the practice.

We saw how staff files were maintained for those staff in post and the checks carried out since our last inspection. We looked in detail at five files relating to staff employed at the practice because we wanted to see how the practice made improvements in ensuring that employees were suitable to work in a primary medical service. We saw that there was photographic and other evidence of identity and a detailed employment history as required by the regulations.

Records confirmed that a Disclosure and Barring Service (DBS) check had been sought in relation to staff holding a clinical post. DBS checks help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable people. This means that people's needs were met by staff who were suitable because appropriate checks had been carried out.

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

We talked with the practice manager about the induction process for new staff and about arrangements for on-going training for staff in post. We saw evidence that demonstrated two recently employed staff had received an induction. We looked at training attendance lists demonstrating compliance with mandatory training and examined two files which recorded training and on-going professional development.

The practice manager reported that all staff had an annual appraisal and we saw records in personnel files recording confirming this. The next round of appraisal meetings was scheduled for 12 May 2014.

There had been a lack of individual formal supervision found at the last inspection. The practice had considered ways of formalising their supervision processes with the line manager which included the development of personal development plans. We saw that the practice had a plan in place to commence recorded meetings after the annual appraisal of 12 May.

We saw that staff meetings were held quarterly.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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