

Care Quality Commission

Inspection Evidence Table

Baltimore Park Surgery (1-549993883)

Inspection date: 29 August 2018

Date of data download: 22 August 2018

Safe

Safety systems and processes

Safeguarding	Y/N
Disclosure and Barring Service checks were undertaken where required	Yes
Additional information: <ul style="list-style-type: none">• Disclosure and Barring Service (DBS) checks were undertaken for appropriate members of staff.• Risk assessments had been completed for non-clinical members of staff who did not have a DBS check.	

Safety Records	Y/N
Health and safety risk assessment and actions	Yes
Additional comments: <p>The practice had reviewed and strengthened existing arrangements to assess, monitor and manage risks to patient safety. This included:</p> <ul style="list-style-type: none">• Professional risk assessments had been commissioned and completed. Assessments which highlighted risks and/or required actions were now supported by detailed action plans. Progress against these action plans was monitored by the Deputy Practice Manager and reported to the management team via the monthly management meetings.	

- Regular monitoring systems have been established for health and safety including fire safety and legionella. The practice had trained and appointed the Deputy Practice Manager to maintain and monitor these systems.
- We saw there was a clear line of responsibility for actioning these when the Deputy Practice Manager was absent as all practice staff completed risk assessment training in March 2018.
- Risk assessments and action plans had been added as a standing item on the monthly managers meeting agenda.
- Following improvements and evidence collected during the August 2018 inspection it was evident the risk management systems and processes had been incorporated into the Balmore Park culture.

Medicines Management	Y/N
<p>Staff had the appropriate authorisations in place to administer medicines (including Patient Group Directions or Patient Specific Directions).</p>	<p>Yes</p>
<p>If the practice had controlled drugs on the premises there were systems for the safe ordering, checks on receipt, storage, administration, balance checks and disposal of these medicines in line with national guidance.</p> <p>Additional information:</p> <p>A risk assessment was conducted and on review it was agreed by the GP's and pharmacist that there was no further need for Controlled Drugs (CDs) to be kept on site (CDs are medicines that require extra checks and special storage because of their potential misuse). We saw evidence that the CDs were destroyed by the pharmacist according to the Destruction of Controlled Drugs Protocol. We also saw the pharmacist had created a directory of pharmacies in the local area that held CDs for the GP's information.</p>	<p>N/A</p>
<p>The practice held appropriate emergency medicines and risk assessments were in place to determine the range of medicines held.</p>	<p>Yes</p>
<p>The practice had arrangements to monitor the stock levels and expiry dates of emergency medicines/medical gases.</p>	<p>Yes</p>