

Care Quality Commission

Inspection Evidence Table

Albion Mount Medical Practice (1-3632457791)

Inspection date: 20 March 2019

Date of data download: 19 March 2019

Overall rating: Good

Please note: Any Quality Outcomes Framework (QOF) data relates to 2017/18.

Safe

Rating: Good

Safety systems and processes

The practice had clear systems, practices and processes to keep people safe and safeguarded from abuse.

Safeguarding	Y/N/Partial
Partners and staff were trained to appropriate levels for their role (for example, level three for GPs, including locum GPs).	Partial
Disclosure and Barring Service (DBS) checks were undertaken where required.	Y
Explanation of any answers and additional evidence: The practice had set up processes to complete DBS checks for all non-clinical staff. These were being carried out on a rolling process. We were told the recruitment policy would be updated to include DBS checks for all new starters in the future. Following our feedback, the practice told us they would review their arrangements for safeguarding training, to ensure that nurses as well as GPs received level three safeguarding training, in line with recently published intercollegiate guidance.	

Health and safety	Y/N/Partial
Premises/security risk assessment had been carried out. Date of last assessment: 28 February 2019	Y
Health and safety risk assessments had been carried out and appropriate actions taken. Date of last assessment: 28 February 2019	Y

Explanation of any answers and additional evidence:

The practice acknowledged there were some issues in relation to staff security, due to the layout of the main site of the practice. At the time of our inspection, they were in the process of costing various options to help mitigate risk to staff.

Loose slabs previously identified to the exterior of the building had been replaced, and staff told us that fire doors were not wedged open in any circumstances.

Any additional evidence or comments

- The practice had revised their processes for the identification and support of carers. We saw that 53 carers had been identified. This equated to 1% of the practice population.

Appropriate and safe use of medicines

The practice had systems for the appropriate and safe use of medicines, including medicines optimisation

Medicines management	Y/N/Partial
The practice held appropriate emergency medicines, risk assessments were in place to determine the range of medicines held, and a system was in place to monitor stock levels and expiry dates.	Y
The practice had arrangements to monitor the stock levels and expiry dates of emergency medicines/medical gases.	Y
There was medical oxygen and a defibrillator on site and systems were in place to ensure these were regularly checked and fit for use.	Y
<p>Explanation of any answers and additional evidence:</p> <p>The practice had reviewed the range of emergency medicines held on site, and had completed a risk assessment to support their judgements. We saw that the decision had been made to retain the stock they currently held, with no additions.</p> <p>A defibrillator had been purchased for the branch site. We saw documentary evidence that it had been purchased.</p>	

