

Care Quality Commission

Inspection Evidence Table

Riverlyn Medical Centre (1-4048912460)

Inspection date: 06 November 2019

Date of data download: 05 November 2019

Overall rating: Good

Safe

Rating: Good

- At our previous inspection 13 November 2018, we rated the practice as 'requires improvement' for providing safe services because staff immunisation records were not fully complete and Patient Specific Directions were not appropriately authorised.
- At the inspection on 6 November 2019, we saw the practice had an effective system in place for obtaining and recording staff immunisations which was embedded within their recruitment procedures.
- There was a system in place to ensure Patient Specific Directions were authorised appropriately before medicines were administered by the healthcare assistant.
- Actions identified from fire risk assessments were completed and appropriate risk assessments were put in place to ensure safety of staff and patients.
- The infection prevention and control lead had the appropriate training to support their role.
- Safety checks for the oxygen and defibrillator kept on site were fully documented and carried out at regular intervals.

Safety systems and processes

Recruitment systems	Y/N/Partial
Staff vaccination was maintained in line with current Public Health England (PHE) guidance if relevant to role.	Y
Explanation of any answers and additional evidence: Following our findings at the previous inspection, the practice had taken immediate action to obtain full vaccination records for all staff. There were signed declarations from staff members who were unable to provide the information, and the checks had been incorporated into the practice's recruitment procedures. We saw a log of all staff vaccinations in line with current PHE guidance.	

Safety systems and records	Y/N/Partial
A fire risk assessment had been completed. Date of completion: 5 November 2019	Y
Actions from fire risk assessment were identified and completed.	Y
<p>Explanation of any answers and additional evidence:</p> <p>Since our last inspection, fire risk inspections were completed every six months by an external provider on behalf of the practice. Actions identified from the assessment were rectified. Risk assessments were put in place, for example, for non-working lighting in non-patient areas and for the storage of oxygen on the premises.</p>	

Infection prevention and control

	Y/N/Partial
Staff had received effective training on infection prevention and control.	Y
<p>Explanation of any answers and additional evidence:</p> <p>The practice nurse was the lead for infection prevention and control and the healthcare assistant was the deputy lead. We saw evidence that the nurse had undertaken several training courses on infection prevention and control, including hand hygiene. We were told she cascaded the training to all staff within the practice.</p>	

Appropriate and safe use of medicines

Medicines management	Y/N/Partial
Staff had the appropriate authorisations to administer medicines (including Patient Group Directions or Patient Specific Directions).	Y
There was medical oxygen and a defibrillator on site and systems to ensure these were regularly checked and fit for use.	Y
<p>Explanation of any answers and additional evidence:</p> <p>Since our last inspection, the practice had created electronic templates for Patient Specific Directions. These were printed off from the individual patient record before medicines were given, authorised by a GP and then scanned into the patient record.</p> <p>The oxygen and defibrillator were checked monthly, and the checks were logged onto a shared intranet used within the practice. We saw the last checks had been completed on 25 October 2019.</p>	