

The Acorn Surgery

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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of The Acorn Surgery on 16 April 2015. Breaches of legal requirements were found. Specifically, we had found that the practice had no chaperone policy in place, and that significant events were not reviewed on an annual basis. The practice also had no access to oxygen or an Automatic External Defibrillator (AED) to support patients requiring emergency treatment. After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements in relation to the breaches of regulation 12(2)(a)(b)(f) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We undertook this focussed inspection on 19 October 2015 to check that they had followed their plan and to confirm that they now met the legal requirements. This

report covers our findings in relation to those requirements and also where additional improvements have been made following the initial inspection. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for The Acorn Surgery on our website at www.cqc.org.uk.

Overall the practice is rated as Good. Specifically, following the focussed inspection we found the practice to be good for providing safe services.

Our key findings across all the areas we inspected were as follows:

- The practice had Oxygen and an Automatic External Defibrillator (AED) in place to ensure the welfare and safety of service users in a medical emergency.
- The practice had implemented a chaperone policy.

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 rated as good for providing safe services. Risks to patients were assessed and managed in relation to responding to emergencies.

Good



The Acorn Surgery

Detailed findings

Why we carried out this inspection

We undertook a focussed desk-based inspection of Shirley Medical Centre on 19 October 2015. This is because the service had been identified as not meeting some of the legal requirements and regulations associated with the Health and Social Care Act 2008. From April 2015, the regulatory requirements the provider needs to meet are called Fundamental Standards and are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Specifically, breaches of regulation 12(2)(a)(b)(f) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 were identified.

We had found that the practice had no chaperone policy in place, and that significant events were not reviewed on an annual basis. The practice also had no access to oxygen or an Automatic External Defibrillator (AED) to support patients requiring emergency treatment.

This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 16 April 2015 had been made. We inspected the practice against one of the five questions we ask about services: is the service safe.

Are services safe?

Our findings

Reliable safety systems and processes including safeguarding

Our inspection of 19 October 2015 found the practice had a chaperone service in place, which we were told was provided by trained clinical staff. The practice had developed and implemented a new chaperone policy which was available to all staff

Arrangements to deal with emergencies and major incidents

Our inspection of 19 October 2015 found the practice had arrangements in place to manage emergencies. The practice had access to oxygen and an Automatic External Defibrillator in the event of an emergency and we were shown evidence to confirm this.