

Townsend House Medical Centre

Quality Report

48 Harepath Road

Seaton

EX12 2RY

Tel: 01297 20616

Website: www.townsendhousesurgery.co.uk

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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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Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

Good



Townsend House Medical Centre

Detailed findings

Background to Townsend House Medical Centre

We carried out an inspection on 26 October 2014 and found the provider was in breach of the regulation that relates to recruitment checks - Regulation 21(b) (The registered person must operate effective recruitment procedures. They must ensure that the information specified in schedule 3 is available in respect of a person employed for the person of carrying out a regulated activity, and such other information as appropriate.). Following our inspection on 14 October 2014, we published a report

setting out our judgements and asked the provider to send us a report of the changes they would make to comply with the regulation they were not meeting. The provider sent an action plan within agreed timescales. We have now followed up this action plan to make sure the necessary changes have been made; we found the provider is now meeting the regulation.

This report should be read in conjunction with the full inspection report. We have not revisited Townsend House as part of this review because the practice was able to demonstrate compliance without the need for an inspection visit. We spoke with the practice manager, and reviewed information sent to us by the practice.

Are services safe?

Our findings

The practice is now rated as good for providing a safe service, having made improvements to the way recruitment processes are managed.

Staffing and recruitment

Our findings at the last inspection were that not all recruitment records contained evidence that appropriate recruitment checks had been undertaken prior to employment. For example, there was no proof of identification, no written references, no risk assessments to determine the decisions re carrying out criminal records checks via the Disclosure and Barring Service (DBS).

The practice had sent us an action plan and have since provided evidence of the new processes in place. The practice has

- Amended the recruitment policy and disclosure and barring service policy to reflect that all non-clinical staff will have a risk assessment upon induction. The risk assessment will determine if it is appropriate for a DBS check to be performed. This will form a permanent part of the recruitment process and be kept on staff personnel files.
- Amended the staff induction protocol to reflect that a risk assessment or DBS check has been performed as appropriate. The induction sheet and risk assessment sheet is signed off by the Practice Manager.