

Dr R Miarkowski and Partners

Quality Report

Sidney West Primary Care Centre
Burgess Hill
West Sussex
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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 at Dr R Miarkowski and Partners on 15 March 2016. During this inspection we found breaches of legal requirement and the provider was rated as requires improvement under the safe domain. The full comprehensive report on the March 2016 inspection can be found by selecting the 'all reports' link for Dr R Miarkowski and Partners on our website at www.cqc.org.uk.

Following this inspection the practice sent to us an action plan detailing what they would do to meet the legal requirements in relation to the following:

- Ensuring that all staff who have unsupervised access to patients have undergone a check via the disclosure and barring service (DBS).
- Ensuring records of cleaning, specifically the laundering of material privacy curtains are maintained to demonstrate that these curtains are laundered in line with national infection control guidelines.

Additionally we had found that:

- The provider needed to review appointment accessibility in line with their action plan.

This inspection was an announced focused inspection carried out on 29 March 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- The practice had undertaken DBS checks on staff who required these checks. New staff who had started employment since our last inspection had also undergone an enhanced DBS check.
- The practice had reviewed their procedure for laundering fabric privacy curtains. These had been replaced with disposable curtains and were subject to a six monthly replacement programme.

Additionally:

- The practice continued to keep their appointment availability under review. We saw evidence to demonstrate appointments were available for patients. More appointments had been released each day and could be booked in advance. Urgent

Summary of findings

appointments were also available for patients. The practice was working collaboratively with other local providers to review the demand for on the day appointments in the area.

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?

At our previous inspection on 15 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of risk management and infection control required some improvements.

On our inspection of 29 March 2017 we found that:

- The practice had undertaken DBS checks on staff who required these checks. New staff who had started employment since our last inspection had also undergone an enhanced DBS check.
- The practice had reviewed their procedure for laundering fabric privacy curtains. These had been replaced with disposable curtains and were subject to a six monthly replacement programme.

Good



Dr R Miarkowski and Partners

Detailed findings

Our inspection team

Our inspection team was led by:

Our team consisted of a CQC Inspector.

Background to Dr R Miarkowski and Partners

Dr R Miarkowski and Partners offer primary medical services via a general medical services (GMS) contract to approximately 5,604 registered patients. The practice provides services to a higher number of patients who are aged 0 to 9 years of age and 30 to 39 years of age, when compared with the local clinical commissioning group (CCG) and England average. The practice is in an area with higher deprivation levels compared to the CCG average however the practice is significantly lower than the national average.

The practice clinical staff comprises three GP Partners (two male and one female), a salaried GP (female), two practice nurses (1.32 Whole Time Equivalents (WTE)) and three health care assistants.

The Practice is supported by a team of administration staff including an office manager, a finance administrator, a prescriptions administrator and a reception and secretarial team. Day to day management is undertaken by a practice manager.

The practice runs a number of services for its patients including minor surgery, asthma clinics, child immunisation clinics, diabetes clinics, new patient checks, and weight management support.

Services are provided from:

Dr R Miarkowski and Partners

Park View Health Partnership

Sidney West Primary Care Centre

Burgess Hill

West Sussex

RH15 8HS

Opening hours are Monday to Friday 8am to 6.30pm.

During the times when the practice is closed arrangements are in place for patients to access care from IC24 which is an Out of Hours provider, this is accessed by patients calling NHS 111.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr R Miarkowski and Partners on 15 March 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and requires improvement in providing safe services. The full comprehensive report following the inspection in March 2016 can be found by selecting the 'all reports' link for Dr R Miarkowski and Partners on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Dr R Miarkowski and Partners on 29 March 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Detailed findings

How we carried out this inspection

During our visit we:

- Reviewed their system for undertaking DBS checks on staff.

- Reviewed aspects of their infection control systems.
- Looked at the appointments system.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 15 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of risk management and infection control required some improvements.

These arrangements had significantly improved when we undertook a follow up inspection on 29 March 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

At this inspection we found that the practice had taken steps to ensure staff who required a DBS check had undergone this process. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). For

example we saw that the practice had a comprehensive risk assessment for staff who did not have unsupervised contact with patients. We saw evidence that two staff who had unsupervised access to patients and had not been subject to a DBS check at our last inspection now had a DBS in place. We also looked at the records for a new staff member employed since our last inspection and confirmed that they had an appropriate DBS check in place.

At our inspection on 15 March 2016 we noted that the practice used fabric privacy curtains in consultation rooms and clinical areas and a record of their laundering had not been maintained to demonstrate that they were cleaned regularly. At this inspection we found that the practice had reviewed these arrangements and replaced all of the fabric curtains with disposable items. We checked two consultation rooms and confirmed these were in place. We also saw evidence that these items were replaced every six months.