

# The Practice Bowling Green Street

## Inspection report

29-31 Bowling Green Street  
Leicester  
Leicestershire  
LE1 6AS  
Tel: 0116 204 7240  
www.bowlinggreenstsurgery.co.uk

Date of inspection visit: 11 Dec 2018  
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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 location

Inadequate



Are services safe?

Inadequate



Are services effective?

Requires improvement



Are services caring?

Requires improvement



Are services responsive?

Requires improvement



Are services well-led?

Inadequate



# Overall summary

We carried out an announced comprehensive inspection at The Practice Bowling Green Street on 11 December 2018 as part of our inspection programme for new registrations.

The practice was taken over by DHU Health Care in February 2018.

We base our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

## We have rated this practice as **Inadequate overall**.

We rated the practice as **Inadequate** for providing safe services because:

- The practice did not always have clear systems, practices and processes to keep people safe.
- There were some gaps in systems to assess, monitor and manage risks to patient safety.
- The practice did not have systems for the appropriate and safe use of medicines.
- The practice did not have a system to learn and make improvements when things went wrong.

We rated the practice as **Requires Improvement** for providing effective services because:

- Patients care and treatment was not always delivered in line with current standards.
- There was limited monitoring of the outcomes of care and treatment.
- The practice was unable to demonstrate that all staff had the skills, knowledge and experience to carry out their roles.

We rated the practice as **Requires Improvement** for providing caring services because:

- The practice did not carry out any patient feedback exercises.
- The practice did not have a system to support carers.

We rated the practice as **Requires Improvement** for providing responsive services because:

- People were not always able to access care and treatment in a timely way.

- Complaints were not used to improve the quality of care.

We rated the practice as **Inadequate** for providing well-led services because:

- The oversight and governance arrangements for the management and performance of the practice were ineffective.
- The practice had a clear vision but it was not supported by a credible strategy to provide high quality sustainable care.
- The practice did not always have clear and effective processes for managing risks, issues and performance.
- The practice did not always act on appropriate and accurate information.
- There was little evidence of systems and processes for learning, continuous improvement and innovation.

The areas where the provider must make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The practice received two warning notices which required them to be compliant with regulations by 31 March 2019. The practice also received a requirement notice regarding regulations which can be found at the end of the report.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to vary the provider's registration to remove this location or cancel the provider's registration.

# Overall summary

Special measures will give people who use the service the reassurance that the care they get should improve.

**Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

**Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**

## Population group ratings

<b>Older people</b>	<b>Requires improvement</b> 
<b>People with long-term conditions</b>	<b>Requires improvement</b> 
<b>Families, children and young people</b>	<b>Requires improvement</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Requires improvement</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Requires improvement</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Requires improvement</b> 

## Our inspection team

The inspection was carried out by a lead inspector, a GP Specialist Advisor, Practice Manager Specialist Advisor and a second inspector.

## Background to The Practice Bowling Green Street

The Practice Bowling Green Street is located at 29-31 Bowling Green Street, Leicester, Leicestershire, LE1 6AS. The provider is DHU Health Care C.I.C who took over the practice in February 2018. The practice is part of a joint venture between DHU Health Care C.I.C and Leicester City Healthcare Federation.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice has a contract with the Leicester City Clinical Commissioning Group (CCG) and provides NHS Services through an alternate provider medical services (APMS) contract to 4,351 patients located in Leicester City.

The practice has one male GP, one healthcare assistant, one practice manager and a team of receptionists. The practice utilises regular sessional GPs and nurses when required.

The practice is open between 8am and 6.30pm Monday to Friday. The practice has extended hours opening times on Saturday mornings between 8.30am and 12.30pm.

When the practice is closed patients are asked to contact NHS 111 for out-of-hours care.

This section is primarily information for the provider

## Requirement notices

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>How the regulation was not being met:</b> There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular we found The practice did not have relevant and up to date policies available to staff. Receptionists at the practice were triaging patients with no protocol. There was no effective system to ensure that patient records were updated when prescriptions were not collected There was a lack of oversight on the safety of the premises including legionella testing, fire drills and air conditioning tests. There was not an effective system to support patients who acted as carers. There was no system to ensure blank prescriptions were stored and managed securely. This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

This section is primarily information for the provider

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

#### Regulated activity

Diagnostic and screening procedures  
Family planning services  
Maternity and midwifery services  
Surgical procedures  
Treatment of disease, disorder or injury

#### Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance  
**A warning notice was issued requiring the practice to be compliant with Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 by 31 March 2019**

#### Regulated activity

Diagnostic and screening procedures  
Family planning services  
Maternity and midwifery services  
Surgical procedures  
Treatment of disease, disorder or injury

#### Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment