

# Grove Medical Centre

## Inspection report

The Grove Medical Centre  
The Grove, Church Road  
Egham  
TW20 9QJ  
Tel: 01784433159  
[www.thegrovemedicalcentre.co.uk](http://www.thegrovemedicalcentre.co.uk)

Date of inspection visit: 25 April - 28 April 2022  
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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

Requires Improvement



Are services safe?

Requires Improvement



Are services effective?

Requires Improvement



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Requires Improvement



# Overall summary

We carried out an announced inspection at Grove Medical Centre between 25 April and 28 April 2022. Overall, the practice is rated as Requires Improvement.

The key questions are rated as:

Safe – Requires Improvement

Effective - Requires Improvement

Caring – Good

Responsive – Good

Well-led - Requires Improvement

At our previous inspection on 9 April 2019, the practice was Good overall and for all of the key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Grove Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We undertook this inspection as part of a random selection of services rated Good and Outstanding to test the reliability of our new monitoring approach.

## How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit to the surgery

## Our findings

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

- what we found when we inspected

# Overall summary

- 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 Requires Improvement overall**

We found that:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Staff told us they felt well supported and that leaders were approachable.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Staff recruitment files contained all of the required information.
- Staff training was up to date, which included safeguarding, basic life support, infection prevention and control, and sepsis.
- We saw evidence that clinicians took part in multi-disciplinary team meetings to discuss patient care.
- The remote searches of the clinical system carried out by the CQC GP specialist advisor indicate that some systems were not working as intended.
- Safety alerts were not always fully embedded into prescribing practice.
- Patients failing to attend requested appointments by the GPs were not monitored or followed-up.
- Actions from risk assessments did not always contain required information to ensure actions were completed in a timely manner.
- The central information recorded, and minutes taken for significant events and complaints needed to be strengthened to ensure wider shared learning.
- We found gaps in processes relating to the monitoring of vaccine fridge temperatures to ensure those medicines remained safe to use.

We found breaches of regulations. The provider **must**:

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

The provider **should**:

- Review and continue to monitor cervical smear screening uptake to meet the Public Health England screening rate target.
- Review and improve child immunisation rates to meet World Health Organisation (WHO) targets.
- Continue to review staff immunisation status and record centrally.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Our inspection team

Our inspection team was led by a CQC lead inspector. We spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Grove Medical Centre

Grove Medical Centre is a GP practice located in a residential area of Egham. The practice provides GP services to 15,600 patients.

Services are provided from one location:

The Grove Medical Centre - The Grove, Church Road, Egham, Surrey TW20 9QN.

Information published by Public Health England shows that deprivation within the practice population group is rated nine out of 10. The lower the decile, the more deprived the practice population is relative to others. (Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial).

According to the latest available data, the ethnic make-up of the practice area is 8.6% Asian, 86.9% White, 0.9% Black, 2.3% Mixed, and 1.2% Other.

There is a team of three GP partners, four salaried GPs and two Associate GPs (male and female). The practice is also a training practice for doctors. Training practices help qualified doctors, known as registrars, complete the final stages of their GP training. The practice also provides training for nurses and paramedic practitioners.

The practice has a team of three nurses who provide nurse-led clinics. The practice is supported by two healthcare assistants, a phlebotomist, four clinical pharmacists and a Physician's Associate, as well as practice management and a range of administrative roles.

Grove Medical Centre is open 8am to 6pm Monday to Friday.

The practice offers pre-bookable appointments 8am to 11:30am on Saturday mornings.

The practice is part of a hub of GP practices which provides extended access appointments for patients during the week until 8pm and at weekends. Patients are able to access Out of Hours services through NHS 111.

For information about practice services, opening times and appointments please visit their website at [www.thegrovemedicalcentre.co.uk](http://www.thegrovemedicalcentre.co.uk)

## Requirement notices

### Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are 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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The practice had failed to ensure care and treatment was provided in a safe way for service users. In particular:</p> <ul style="list-style-type: none"><li>• Gaps in the monitoring of vaccine fridge temperatures.</li><li>• Medicine reviews were not always being completed in the required time frames.</li><li>• Insufficient monitoring of a number of patients who were prescribed medicines. Including: for Hypothyroidism, Asthma management and Diabetes</li><li>• Prescribing not in line with medicines and healthcare products regulatory agency safety alerts for one historical alert.</li><li>• Test results not always followed up appropriately in order to diagnose long term conditions. For example, Chronic Kidney Disease and diabetes</li><li>• There was no follow up of patients who failed to book requested monitoring or blood tests (by the GP) even though some had attended further appointments.</li><li>• Little evidence of downloading or recording test results completed outside the practice.</li></ul>
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>Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p> <p>There were inadequate systems and processes in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:</p>

This section is primarily information for the provider

## Requirement notices

- Insufficient investigation and detail in the recording of complaints and significant events to allow for the review of trends or the shared learning to the wider team.
- The fire risk assessment action plan did not contain information as to who, when or how the actions were to be completed.
- There was not effective oversight of risks, such as management of patients on high-risk medicines, the monitoring of patients with long term conditions, adequate reviewing of test results and medicine reviews.