

# Nuffield House Doctors Surgery

## Quality Report

Minchen Road,  
Harlow,  
Essex  
CM20 3AX  
Tel: 01279 213101  
Website: [www.nuffieldhouse.co.uk](http://www.nuffieldhouse.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.

## Contents

### Key findings of this inspection

	Page
Letter from the Chief Inspector of General Practice	1
The five questions we ask and what we found	3

### Detailed findings from this inspection

Our inspection team	4
Background to Nuffield House Doctors Surgery	4
Why we carried out this inspection	4

## Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Nuffield House Doctors Surgery over two days, on 8th August 2017 and 5th September 2017. The overall rating for the practice was inadequate. The full comprehensive report on the 2017 inspection can be found by selecting the 'all reports' link for Nuffield House Doctors Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Following that inspection, the practice was served with a warning notice in respect of the governance at the practice.

This inspection was an announced focused inspection carried out on 20th March 2018 to confirm that the practice had carried out their plan to meet the legal

# Key findings

requirements in relation to the breaches in regulations that we identified in our previous inspection in 2017. This report covers our findings in relation to those requirements.

We found that the practice had met the requirements of the warning notice.

Our key findings were as follows:

- There were now effective systems to assess and monitor infection control. An audit had been completed which included an action plan. Staff were aware of the infection control principles that were relevant to their role.
- GP locums were now being appropriately engaged. There was evidence that the practice had checked references of conduct in previous employment, identification and training.
- Staff training was now being monitored and recorded.
- All staff were now receiving an appraisal of their performance.
- Staff knew who to go to if they had concerns about infection control or safeguarding children and vulnerable adults.
- The practices had implemented a policy relating to reviewing patients who were prescribed lithium. Evidence confirmed that these patients were being suitably monitored.
- There were 45 patients who were on the learning disability register and aged over 16. 37 of these patients had a health check in the last year.
- Exception reporting relating to a mental health indicator had been reviewed and there were plans to improve performance.

**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 well-led?**

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# Nuffield House Doctors Surgery

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

a lead CQC inspector and included a GP specialist adviser and a nurse specialist adviser.

## Background to Nuffield House Doctors Surgery

Nuffield House Doctors Surgery is situated in Harlow, Essex. It is located in premises which are shared with health visitors and speech and language therapists.

There are approximately 13,250 patients registered at the practice, which is governed by five GP partners, four of which are male and one female. There is also one male salaried GP employed, along with an advanced nurse practitioner and three practice nurses. There are a number of other staff carrying out administrative and clerical duties, led by a full-time practice manager.

This practice is a teaching and training practice and has medical students and GP registrars in their final stage of training. GP registrars are fully qualified doctors and will have had at least two years of post-graduate experience. Medical students may observe patient consultations and examinations with the patient's consent.

The practice is open between 8am and 6.30pm on Mondays to Fridays and is closed at the weekends. GP appointments times are from 9am to 12 noon and 3pm to 5.30pm. In addition to this, GPs are available for patients needing an urgent appointment or requiring home visits. Practice

nurse appointments are from 9.30am to 6pm on Mondays and 8.40pm to 6pm Tuesday to Thursday. There are separate sessions for minor surgery and contraceptive implants.

There is also a pre bookable weekend service, via Stellar Healthcare, across West Essex which is based at seven different locations. Appointments are made through the practice.

There are slightly higher than average levels of income deprivation affecting children and older people at this practice. The numbers of older people, babies, children and working age people registered at the practice was in line with the national average.

We had previously carried out an announced comprehensive inspection at Nuffield House Doctors Surgery over two days, on 8th August 2017 and 5th September 2017. The overall rating for the practice following that inspection was inadequate. The full comprehensive report on the 2017 inspection can be found by selecting the 'all reports' link for Nuffield House Doctors Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Following that inspection, the practice was served with a warning notice in respect of the governance at the practice. The deadline for compliance with the warning notice was 18 December 2017.

This inspection was an announced focused inspection carried out on 20th March 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the warning notice that was served.

# Detailed findings

## Why we carried out this inspection

We undertook a comprehensive inspection of Nuffield House Doctors Surgery on 8th August 2017 and 5th September 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as inadequate. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Nuffield House Doctors Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Following that inspection, the practice was served with a warning notice in respect of the governance at the practice. The deadline for compliance with the warning notice was 18 December 2017.

We undertook a follow up focused inspection of Nuffield House Doctors Surgery on 20th March 2018. This was an announced focused inspection to confirm that the practice had carried out their plan to meet the legal requirements in relation to the warning notice that was served.

# Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

## Our findings

At our previous inspection carried out on 8th August 2017 and 5th September 2017, we rated the practice as inadequate for providing well-led services. This was because the practice was experiencing issues balancing increasing demand with embedding and inducting new GP partners and staff and effective systems had not been implemented to mitigate risks to patients and ensure good care.

We issued a warning notice in respect of these issues and found arrangements had significantly improved when we undertook a follow up inspection on 20th March 2018. The practice had met the requirements of the warning notice.

### Culture

- There were now processes in place for providing staff with the support and development that they needed. We saw evidence to confirm that all staff had received an appraisal of their performance, which included what additional training they may require to support them in their roles. Staff told us they were consulted and involved in decisions concerning the day-to-day running of the practice.
- On the day of our inspection, we found that the system to monitor staff training continued to be ineffective. However, we were sent evidence immediately following our inspection to show that systems had been updated. The practice now had an up-to-date picture of the training that staff had received and the training that was required.

### Governance arrangements

There were now clear responsibilities, roles and systems of accountability to support effective governance and management.

- Staff were clear on their roles and accountabilities in respect of safeguarding vulnerable adults and children and infection prevention and control. They knew who to contact for further advice and guidance.

- Practice leaders had established proper policies, procedures and activities to ensure safety and assure themselves that they were operating as intended.
- There was now a clear staffing structure and designated responsibilities.
- Recruitment and pre-engagement checks were in place for staff and locum GPs.

### Managing risks, issues and performance

Processes had been improved and the practice was now managing the risks identified in our warning notice.

- At our previous inspection we identified that This indicator related to the amount of patients with a diagnosis of schizophrenia, bipolar affective disorder and other psychosis having an agreed care plan in the record.
- At our most recent inspection, we found that the practice had implemented an improved system of recalling relevant patients. There were 82 patients who were eligible for this health check and 49 had been completed. Whilst the deadline for the completion of these health checks had not yet expired and so relevant patients were yet to be excluded, the findings indicated improvement.
- We looked the records of the eight patients who were prescribed lithium. We found they had all been effectively reviewed to ensure their medicines were being prescribed safely.
- Patients who had learning disabilities were now being recalled for their health checks. There were 45 patients on the learning disabilities register and 37 had received a health check in the last year.
- The practice had completed an infection control audit and taken action where identified. Two members of staff had been identified as infection control lead and staff were clear who they should go to for advice. Staff were aware of infection control principles that were relevant to their roles.