

Trinity Medical Centre

Inspection report

2 Garland Road
London
SE18 2AE
Tel: 020 8319 7640
www.thetrinitymedicalcentre.co.uk

Date of inspection visit: 11 June 2019
Date of publication: 19/08/2019

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?

Good



Are services well-led?

Good



Overall summary

CQC carried out an announced comprehensive inspection of Trinity Medical Centre on 4 and 10 October 2018 to follow up on breaches of regulation identified in August 2017. The practice was rated as requires improvement overall with ratings of inadequate for providing safe services, requires improvement for effective and for well led services and good for providing caring and responsive services.

As a result of the findings on the day of the inspection the practice was issued with a warning notice for breach of Regulation 12 (Safe care and treatment) and a requirement notice for Regulation 17 (Good governance). You can read our findings from our last inspections by selecting the 'all reports' link for Trinity Medical Centre on our website at .

CQC then carried out an announced focused inspection on 9 January 2019. 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 as detailed in the warning notices issued on 16 October 2018.

This was an announced comprehensive inspection carried out on 11 June 2019. This inspection was carried out to follow up on breaches of regulation identified in October 2018.

At the last inspection in October 2018 we rated the practice as inadequate for providing safe services, and requires improvement for providing effective and well-led services because:

- The practice had no systems in place to monitor patients on high risk medicines.
- There was no safety netting for patients asked to attend for blood tests.
- There were no safety netting processes for non-clinical staff members making changes to prescriptions.
- The provider did not have a copy of the premises' security risk assessment.
- There was insufficient information in care plans.
- Not all children on the at-risk register had flags on their notes.
- There was no medicines management policy in place or practice protocol for prescribing high risk medicines, which reflected national guidance.
- The provider did not have an up to date policy or pathology protocol to enable staff to manage test results effectively.

At this inspection, we found that the provider had satisfactorily addressed these areas, however we identified other concerns regarding providing safe and effective services. For example:

- Systems for security were not fully assessed.
- There were no emergency medicines in the GP home visit bag, and no risk assessment had been undertaken for not having any.
- Not all emergency medicines were stocked.
- There was no process for reviewing non-collected prescriptions.

We have rated this practice as requires improvement overall and requires improvement for people with long-term conditions; and families, children and young people;. All other population groups were rated good.

We based 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 found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients were not always receiving effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

The areas where the provider **must** make improvements are:

- 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

Overall summary

The areas where the provider **should** make improvements are:

- Review and monitor the system for uncollected prescriptions.
- Review system for undertaking Disclosure and Barring Service (DBS) checks for appropriate staff.
- Continue to review and undertake quality improvement for patients.

- Continue to explore and encourage uptake of cancer screening programmes to improve the uptake of cervical screening and other cancer screenings.

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

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector and included a GP specialist advisor.

Background to Trinity Medical Centre

Trinity Medical Centre is based in the London Borough of Greenwich and is run by one GP (female), who works full time at the practice. The practice is situated in a purpose-built building, and shares its premises with another GP surgery, as well as other health amenities such as a dentist and podiatry. The practice has been operating here since March 2017.

The practice has a list size of 3,700. In addition to the GP who runs the practice, there are two GPs, one salaried, one long term locum (one female and one male). In total 13 GP sessions are offered per week. There is one practice nurse, a practice manager and five other administrative and reception staff.

The practice is open between 8am and 6:30pm Monday to Friday, except Monday when the practice is open until 8pm. The practice is closed at weekends and bank holidays. Appointments with the GPs are available from 8.30am to 12pm and from 3.30pm to 5.30pm Monday to Friday. Appointments with the nurse are available from 9am to 12.30pm and from 2pm-5.30pm Monday to

Thursday. The practice has extended hours on Monday from 6:30pm until 7:30pm. The practice has opted out of providing out-of-hours (OOH) services. Patients needing urgent care out of normal hours are advised to contact the OOH number 111 which directs patients to a local contracted OOH service or Accident and Emergency, depending on patients' medical urgency.

The practice is contracted to provide Personal Medical Services (PMS) and is registered with the CQC for the following regulated activities: diagnostic and screening procedures, maternity and midwifery services, family planning, and treatment of disease, disorder or injury. The practice is in an area with a mixed demographic, including areas of both relatively high and relatively low deprivation. Information published by Public Health England rates the level of deprivation within the practice population group as three on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

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 Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met.</p> <ul style="list-style-type: none">• There were no emergency medicines in the GP home visit bag, and no risk assessment had been undertaken for not having any.• Not all emergency medicines were stocked.• There was no process for non-collected prescriptions.• Door security had not been assessed, doors were left unlocked when GPs went to collect patients. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met.</p> <ul style="list-style-type: none">• Systems or processes were not fully established and operated ineffectively to ensure compliance with the requirements in this Part. Such systems or processes did not enable the registered person to; Assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity. In particular:• NHS England published results showed the uptake rates for the vaccines given were lower than the target percentage of 90% on three out of four indicators and there was no effective strategy to improve the uptake in the patient population.• Diabetic patients were not monitored effectively.• The Average daily quantity of Hypnotics prescribed per Specific Therapeutic group Age-sex Related Prescribing was high.

This section is primarily information for the provider

Requirement notices

- The average antibiotics prescribing was high.
- Systems for security were not fully assessed.

This was in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014