

Stockwell Lodge Medical Centre

Inspection report

Rosedale Way
Cheshunt
Waltham Cross
EN7 6HL
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www.stockwell-lodge.nhs.net

Date of inspection visit: 05 November 2021
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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?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Requires Improvement 

Are services well-led?

Good 

Overall summary

We carried out an announced inspection at Stockwell Lodge Medical Centre on 5 November 2021. Overall, the practice is rated as requires improvement.

Safe - Requires improvement

Effective - Good

Caring - Good

Responsive - Requires improvement

Well-led - Good

Following our previous inspection on 16 October 2019, the practice was rated requires improvement overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Stockwell Lodge Medical Centre on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on:

- The five key questions: are services safe, effective, caring, responsive and well-led?
- Any breaches of regulations or areas we identified at the previous inspection where the provider should make improvements.

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.

Our findings

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

Overall summary

- 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 requires improvement overall

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

- Current guidelines had not been followed when prescribing medicines for uncomplicated urinary tract infections in women.
- Actions from a safety alert had not been followed. We found patients were prescribed a combination of two medicines that was not recommended.
- Improvements had been made to the practice's systems, practices and process to keep people safe and safeguarded from abuse.
- Processes were in place to ensure the appropriate and safe use of emergency medicines.

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

- Improvements had been made to the uptake of childhood immunisations and cervical screening. However, they were still below the World Health Organisation and Public Health England targets in some areas.
- Staff members had completed training relevant to their role and all staff had received an appraisal in the previous 12 months.
- There were some gaps in recording information in the patient computer records specifically related to the annual review of patients with asthma and details on Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) orders.

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

- Improvements had been made to patient satisfaction and feedback from patients at the time of the inspection was positive.
- The practice identified and supported patients with caring responsibilities.

We rated the practice as **requires improvement** for providing responsive services because:

- Actions had been taken to improve patient satisfaction with the way they were able to access care and treatment in a timely way. There had been an improvement to the results of the National GP Patient Survey. However, they remained lower than local and national averages in some areas.

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

- Governance structures had been strengthened and there was oversight of systems and processes.
- The practice maintained a risk log that documented actions taken to mitigate risks. Identified areas from the previous inspection had been addressed.
- Staff were supported and were positive regarding the GP partners and practice management.

We found one breach of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.

(Please see the specific details on action required at the end of this report.)

The provider **should**:

Overall summary

- Continue to take action to increase the uptake of cervical screening and childhood immunisations.
- Continue to take action to increase patient satisfaction.
- Maintain patient records with detailed information that accurately reflects reviews and conversations held.

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 who 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 Stockwell Lodge Medical Centre

Stockwell Lodge Medical Centre is located in Cheshunt at:

Rosedale Way

Cheshunt

Waltham Cross

Hertfordshire

EN7 6HL

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the East and North Hertfordshire Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 10,750. This is part of a contract held with NHS England.

The practice is a member of a primary care network (PCN) that enables them to work with other practices in the area to deliver care.

Information published by Public Health England shows that deprivation within the practice population group is in the seventh decile (seven of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 91% White, 3% Asian, 3% Black, 2% Mixed, and 1% Other.

The age distribution of the practice population closely mirrors the local and national averages.

The practice is led by a partnership of one female and one male GP, a practice manager, an advanced nurse practitioner and a clinical pharmacist. They employ two salaried GPs. The nursing team consists of three advanced nurse practitioners, a practice nurse and two health care assistants. The clinical team is supported by regular locum/session staff including two GPs, a clinical pharmacist, an advanced nurse practitioner and a practice nurse. There is a team of reception and administration staff all led by the practice manager and a reception manager.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered an appointment.

Extended access is provided locally by the primary care network, where late evening and weekend appointments are available. The Out of Hours service is provided by Herts Urgent Care (HUC) and can be accessed via the NHS 111 service.

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 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>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <p>Current guidelines were not followed when prescribing some medicines. For example,</p> <ul style="list-style-type: none">• Antimicrobial guidelines had not been followed when prescribing medicines for uncomplicated urinary tract infections in women. The practice prescribed a seven day course of the medicine instead of the recommended three days.• Actions from a safety alert had not been followed. We found patients were prescribed a combination of two medicines that was not recommended. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>