

Lewisham Medical Centre

Quality Report

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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 service

Good



Are services safe?

Good



Are services responsive to people's needs?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Lewisham Medical Centre on 7 December 2016. The overall rating for the practice was requires improvement. The full comprehensive report from the 7 December 2016 inspection can be found by selecting the 'all reports' link for Lewisham Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 17 October 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 7 December 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

At our previous inspection undertaken on 7 December 2016, we rated the practice as requires improvement for providing safe and responsive services as:

- The systems to manage the security of NHS smart card and printer prescriptions were not effective.
- The practice was not undertaking periodic checks of their defibrillator to confirm that this was working.

- The practice was not dealing with complaints in line with recognised guidance and contractual obligations.

In addition as to the breaches of regulation identified we also recommended that the practice should make the following improvements:

- Ensure effective security and monitoring arrangements for prescription forms.
- Monitor and act on patient feedback on waiting times after appointment time.
- Identify clear actions in all meeting minutes, so that follow-up can be checked.

Overall the practice is now rated as good for providing services that are safe and responsive:

In respect of the breaches of regulation we found that:

- Systems had been put in place to manage the security of NHS smart cards.
- The practice had confirmed with the manufacturer the mechanisms for testing the working status of the practice's defibrillator and had implemented monthly visual checks to confirm the working status.

Summary of findings

- The complaints reviewed indicated that complaints were dealt in line with recognised guidance and contractual obligations.

In addition the practice had:

- Improved the arrangements to monitor and ensure the security of prescriptions.
- Had taken action in an effort to improve patient feedback regarding waiting times which was reflected in improved national GP Patient Survey scores including improving systems to ensure that patients were notified when clinicians were running late.

- Action points from practice meetings were clearly noted on both clinical and practice meeting minutes. Though discussion of follow up action was not documented in subsequent meeting minutes.

We identified too minor areas where the provider should make improvement:

- Document discussion of action points in subsequent clinical and practice meetings
- Include details of organisations that patients can contact if they are unsatisfied with the practice's complaint response.

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 safe?

The practice is rated as good for providing safe services.

- After our last inspection the practice had put in place systems in place to ensure that printer prescriptions were securely stored at the end of each day. Meetings had taken place to stress to staff the importance of smart card security.
- The practice had put systems in place to ensure that monthly visual checks of the defibrillator were undertaken to ensure that this was working.

Good



Are services responsive to people's needs?

The practice is rated as good for providing responsive services.

The practice had updated their complaint policy to reflect current legislative requirements. Responses were comprehensive, timely and provided both an apology and details of action the practice had taken to make changes where applicable.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The provider had resolved the concerns for safety and responsive identified at our inspection on 17 October 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for safety and responsive identified at our inspection on 17 October 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for safety and responsive identified at our inspection on 17 October 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety and responsive identified at our inspection on 17 October 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety and responsive identified at our inspection on 17 October 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety and responsive identified at our inspection on 17 October 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Summary of findings

Lewisham Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was undertaken by a lead inspector.

Background to Lewisham Medical Centre

Lewisham Medical Centre has approximately 9234 patients and is in Lewisham, south east London. The surgery is purpose built premises, on the ground floor. The area is well served by public transport.

Compared to the England average, the practice has more young children as patients (age up to five) and fewer older children (age five – 19). There are more patients aged 20 – 44, and fewer patients aged 45+ than at an average GP practice in England.

The surgery is based in an area with a deprivation score of five out of 10 (1 being the most deprived), and has a higher level of income deprivation affecting older people and children. Life expectancy in line with the national average.

Six doctors work at the practice: one male and five female. One of the doctors is a partner with the practice manager. Some of the GPs work part-time. Full time doctors work 8 sessions per week. The practice provides 32 GP sessions per week.

The (all female) nursing team is made up of two practice nurses and two health care assistants. There is also a pharmacist based in the practice, and a part-time phlebotomist.

The practice is open between 8am to 6.30pm Monday to Friday (until 8.30 pm on Wednesday) and 9am to 4pm on

Saturday. Appointments with GPs are available in the morning from 9am to 12.20 on Monday, 8.30am to 12.20pm Tuesday to Thursday, 8.30am to 12pm on Friday and 9am to 4pm on Saturday. In afternoon, GP appointments are available from 2.50pm to 6pm Monday and Tuesday, 2.30pm to 6pm on Thursday and Friday and 2.50 pm to 8.30 pm on Wednesday.

The practice offers GP services under a Personal Medical Services contract in the Lewisham Clinical Commissioning Group area. The practice is registered with the CQC to provide family planning, surgical procedures, diagnostic and screening procedures, treatment of disease, disorder or injury and maternity and midwifery services.

This is the first time the CQC has inspected the practice.

Why we carried out this inspection

We undertook a comprehensive inspection of Lewisham Medical Centre on 7 December 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Lewisham Medical Centre on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Lewisham Medical Centre on 17 October 2017. 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.

Detailed findings

How we carried out this inspection

During our visit we:

- Spoke with the operations manager and the managing partner.
- Reviewed policies and procedures.
- Reviewed complaints and responses.
- Reviewed minutes of practice and clinical meetings.

Are services safe?

Our findings

At our previous inspection on 7 December 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of the security of printer prescriptions and NHS smart cards. In addition we found that there were no systems in place to ensure periodic checking of the practice defibrillator.

These arrangements had significantly improved when we undertook a follow up inspection on 17 October 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

We saw minutes of a meeting held after our last inspection where the security of NHS Smart cards was discussed. The

practice had discussed their existing policy regarding NHS smart card security which explicitly stated that smart cards should not be left unattended and we did not observe any unattended smart cards on the day of our inspection.

Arrangements to deal with emergencies and major incidents

The practice had contacted the manufacturer of the defibrillator after our inspection who advised them not to regularly turn the defibrillator on and off to check its working status as this would drain the battery. We were provided with documentation from the manufacturer which advised that the practice could rely on the internal automatic checking mechanism and that if there was any issue with the battery life or a fault; an alarm would sound and the LED display would change from a green tick to a red cross.

The practice had instituted a system of documented monthly checks of the defibrillator to confirm that the green tick was displayed and there was no fault.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 7 December 2016, we rated the practice as requires improvement for providing responsive services as the arrangements in respect of recording, investigating and learning from complaints needed to be improved.

These arrangements had improved when we undertook a follow up inspection on 17 October 2017. The practice is now rated as good for providing responsive services.

Listening and learning from concerns and complaints

The practice had updated their complaint policy to reflect current legislative requirements. We reviewed three complaints and responses were comprehensive, timely and provided both an apology and details of action the practice had taken to make changes where applicable. We saw one of the responses did not include details of the Parliamentary Health Services Ombudsman that patient could contact in the event they were dissatisfied with the practice's response to their complaint. However the contact information for this organisation was detailed in the complaint policy and we could see from reviewing the electronic complaint history that this was detailed in the practice's complaint policy which was provided to all patients when they first complained.