

# HMC Health Hounslow

## Inspection report

92 Bath Road  
Hounslow  
Middlesex  
TW3 3LN  
Tel: 020 8104 0810  
Website: -

Date of inspection visit: 5 March 2019  
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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?

Good



Are services well-led?

Requires improvement



# Overall summary

We carried out an announced comprehensive at HMC Health Hounslow on 5 March 2019. We carried out this inspection in response to concerns that one or more of the essential standards of quality and safety were not being met.

## The practice is rated as **requires improvement overall**.

We based our judgement of the quality of care at this service is 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 rated the practice as **requires improvement** for providing safe services because:

- Improvements were needed to mitigate the risks relating to equipment, infection control and health and safety.

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

- The new provider faced unprecedented challenges once they took over the practice in October 2018. As a result, we found gaps in monitoring some administrative activities and maintaining recruitment and training records for some staff employed by the previous provider.

We rated the practice as **good** for providing effective, caring and responsive services because:

- The practice had some systems to manage risk so that safety incidents were less likely to happen. When incidents did happen, the practice learned from them and improved their processes.
- The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines.

- Staff involved and treated patients with compassion, kindness, dignity and respect. Feedback from patients we spoke with and CQC comment cards stated staff involved and treated patients with compassion, kindness, dignity and respect.
- Patients found the appointment system easy to use and reported that they were able to access care when they needed it. The practice had increased staffing levels and opening hours to improve access to the service.
- The practice was under new management since October 2018. Leaders had a realistic strategy to achieve most key priorities.

The areas where the provider **must** make improvements as they are in breach of regulations 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.
- Ensure specified information is available regarding each person employed.

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

- Take action to improve the induction process for locum staff.
- Implement reviews of prescribing practice for non-medical prescribers.
- Improve the process of ongoing monitoring of safety alerts.
- Improve the identification of carers to enable this group of patients to access the care and support they need.

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser, a practice nurse specialist adviser and a practice manager adviser.

## Background to HMC Health Hounslow

HMC Health Hounslow is located within the Heart of Hounslow, 92 Bath Road, Hounslow, Middlesex TW3 3LN. The practice shares the premises with other health care providers.

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.

HMC Health Hounslow is situated in Hounslow Clinical Commissioning Group (CCG) and provides services to approximately 18,000 patients under the terms of an alternative provider medical services (APMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. HMC Health Hounslow were awarded the APMS contract with a start date of 1 October 2018, from which they took over all management of the existing practice from the previous provider.

HMC Health Hounslow is a partnership of two GPs. The GP partners do not provide clinical sessions at this location. Staff at the practice consisted of: a lead GP (male), a salaried GP (female), six regular GP locums (male and female), two clinical pharmacists (male and female), an advanced nurse practitioner (female), two practice nurses (female), two locum practice nurses (female), two health care assistants (female), a phlebotomist (female), a business manager, a practice manager, and a large team of receptionists / administration staff.

The age range of patients is predominantly 15 to 44 years. The practice has a lower percentage of patients over 65 years when compared to the national average.

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<br>Family planning services<br>Maternity and midwifery services<br>Treatment of disease, disorder or injury | <p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The registered person had not assessed and mitigated all risks relating to equipment, infection control procedures and health and safety. In particular: There were no records to confirm calibration of personal equipment used by clinical staff. Two electronic examination couches had not been tested since 2015 to ensure they were safe to use. There were gaps in infection control procedures. For example, disposable aprons were not available, a sharps bin had not been dated, and there was no standardised protocol for the disposal of urine samples. The practice did not have oversight or easy access to health and safety risk assessments carried out by the building's management. This was in breach of regulation 12(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> |
| Regulated activity  | Regulation   |
| Diagnostic and screening procedures<br>Family planning services<br>Maternity and midwifery services<br>Treatment of disease, disorder or injury | <p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had not assessed or monitored the quality and safety of services provided in carrying on of the regulated activity. In particular: There were no policies to govern coding and summarising and no review of this activity. There was no review of the workflow triage system to ensure this was effective. The practice had not mitigated the risks of the inherited backlog of clinical notes. This was in breach of regulation 17(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>  |
| Regulated activity  | Regulation   |

This section is primarily information for the provider

## Requirement notices

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Treatment of disease, disorder or injury

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

The registered person had not maintained records in relation to persons employed in the carrying on of the regulated activity. In particular: The practice could not assure themselves that nursing staff employed by the previous provider had the relevant DBS or occupational health checks, or had undergone mandatory training relevant to their role. The practice could not access the medical indemnity group policy insurance for nursing staff. This was in breach of regulation 19(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.