

Bounds Green Group Practice

Inspection 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 location

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Bounds Green Group practice on 26 September 2019 as part of our inspection programme.

We decided to undertake an inspection of this service following our annual review of the information available to us.

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 have rated this practice as good overall and for all population groups.

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

We found that:

- The practice had not taken sufficient action to ensure concerns identified in the most recent infection prevention and control audit were managed consistently and it did not have an effective process in place to identify other concerns as they emerged.
- The system used to manage clinical specimens did not keep people safe from harm because containers used to collect specimens could be accessed by the public, including children.
- The practice was equipped to deal with medical emergencies but there were gaps in the monitoring of emergency equipment. Specifically, a room used for administering flu vaccines did not have an anaphylactic kit available, a first aid box did not contain all the items listed and a resuscitation kit contained one phial of adrenaline which had exceeded the expiry date by three months.
- The practice had not taken steps to avoid a fridge used to store vaccines being switched off accidentally.

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

We found that:

- The practice reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence based guidelines.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care. Patient feedback was consistently positive. This included the results of the national GP survey, CQC comment cards and patient interviews.
- Overall, patients could access care and treatment in a timely way. Some patients reported that access to appointments was difficult, the practice was taking action to address this
- 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-centred care.

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

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

- Consider introducing a system to record and monitor actions taken as a result of patient safety alerts, including a step to ensure these are read and acknowledged by relevant staff.
- Put steps in place to ensure clinical equipment carried in doctors bags undergoes calibration testing in line with guidance.

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	Good	
Families, children and young people	Good	
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. The team included a GP specialist advisor, a practice nurse specialist advisor, a practice manager specialist advisor and a second CQC inspector.

Background to Bounds Green Group Practice

The Bounds Green Group Practice is a practice located in the London Borough of Haringey. The practice is part of the NHS Haringey Clinical Commissioning Group (CCG). It currently holds a General Medical Service (GMS) contract (a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract) to approximately 18000 patients.

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

The practice serves a diverse population with many patients attending where English is not their first language. The practice has a mixed patient population age demographic with 37.6% under the age of 18, compared to 31.7% when the practice was inspected in January 2016. Average male life expectancy is 81.1 years and female life expectancy is 84.5 years, both of which are above the England averages of 79.2 years and 83.2 years respectively.

The Bounds Green Group Practice is situated within a purpose built two storey building. Consulting rooms are situated on both levels of the building with a lift to ensure patients who were not able to use the stairs could access the upper rooms.

The practice is a teaching practice and a training practice. At the time of this inspection four of the practice GPs were GP trainers and in addition to five GP registrars, the practice was hosting a foundation doctor (FY2) trainee doctor and one final year medical student. The practice was also hosting a Physician Associate trainee who was undertaking clinical practice as part of their university course. A GP Registrar is a qualified doctor who is training to become a GP through a period of working and training in a practice. A foundation doctor (FY1 or FY2) is a grade of medical practitioner in the United Kingdom undertaking compulsory postgraduate medical training.

There are currently five full time GP partners (four female and one male) who undertake a combined total of 28 clinical sessions. There are eight salaried GPs (four female and four male) who carry out thirty-four sessions per week and five GP registrars (three female and two male) who carry out a total of 36 sessions a week. The clinical team is completed by two nurses who provide a total of

70 hours of nursing session and one healthcare assistants who undertakes 36 hours of clinical time each week. There is also a practice manager, an assistant practice manager and 15 administration and reception staff.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8.10am to 11.30am every morning and 2.30pm to 6.30pm daily. Extended hours surgeries are offered at the following times on a Saturday between 8.45am and 12.30pm. In addition to pre-bookable appointments that could be booked up to

seven days in advance, urgent appointments were also available for people that needed them. The practice opted out of providing an out of hours service and refers patients to the local out of hours service or the '111' service.

The practice provides a range of services including child health and immunisation, minor illness clinic, smoking cessation clinics and clinics for patients with long term conditions. The practice also provides health advice and blood pressure monitoring.

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 Surgical procedures 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> <p>The provider did not have suitable arrangements in place for assessing and managing risks in order to protect the welfare and safety of service users and others who may be at risk from the carrying on of the regulated activity.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• The practice had not taken sufficient action to ensure concerns identified in the most recent infection prevention and control audit were managed consistently and it did not have an effective process in place to identify other concerns as they emerged.• The system used to manage clinical specimens did not keep people safe from harm because containers used to collect specimens could be accessed by the public, including children.• A room used for administering flu vaccines did not have an anaphylactic kit available, a first aid box did not contain all the items listed and a resuscitation kit contained one phial of adrenaline which had exceeded the expiry date by three months.• The provider had not taken steps to avoid a fridge used to store vaccines being switched off accidentally. <p>This was in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>