

DMC Chadwick Road

Inspection report

60 Chadwick Road
Peckham
London
SE15 4PU
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www.chadwickroad.nhs.uk

Date of inspection visit: 8 August 2023
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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?

Good



Are services effective?

Requires Improvement



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced comprehensive inspection at DMC Chadwick Road on 8 August 2023. Overall, the practice is rated as requires improvement.

Safe - good

Effective - requires improvement

Caring – not inspected, rating of good carried forward from previous inspection

Responsive - good

Well-led - requires improvement

Our findings

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 Requires Improvement.

We have rated this practice as **Requires Improvement** for providing effective services because:

- Do not attempt cardiopulmonary resuscitation (DNACPR) decisions were not reviewed at appropriately frequent intervals and there were no plans for future reviews.
- Improvements were required in the monitoring of some patients with long-term conditions.

We have rated this practice as **Requires Improvement** for providing well-led services because:

- The provider's processes for managing risks, issues and performance were not always effective.

Following our previous inspection on 22 October 2021 the practice was rated requires improvement overall and for providing safe, effective and well-led services but rated good for providing caring and responsive services. The provider was issued a Warning Notice for breaches of Regulation 17 – Good governance.

We carried out an announced follow up inspection on 5 May 2022, to check progress against the requirements of the Warning Notice and found compliance had been achieved. However, breaches of Regulation 12 – Safe care and treatment and Regulation 17 – Good governance were found. The practice was not rated as a result of this inspection and the rating of Requires Improvement following our comprehensive inspection on 22 October 2021 remained unchanged.

The full reports for previous inspections can be found by selecting the 'all reports' link for DMC Chadwick Road on our website at www.cqc.org.uk

Overall summary

Why we carried out this inspection

We carried out this inspection to follow up breaches of regulation from our previous inspection

This was a comprehensive inspection to review the following domains:

- Safe
- Effective
- Responsive
- Well-led

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

We found that:

- Appropriate standards of cleanliness and hygiene were met.
- Staff worked together and with other organisations to deliver effective care and treatment.
- The practice organised and delivered services to meet patients' needs
- The practice involved the public, staff and external partners to sustain high quality and sustainable care.

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

- 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:

- Take action to improve uptake of cervical cancer screening and childhood immunisations. In particular, the provider should take steps to remove barriers to engagement with the practice population.
- Ensure risk assessments identify all risks; and action is taken to mitigate these.
- Complete an induction for each member of staff

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Overall summary

Chief Inspector of Health 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 DMC Chadwick Road

DMC Chadwick Road is located at 60 Chadwick Road, Peckham, London, SE15 4PU.

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

The practice is situated within the South East London Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 6,910. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices: South Southwark Primary Care Network.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fifth lowest decile (5 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 55.8% White, 28% Black, 6.7% Asian, 6.5% Mixed, and 2.9% Other.

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

There is a team of 8 GPs who work at the practice. The practice has a team of 3 nurses who provide nurse led clinics for long-term conditions. The GPs are supported at the practice by a team of reception and administration staff. The practice manager and operations manager provide managerial oversight.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the PCN, where late evening and weekend appointments are available. Out of hours services are provided via NHS 111.

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 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Systems or processes were not established and operated effectively to ensure compliance with the requirements in this Part. Such systems or processes did not enable the registered person to;</p> <p>Assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk which arise from the carrying on of the regulated activity. In particular:</p> <ul style="list-style-type: none">• Not all patients with long term conditions had received the required monitoring for example, patients with asthma that had been prescribed 2 or more courses of rescue steroids.• Not all patients prescribed medicines requiring monitoring had received reviews in line with best practice guidance for example, patients prescribed gabapentinoids.• Not all patients with diabetic retinopathy had received timely monitoring tests.• The provider was unable to demonstrate recruitment checks for locum staff were carried out in accordance with regulations.• DNACPR decisions had not been reviewed in line with relevant legislation. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>