

# Harlow Road Surgery

## Inspection report

1 Harlow Road  
Rainham  
RM13 7UP  
Tel: 01708552072

Date of inspection visit: 10 March to 10 March 2020  
Date of publication: 17/04/2020

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?

Good 

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 inspection at Harlow Road Surgery on 10 March 2020 as part of our inspection programme.

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.**

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

- We found the provider was in the process of making improvements and developing new processes and systems, however some of these had not been fully embedded or completed.
- The practice was in the process of reviewing all the policies and procedures but had not yet completed them and some did not reflect staff practices.
- The process to seek patient feedback was not effective.

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

- The safeguarding procedures for children at risk were effective.
- The practice had a safe system in place for the management of medicines.

- The practice had made improvements in ensuring the correct coding in patient records.
- Staff were appropriately trained for their roles.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The practice had regular staff and clinical meetings.

We rated all populations groups as **good**, except for 'working aged people' which we rated as **requires improvement** because patients could not access their own GP outside of normal working hours.

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.






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

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

## Our inspection team

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

## Background to Harlow Road Surgery

Harlow Road Surgery is located at: 1 Harlow Road Rainham RM13 7UP

The practice is registered with the CQC to carry out the following regulated activities: diagnostic and screening procedures, maternity and midwifery services, and treatment of disease, disorder or injury.

The practice has a contract with the Havering Clinical Commissioning Group (CCG) and provides general medical services for 2,514 patients.

The practice is a single-handed practice with one female GP and one locum GP, who carry out nine appointment sessions each week. There is one practice nurse working two days per week. The clinical team are supported by a practice manager and five administration staff.

The practice reception is open Monday to Friday from 8am to 6.30pm.

GP appointments are available on Monday, Wednesday and Friday from 9.30am to 11.50am and from 4pm to 5.20pm, on Tuesday from 4pm to 5.20pm and on Thursday from 9.30am to 11.50am.

The practice nurse is available on Tuesday from 9am to 2.40pm and on Friday from 10.30am to 7.15pm.

When the practice is closed, out of hours cover for emergencies is provided by Havering GP Federation and NHS 111 services. The practice part of the wider network of GP practices in Havering.

The practice locality is placed at the fifth decile out of ten on the deprivation scale (ten being least deprived and one being the most). 15.8% of patients were from black minority ethnic background. Male life expectancy was 78 years and female life expectancy was 83 years.

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 Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had systems or processes in place which were operating ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none"><li>• The provider was in the process of making improvements and developing new processes and systems, however some of these had not been fully embedded or completed.</li><li>• Policies and procedures were being reviewed but this had not yet been completed and some did not reflect staff practices.</li><li>• The process to seek patient feedback was not effective.</li></ul> <p><b>These matters are in breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</b></p>