

Figges Marsh Surgery

Inspection report

182 London Road
Mitcham
Surrey
CR4 3LD
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Date of inspection visit: 18 June 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?

Requires improvement



Are services caring?

Requires improvement



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

CQC carried out an announced comprehensive inspection of Figges Marsh Surgery on 18 June 2019 to follow up on breaches of regulation identified in October 2018 and 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 as detailed in the warning notices issued in October 2018

At the last inspection in October 2018 we rated the practice as inadequate for providing safe, responsive and well-led services, and requires improvement for providing effective and caring services because:

- The systems to assess, monitor and manage risks including health and safety, security, medicines management and the home visiting system were not operating effectively.
- Not all of the people providing care and treatment had the qualifications, competence, skills and experience to do so safely. In particular:
- The practice did not seek assurance that appropriate staff checks and mandatory training had been carried out for locum and agency staff.
- There was no formal system to check single-use equipment; out of date equipment was found.
- No action had been taken to address concerns found following two NHS England infection control audits.
- The arrangements for managing risks related to legionella were unclear.
- The practice did not have assurance that infection control training had been completed by all relevant staff.
- Cleaning arrangements were not effective.
- The systems to keep people safeguarded from abuse were not clear.
- Information management systems did not always ensure safe care and treatment was provided, in a timely way.
- Incident reporting systems were not operating effectively.
- The practice did not always identify, report and learn from incidents to improve their processes.
- The system for dealing with safety and medicine alerts was not clear.

As a result of the findings on the day of the inspection the practice was issued with a warning notice for breach of

Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) and a requirement notice for Regulation 16 (Receiving and acting on complaints). The practice was placed in special measures.

You can read our findings from our last inspections by selecting the 'all reports' link for Figges Marsh Surgery on our website at <https://www.cqc.org.uk/location/1-605982467>

At this inspection, we found that the provider had satisfactorily addressed all of these areas of concern with the exceptions of having signed confidentiality agreements and the utilisation of care plans and templates on the electronic record system were still not consistently used.

We have rated this practice as requires improvement overall and requires improvement for all population groups. 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.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensure care and treatment is provided in a safe way to patients.

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

- Continue to review and amend policies.
- Continue to identify patients who are also carers to help ensure they are offered appropriate support.
- Continue to review and act on patients' views in relation to access to appointments and treating patients with care and concern.
- Continue to monitor and review engagement with the Patient Participation Group.
- Continue to review compliance with the complaints process.

Overall summary

I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by the service.

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

Our inspection team

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

Background to Figges Marsh Surgery

The registered provider of the service is Figges Marsh Surgery. The address of the registered provider is 182 London Road, Mitcham, Surrey, CR4 3LD. The practice is registered as a partnership of three partners with the Care Quality Commission to provide the regulated activities of diagnostic and screening services, maternity and midwifery services and treatment of disease, disorder or injury. Regulated activities are provided at one location operated by the provider. The practice website is .

Figges Marsh Surgery provides services to 8400 patients in Mitcham, Surrey and is one of 23-member practices of Merton Clinical Commissioning Group (CCG). The practice has a higher than local and national average population of children and young people and a lower than local and national average number of those over 65. Deprivation scores for both older people and children are higher than local and national averages; deprivation affecting older people is considerably higher. The practice is in the 5th most deprived decile in England. Of patients registered with the practice, approximately 44% are White or White British, 27% are Asian or Asian British, 21% are Black or Black British, and 8% are other or mixed ethnic backgrounds.

Figges Marsh Surgery operates from a purpose-built medical centre, comprising eight consulting rooms, one treatment room, an 'annex' room, one conference room, administrative office space and a patient waiting area with three patient toilets. The surgery is accessible to those with mobility problems. The medical centre also houses a musculoskeletal physiotherapy service.

There are three part-time male GPs who are partners and one part-time female salaried GP. The practice also uses five regular locum GPs. In total the doctors provide approximately 36 sessions per week. The nursing team consists of two part-time practice nurses and one part-time health care assistants. The practice employs two part-time phlebotomists who also carry out administrative duties. One part-time clinical pharmacist works across other practices in the locality and a second pharmacist for the practice has been recently recruited. A social prescriber works at the practice one day per week. The clinical team is supported by a business & operations manager and seven reception and administrative staff. Out of hours, patients are directed to the local out of hours provider for Merton CCG via 111.

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 Diagnostic and screening procedures Maternity and midwifery services 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> <ul style="list-style-type: none">• There were gaps in adults safeguarding training for staff.• There were no risk assessments undertaken for not having all emergency medicine. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
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>How the regulation was not being met.</p> <ul style="list-style-type: none">• Care plans and templates on the electronic record system were not consistently used.• Performance data showed that overall the practice was below local and national averages.• NHS England published results showed the uptake rates for the vaccines given were lower than the target percentage of 90% on all four indicators.• Not all staff members were up to date with training. <p>This was in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>