

Bush Hill Park Trinity Surgery

Inspection report

22-24 Trinity Avenue
Enfield
Middlesex
EN1 1HS
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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?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced comprehensive inspection at Bush Hill Park Trinity Surgery on 8 May 2019.

We previously inspected the practice in February 2016, we rated the practice as Requires Improvement for providing safe, effective and well-led services. Included amongst the issues we identified, the practice could not provide sufficient evidence regular clinical audits were being conducted, a programme of regular in-house infection control audits had not been established and the practice did not have oxygen at its premises.

We carried out a focused inspection on 8 May 2017 to confirm the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations we identified in our previous inspection. At the inspection on 8 May 2017, we rated the practice good for providing safe and well led services and requires improvement for providing an effective service. We rated the practice Good overall. We asked the practice to ensure the correct clinical pathways were being followed.

We carried out a further comprehensive inspection in June 2018, at which time we rated the practice good for providing a safe, caring, responsive and well led service and requires improvement for providing an effective service. The practice was rated as good overall. At the inspection we asked the practice to ensure all medical alerts were followed up, clinical pathways were being followed, to review the cold chain policy in respect of ensuring there was a backup thermometer for the fridge and look at their rate of antibiotic prescribing as it was higher than the local average. At this inspection, we found those areas had been appropriately addressed.

At this inspection 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 overall.

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

- The practice failed to ensure infection control procedures were kept up to date and had failed to ensure all areas of the practice were sufficiently clean.
- Cleaning chemicals were kept in an unsafe location in an unlocked cupboard under the staircase. However, these were moved to another location before the end of the inspection.
- The practice did not hold a register of staff vaccines or carry out a risk assessment if staff members did not want to be immunised.
- The system for checking emergency medicines held on the premises was not monitored appropriately.

We rated the practice as **Requires Improvement** for providing an effective service because:

- Published child immunisation figures were below the minimum World Health Organisation target of 90%.

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

- There was a lack of clinical supervision resulting in some governance responsibilities such as checking of emergency medicines not being completed.
- Infection control processes were inadequate.

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

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

- Ensure care and treatment is provided in a safe way to patients.

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

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

- Consider improving systems to identify and support patients experiencing substance misuse.
- Follow through with plans to improve outcomes for the child immunisation programme.

Overall summary

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	Requires improvement	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Requires improvement	
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 second CQC inspector and a GP specialist advisor.

Background to Bush Hill Park Trinity Surgery

Bush Hill Park Trinity Surgery provides primary medical services from 22-24 Trinity Avenue, Bush Hill Park, Enfield EN1 1HS to 2,630 patients and is one of 54 practices in Enfield Clinical Commissioning Group (CCG). The practice website can be accessed by the following link .

The practice has a General Medical Services (GMS) contract. GMS contracts are nationally agreed between the General Medical Council and NHS England.

The practice is registered as a partnership with the Care Quality Commission to provide the regulated activities of diagnostic and screening procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice had recently applied and been accepted to become a member of the Medicus Super Partnership. This membership agreement starts in July 2019.

Statistics show moderate income deprivation among the registered population. Information published by Public Health England rates the level of deprivation within the practice population group as six on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The registered population is slightly higher than the national average for persons aged between 40 and 59. Patients registered at the practice come from a variety of backgrounds including Asian,

Western European, Eastern European and African Caribbean. Fifty-seven percent of patients have a long-standing health condition compared to the CCG average of 50%.

The clinical team at the surgery is made up of two GPs (both male) who provide nine clinical sessions weekly. There is one practice nurse (female) who provides two sessions weekly.

Five administrative and reception staff work at the practice and are led by a practice manager.

The practice reception opening times are:

- 8am - 7pm (Monday, Tuesday, Wednesday, Friday)
- 8am - noon (Thursday)

Clinical sessions are as follows:

- 8:30am - noon (Monday - Friday)
- 5pm – 6:30pm (Monday, Tuesday, Wednesday, Friday)

The practice offers extended hours surgeries on Monday, Tuesday and Wednesday evenings, between the hours of 6:30pm and 7pm. In addition, the practice holds telephone and Skype consultations between noon and 12:30pm daily. Patients can book appointments in person, by telephone and online via the practice website.

Patients requiring a GP outside of practice opening hours, including Thursday afternoon are advised to contact the NHS GP out of hours service on telephone number 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 Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>There was a lack of systems to ensure patients were kept safe.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• Infection control policies were had not been reviewed.• Areas of the practice were dirty and omitted from cleaning schedules.• There was no record of the cleaning of hand-held medical equipment.• Actions from the recent infection control audit had not been followed up.• There was no register of staff vaccines or risk assessment of any that had been refused.• Emergency medicines were monitored inconsistently. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>