

# The Forest Surgery

## **Inspection report**

2 Macdonald Road Walthamstow London E17 4BA Tel: 02084984988

Date of inspection visit: 28 September 2023 Date of publication: 22/11/2023

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?	<b>Requires Improvement</b>	
Are services caring?	<b>Requires Improvement</b>	
Are services responsive to people's needs?	<b>Requires Improvement</b>	
Are services well-led?	<b>Requires Improvement</b>	

# **Overall summary**

We carried out an announced comprehensive inspection at The Forest Surgery on 28 September 2023. Overall, the practice is rated as requires improvement.

Ratings for each key question:

Safe - Good

Effective - Requires Improvement

Caring - Requires Improvement

Responsive - Requires Improvement

Well-led - Requires Improvement

The Forest Surgery was previously inspected in 2019 and 2021 under a different provider registration. In 2019, the practice was rated requires improvement overall, and in the key questions safe, effective, well led and responsive and good in the key question caring. In 2021, the practice was rated inadequate overall and in the key questions for safe, effective and well-led, they were rated requires improvement for responsive and good for caring. Following this inspection, the practice was placed into special measures and the previous provider cancelled their CQC registration in October 2021.

The new provider registered with CQC in November 2021. This is the 1st inspection of this service under the new provider.

#### Why we carried out this inspection

We carried out this inspection in line with our inspection priorities.

#### 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.

#### **Our findings**

We based our judgement of the quality of care at this service on a combination of:

# **Overall summary**

- 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 found that:

- Staff dealt with patients with kindness and respect.
- The practice was equipped to respond to medical emergencies and staff were suitably trained in emergency procedures.
- Patients received care and treatment that met their needs, however gaps were identified in patient monitoring regarding patients with long term conditions.
- Patients could not always access care and treatment in a timely way.
- The way the practice was led and managed did not always promote the delivery of high-quality, person-centre 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 provider **should**:

- Implement regular, documented staff 1 to 1 meetings and clinical supervision.
- Implement systems to review risk assessments regularly to ensure risks are mitigated.

#### 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

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 member of the CQC national clinical advisor team who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

### Background to The Forest Surgery

The Forest Surgery is located in East London at:

2 Macdonald Road

Walthamstow

London

E17 4BA

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

The practice is situated within the Waltham Forest Integrated Care System (ICS) and delivers General Medical Services (GMS) and Alternative Provider Medical Services (APMS to a patient population of about 7000. This is part of a contract held with NHS England. The practice is part of a wider network of GP practices and is one of eight practices in their Waltham Forest Primary Care Network (PCN).

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fifth highest 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 53.4% White, 18.4% Asian, 18.1% Black, 6.4% Mixed, and 3.7% Other.

There is a team of 1 GP who works as a salaried GP for 4 days a week and a locum GP for 1 day a week, and one newly recruited part time salaried GP. There are 4 part time GP locums (one of which works remotely) which is equivalent to 2.2 full time GPs. The practice has 1 part time nurse and 3 part time healthcare assistants who work the equivalent of 1.1 full time staff. The GPs are supported at the practice by a team of 4 reception/administration staff. The practice manager and deputy practice manager both provide part time 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.

Out of hours services are provided by 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 Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Surgical procedures Maternity and midwifery services	The registered person had systems or processes in place that operated 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:
	<ul> <li>The provider had not ensured that there were enough clinical staff employed to meet patient demand and reduce pressures on existing staff, both clinical and non-clinical.</li> <li>The provider had not implemented any measurable actions to address below average patient feedback, childhood immunisation and cervical screening data and had not carried out any audit activity to measure improvement in systems implemented to improve services.</li> <li>This was in breach of Regulation 17(1) and (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</li> </ul>