

Keats Surgery

Inspection report


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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

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Inadequate 

Are services caring?

Requires improvement 

Are services responsive?

Requires improvement 

Are services well-led?

Inadequate 

Overall summary

We previously carried out an announced comprehensive inspection at Keats Surgery on 4 February 2019, and rated the practice as requires improvement for safe, effective and well-led care and good for caring and responsive care. This gave the practice an overall rating of requires improvement. As a result of the concerns identified, we served requirement notices, as the provider was failing to comply with the relevant requirements of Regulation 12, Safe care and treatment and Regulation 17, Good governance, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This inspection was an announced follow-up comprehensive inspection, which took place on 12 February 2020. We found all the issues identified at the February 2019 inspection, with the exception clinical outcomes for patients with asthma, had been addressed to an appropriate standard.

However, during this inspection we found additional concerns .

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 inadequate improvement overall.

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

- The practice did not always safely monitor and manage patients prescribed with high risk medicines.
- There were ineffective systems in place to ensure staff had the appropriate authorisations to administer medicines (including Patient Group Directions).
- There were ineffective systems for ensuring safety alerts were actioned.
- The practice did not have systems in place to keep prescription stationary secure at all times.

We rated the practice as **inadequate** for providing effective services because:

- The practice's QOF performance was significantly lower than local and national averages for the long-term conditions' indicators relating to diabetes, hypertension and asthma.
- There was some improvement in the uptake of childhood immunisations since the previous year, but it was still significantly below the World Health Organisation target of 95%.
- We found the practice did not have an effective system for sharing and cascading clinical learning amongst relevant staff.

We rated the practice as **requires improvement** for providing caring services because:

- The practice's results in the GP patient survey for questions relating to health care professionals listening to patients and involving them in their care and treatment were below the local and national averages.

We rated the practice as **requires improvement** for providing responsive services because:

- The practice continued to provide limited nursing services, the majority of which was outside of working and school hours.

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

- Leaders could not fully demonstrate that they had the capacity and skills to deliver high quality sustainable care.
- The overall governance arrangements were inadequate.
- The practice did not have clear and effective processes for managing all risks, issues and performance.
- The practice did not always act on appropriate and accurate information.

For the effective domain, we rated older people; people whose circumstances may make them vulnerable and people experiencing poor mental health as **good**. We rated people with long-term conditions as **inadequate** because performance indicators for Diabetes, Hypertension and Asthma were significantly below national and local averages. We rated families, children and young people as **inadequate** because performance in the uptake of childhood immunisations were significantly below the World Health Organisation targets. We rated working age people as **requires improvement** because the cervical screening uptake rate was below the national target.

Overall summary

For the responsive domain, we rated older people; people with long term conditions; people whose circumstances may make them vulnerable; and people experiencing poor mental health as **good**. We rated families, children and young people and working age people as **requires improvement** because there was limited nursing services, the majority of which was within of school and working hours.

The above ratings of the population groups across the effective and responsive domains resulted in:

- People with long term conditions and families, children and young people being rated as **inadequate** overall.
- Working age people being rated as requires improvement.
- Older people; people whose circumstances may make them vulnerable; and people experiencing poor mental health as **good**.

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

- Ensure that care and treatment is provided in a safe way (Please see the specific details on action required at the end of this report).
- 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).

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

- Ensure the nurse has up to date training on managing patients with suspected or confirmed female genital mutilation.

- Review process for carrying out multi-disciplinary meetings for complex patients, including those on the palliative care register.
- Review the process of diagnosing hypertension.
- Continue with plans to improve GP patient survey results.
- Continue with efforts to improve anti-bacterial and NSAID prescribing
- Continue to take steps to improve the up-take of cervical screening.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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	Inadequate	
Families, children and young people	Inadequate	
Working age people (including those recently retired and students)	Requires improvement	
People whose circumstances may make them vulnerable	Good	
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 an additional CQC inspector, GP specialist advisor and a practice nurse specialist advisor.

Background to Keats Surgery

Keats Surgery is a GP practice located in the London Borough of Enfield and is part of the NHS Enfield Clinical Commissioning Group (CCG).

The practice is provided by two GP partners and is located on the main road which is accessible by local bus and train services. The practice is located on the ground floor with step free access.

The practice provides care to approximately 5200 patients. The practice area population has a deprivation score of 3 out of 10 (1 being the most deprived). The practice serves a higher than average number of elderly patients. The practice cares for a diverse population with approximately 49% of its patients from black and ethnic minority backgrounds.

The practice holds a GMS (General Medical Services) contract with NHS England. This is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract.

The practice is registered with the Care Quality Commission to provide the regulated activities: Diagnostic and screening procedures; Family planning; Maternity and midwifery services; Surgical procedures; Treatment of disease, disorder or injury; and Surgical procedures.

The practice team consists of one male and one female GP partner, a part time female practice nurse, a practice manager and an administrative and reception team.

The practice's opening hours are 8am to 6:30pm on weekdays, with extended hours appointments operating between 6.30pm-9.30pm Tuesdays.

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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider had failed to ensure the proper and safe management of medicines</p> <ul style="list-style-type: none">• The provider did not have an effective system in place to ensure that blood test results were being reviewed prior to safely prescribing high-risk medicines to patients.• The provider did not have effective arrangements in place for the monitoring and security of prescriptions pads and computer prescription paper, both on delivery and when they were distributed through the practice. <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 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>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• The system for ensuring patient group directives (PGD's) were in date was ineffective.• The system for actioning safety alerts was ineffective.• There were concerns regarding the monitoring of the outcomes of care and treatment and the follow up system to improve quality outcomes for patients, in particular for patients with diabetes, hypertension and asthma.

This section is primarily information for the provider

Requirement notices

- The system for improving the uptake of childhood immunisations was ineffective.
- There was no system for disseminating minutes for meetings and learning from significant events and complaints.
- There was no process to ensure formal three monthly multi-disciplinary case reviews for complex patients took place.
- Clinical meetings did not always include the practice nurse and the minutes of these meetings were not disseminated.

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014