

# Great Chapel Street Medical Centre

## Inspection report

13 Great Chapel Street  
London  
W1F 8FL  
Tel: 02074379360  
www.greatchapelst.org.uk

Date of inspection visit: 8/12/13 October  
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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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Outstanding 

Are services well-led?

Good 

# Overall summary

We carried out an announced inspection at Great Chapel Street Medical Centre on the 8th, 12th and 13th of October 2021. Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe - Good

Effective - Good

Caring - Good

Responsive - Outstanding

Well-led – Good

Following our previous inspection on 11 January 2018, the practice was rated good overall and for all key questions and outstanding for responsive:

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Great Chapel Street Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on a change in ownership of the practice, looking at whether they were:

- Safe
- Effective
- Caring
- Responsive
- Well-led

## How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice’s patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider

# Overall summary

- 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:

- 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 and Outstanding for providing responsive services.**

We found that:

- The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines.
- All staff received up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns.
- Staff who acted as chaperones were trained for the role and had received a DBS check, and posters advertising this were in the waiting room and consulting rooms.
- The practice conducted safety risk assessments. It had a suite of safety policies which were regularly reviewed and communicated to staff. Staff received training in basic life support, sepsis and fire safety.
- Staff involved and treated patients with compassion, kindness, dignity and respect.
- Patients found the appointment system easy to use and reported they were able to access care when they needed it.
- There was a strong focus on continuous learning and improvement at all levels of the organisation.
- The waiting room was in need of decorating and the flooring needed replacing; however, the service would be moving to a new location in 2022 which would be fully compliant.

We saw several areas of outstanding practice:

- The practice provided an outreach service out of hours in which the practice nurse would access homeless shelters and search for homeless people on the street to reach people with complex needs who may find it difficult to engage with health and social care providers. As a result of the pandemic the services patient group had been moved in to hostels and hotels the practice responded to this by expanding their outreach programme to seeing their patients in these locations to help reduce the health inequalities that this patient group would have suffered at this time.
- The practice supplied the hostels and hotels with tablets so that patients could have remote consultations and also mobile phones to remind patients of appointments, medication reviews and telephone consultations.
- The practice worked with third sector organisations to ensure that their patients had assistance with job applications, represented patients at court hearings in relation to benefits sanctions and liaised with re-housing services to access temporary or permanent accommodation for patients.
- Practice staff provided training for staff working in other organisations for the homeless such as hostels in relation to monitoring of medicines and management of aggression. They also provided support and training for the 8 other borough's in North West London.

# 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

## 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 GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Great Chapel Street Medical Centre

Great Chapel Street Medical Centre is a specialist practice for homeless people living in Westminster. As a result, their patient population is very different from the average general practice. This includes those who are rough sleeping; are at risk of or have significant history of rough sleeping; or are resident in a hostel in Westminster or an adjacent area. The practice provides GP primary medical services, psychiatry, dentistry and podiatry services and social advocacy /housing and counselling to homeless people in the NHS Central London (Westminster) CCG area.

Their address is: 13 Great Chapel Street, London, W1F 8FL,

Website; [www.greatchapelst.org.uk](http://www.greatchapelst.org.uk)

The practice team is made up of four GPs (three female, one male) providing 14 sessions per week, two nurses providing 18 sessions, a practice manager, a reception manager and a receptionist/ administrator.

The practice opening hours are between 9am to 5pm, Monday to Friday. Telephone access is available during core hours. The practice has an Alternative Providers of Medical Services (APMS) contract (APMS is one of the three contracting routes that have been available to enable the Commissioning of primary medical services). The practice refers patients to the NHS '111'

for healthcare advice during out of hours.

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

Additional services provided by the practice are;

- Consultant psychiatrist – Tuesdays – two sessions. By appointment.
- Counselling – three day a week; Tuesday and Fridays by telephone, Wednesdays face to face.
- Podiatry - Friday mornings from 9-12.30;
- Dentist – Tuesday, through to Friday's by appointment only. Now run from the Soho Centre for Health site due to infection control mitigations as a result of aerosol generating procedures.
- Sexual health – priority walk-in access for their patients to 56 Dean St clinic Monday to Friday 9am to 5pm.
- Hepatitis – priority access to UCL Hepatology and peer support for testing.
- Drug and alcohol treatment – Turning Point (local commissioned service) provide MDT support each week and complex case management of individual patients.

The practice population is transient and relatively small in number currently the patient list size is approximately 280, the male to female ratio is 3:1 and the median age is around 40. The practice does not register children.

The population is ethnically very diverse and includes a large proportion of EU migrants and refugees. The vast majority of their patients are unemployed and on benefits. Many have no recourse to public funds and are destitute.