The Forest Surgery

Inspection report

2 Macdonald Road
Walthamstow
London
E17 4BA
Tel: 02084984988
www.theforestsurgery.co.uk

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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?	**Requires improvement**
Are services well-led?	**Requires improvement**

Overall summary

We carried out an announced comprehensive inspection at The Forest Surgery on 20 November 2019 as part of our inspection programme.

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 and requires improvement for all population groups.

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

- Learning from significant events were not adequately shared with relevant staff members.
- Learning from patient safety alerts were not adequately shared.
- Insufficient attention was paid to mitigating risks, including completing action plans for risk assessments and training lead members of staff for safety roles such as fire and infection control.

We rated the practice as **requires improvement** overall for providing effective services and **requires improvement** for all population groups because:

- There was limited understanding of the practice's high exception reporting rates and no action to improve this.
- The practices uptake of childhood immunisations was below the national target.
- Uptake for cervical cytology was below the national target.

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

- Completed CQC patient comment cards and patients we spoke with all indicated the practice had a caring nature and were attentive to the needs of patients.

We rated the practice as **requires improvement** overall for providing responsive services and **requires improvement** for all population groups because:

- There was insufficient action made as a result of low patient satisfaction with access to services.

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

- There were insufficient processes to monitor and manage risks.
- Systems and processes did not promote consistent sharing of learning.
- Insufficient attention was paid to low patient satisfaction with services.
- There was a lack of oversight of training for lead safety roles.

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

- 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:

- Continue to work to improve childhood immunisation and cervical cytology uptake.
- Review the system for monitoring patient satisfaction and take action.

Details of our findings and the evidence supporting our ratings are set out in the evidence table.

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 included a lead CQC inspector, who was supported by a GP specialist advisor and a practice nurse specialist advisor.

Background to The Forest Surgery

The Forest Surgery is situated within Waltham Forest Clinical Commissioning Group (CCG) in East London and is located in a purpose-built building over two floors, with good transport links.

The practice provides services to approximately 7,500 patients under a General Medical Services (GMS) contract.

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

The practice is rated four out of 10 on the deprivation scale, where one is the most deprived and 10 is the least deprived. The practice population consists of 46% of patients from a black or ethnic minority group and 13% of the patients are unemployed, which is higher than the local average of 6%.

The practice has one male GP principal who was supported by three female regular locums who complete a combined total of 21 sessions per week and a practice nurse who carries out four and a half sessions per week. There is also a prescribing pharmacist, a health care assistant, a practice manager and deputy manager who are supported by a team of reception and administration staff members.

The practice is open Monday to Friday from 8am to 6:30pm. Phone lines are answered from 8am and appointment times are as follows:

- Monday from 8am to 12:40pm and from 2pm to 6:15pm;
- Tuesday from 9am to 6pm;
- Wednesday from 8am to 12:50pm and from 2pm to 6:10pm;
- Thursday from 8am to 5:40pm;
- Friday from 8am to 6:30pm.

The locally agreed out of hours provider covers calls made to the practice when it is closed, and it is part of the local HUB which provides GP and nurse appointments on weekday evenings and weekends when the practice is closed.

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	Regulation 17 HSCA (RA) Regulations 2014 Good governance **There were no systems, or ineffective systems, in place to assess, monitor and mitigate the risks to patients and staff and improve the quality and safety of the services being provided. In particular:** • Insufficient attention was paid to mitigating risks in the practice. • There was a lack of oversight with exception reporting. • The provider did not have systems to ensure adequate training for staff with lead roles in fire safety and infection control. • Learning from significant events and safety alerts was not adequately shared with staff. **These matters are in breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014**