

Stamford Hill Group Practice

Inspection report

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Stamford Hill
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Date of inspection visit: 20 May 2021
Date of publication: 02/07/2021

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 responsive to people's needs?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced inspection at Stamford Hill Group Practice on 20 May 2021. Overall, the practice is rated as Good.

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

The 'Good' rating for the 'Caring' question is in respect of our previous inspection which took place on 4 July 2019.

The full reports for previous inspections can be found by selecting the 'all reports' link for Stamford Hill Group Practice on our website at www.cqc.org.uk

Why we carried out this inspection

We had previously inspected the practice on 4 July 2019, when we rated it good in respect of the safe, caring and well led questions but rated it as requires improvement in respect of the effective and responsive questions. We served a Requirement Notice for breach of Regulations 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This inspection took place to confirm that the necessary actions had been taken to address the breach of regulation.

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
- Requesting evidence from the provider
- A short site visit

Our findings

Overall summary

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 for all population groups.

We found that:

- When something went wrong, there was an appropriate, thorough review that involved all relevant staff. Lessons were learned and communicated to support improvement.
- Action had been taken since our July 2019 inspection such that a cytology failsafe procedure was now in place. Performance for cancer screening and reviews were also now comparable to local and national averages.
- Although the practice's performance for childhood immunisations continued to be significantly below the national target of 95% uptake, a range of improvement activity had taken place between our July 2019 inspection and the March 2020 emergence of the Covid 19 pandemic, such that the variance for two indicators had narrowed. We saw evidence of how the involvement of other organisations and the local community was integral to how services were planned and to ensuring that services met people's needs.
- Services were planned and delivered in a way that met the needs of the local population. For example, additional clinical staff had been appointed since our July 2019 inspection such that patient satisfaction regarding appointment time, type of offered appointment and the overall appointment making experience were now all comparable to local and national averages.
- Although patient satisfaction regarding phone access remained below local and national averages, we saw evidence of actions taken to improve performance. This included recruiting additional call handling staff and commissioning a new phone system with increased phone capacity. Patient satisfaction was also being routinely monitored, to ensure that the service reflected people's needs.
- The practice had adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- Leadership, governance and practice management arrangements promoted the delivery of high-quality, person-centred care.

Whilst we found no breaches of regulations, the provider **should**:

- Take action to implement a protocol to ensure that appropriate authorisations are in place prior to administering vaccines.
- Continue to take action to improve childhood immunisations and cervical screening uptake rates.
- Continue to monitor patient satisfaction on phone access and undertake improvement activity as necessary.

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

Overall summary

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 | Good |  |
| Working age people (including those recently retired and students) | Good |  |
| 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 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 Stamford Hill Group Practice

Stamford Hill Group Practice is located at 2 Egerton Road, London, N16 6UA. The surgery has good transport links and there is a pharmacy located nearby. The provider is registered with CQC to deliver the Regulated Activities: Maternity and midwifery services, Treatment of disease, disorder or injury, Diagnostic and screening procedures and Family planning.

Stamford Hill Group Practice is situated within the NHS City and Hackney Clinical Commissioning Group (CCG) and provides services to approximately 16,000 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a partnership registered with the CQC in April 2013. The clinical team at the practice includes six partners (two female and four male), six salaried GPs (four female and two male) and one regular female locum GP. Between them (excluding the locum) the GPs work the equivalent of 7 whole time GPs. In addition, there are three part-time nurses (whole time equivalent of 1.8 nurses), a full-time advanced healthcare assistant and a full-time healthcare assistant. The non-clinical team consists of a practice manager, with a deputy practice manager and an assistant practice manager, supported by team of reception and administrative staff. The practice is part of a primary care network (PCN) of three local GP practices.

The practice area population has a deprivation score of 3 out of 10 (1 being the most deprived). There are higher than average numbers of patients under the age of 18 (43%) compared to the local (21%) and national (20%) averages. Thirteen percent of patients are aged under four years of age compared with the respective 6% and 5% local and national averages.

Extended access is provided locally by the local GP Federation, where late evening and weekend appointments are available.