

Welling Medical Practice

Inspection report

2 Danson Crescent
Welling
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www.wellingmedicalpractice.co.uk

Date of inspection visit: 7, 8 and 10 September 2021
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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?	Good	
Are services caring?	Requires Improvement	
Are services responsive to people's needs?	Requires Improvement	
Are services well-led?	Good	

Overall summary

We carried out an announced inspection at Welling Medical Practice on 7 September 2021. Overall, the practice is rated as Requires improvement.

Set out the ratings for each key question

Safe - Requires improvement

Effective – Good

Caring - Requires improvement

Responsive - Requires improvement

Well-led - Good

Following our previous inspection on 28 July 2015, the practice was rated as Good overall and for four of the five key questions. We rated the practice as requires improvement for providing safe services. After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements in relation to the breach of regulation 12(1)(2)(b)(d)(g)(h) Safe care and treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We undertook a desk-based focussed inspection on 1 April 2016 to check that they had followed their plan and confirmed that they now met the legal requirements.

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

Why we carried out this inspection

This inspection was a comprehensive inspection, as there had been organisational changes at the practice since our last inspection.

How we carried out the inspection/review

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
- Obtaining staff feedback via completed questionnaires

Overall summary

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 Requires Improvement overall and for all population groups. The practice is rated Good for providing Effective and Well led services.

We found that:

- Patient feedback via the national GP patient survey showed the practice was scored poorly in several areas including experiences of making an appointment, interactions with staff, and overall experience of the GP practice.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. They had moved to a digital first approach to accessing services, with patients being encouraged to complete an online consultation in the first instance. Other forms of access was available to patients who could not use the online consultation system.
- The practice was a training practice, and was led by a stable and established leadership team.

We found breaches of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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	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 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 remote clinical searches and records reviews without visiting the location. A second CQC inspector was part of the inspection team and supported the lead inspector during interviews and reviewing information submitted by the provider.

Background to Welling Medical Practice

Welling Medical Practice is located in Welling, Kent at:

2 Danson Crescent

Welling

DA16 2AT

The location premises have an annex on the same grounds, but at adjoining Hook lane.

The practice has a branch site at:

12 Avery Hill Road

New Eltham

London

SE9 2BD

We visited the main and branch sites as part of this inspection.

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. These are delivered from both sites.

The practice is situated within the South East London Clinical Commissioning Group (CCG) and delivers (Personal Medical Services (PMS) to a patient population of about 11,376 patients. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices, Clocktower Primary Care Network (PCN). The lead GP at Welling Medical Practice is the clinical director of Clocktower PCN.

Information published by Public Health England shows that deprivation within the practice population group is in the third least deprived decile (8 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 7.7% Asian, 4.7% Black, 2.3% Mixed, and 1.1% Other non white ethnic group.

The age distribution of the practice population is fairly similar to the England averages, but has a slightly higher level of older age groups and slightly lower levels of younger age groups.

There are four GP partners – two were male and two were female - in the practice. The practice had in recent months appointed a salaried GP at the time of our inspection. The practice is a teaching practice and had 3 GP trainees in placements with them at the time our inspection. The practice also had a nurse practitioner and two practice nurses appointed. Through their local primary care network, the practice also had two pharmacists and a care coordinator assigned to them.

The practice management team is led by the practice manager, and two admin line managers. There is a reception and administrative team which includes 25 staff members.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were carried out remotely and included a mix of telephone, video and online consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

The practice opening times and appointment times are 8am to 6.30pm, Monday to Friday. They offered extended hours appointments 7.20am to 8am, Monday to Friday. Out of hours services are provided by the local GP Federation to all GP practices in Bexley.

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 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
Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <ul style="list-style-type: none">• There were gaps in the proper and safe management of medicines:• Staff did not always have the appropriate authorisations to administer medicines through Patient Group Directions.• There was not always evidence of structured medicines reviews for patients on repeat medicines or process for monitoring patients' health in relation to the use of medicines that needed additional monitoring. <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
Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Risks to the health, safety and welfare of patients were not properly assessed, monitored and mitigated against.</p> <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>