

The Belgravia Surgery

Inspection report

24-26 Eccleston Street
Belgravia
London
SW1W 9PY
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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?

Requires improvement 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced full comprehensive inspection at The Belgravia Surgery on 21 November 2019 as part of our inspection programme.

We carried out an inspection of this service following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a significant change (either deterioration or improvement) to the quality of care provided since the last inspection.

This inspection focused on the following key questions:

- Are services safe?
- Are services effective?
- Are services caring?
- Are services responsive?
- Are services well led?

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 good for providing safe, caring, responsive and well led services because:

- People had good outcomes because they received effective care and treatment that met their needs.
- Information about people's care and treatment was routinely collected, monitored and acted upon.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- Clinical and internal audit processes functioned well and had a positive impact in relation to quality governance.

We have rated this practice as requires improvement for providing effective services because:

- Childhood immunisation rates were below the target figure set by the World Health Organisation

- Cervical cancer screening rates were below the target figure set by Public Health England
- We found instances of low achievement and/or high exception reporting rates in the management of long-term conditions (Exception reporting is the removal of patients from QOF calculations where, for example, the patients decline or do not respond to invitations to attend a review of their condition or when a medicine is not appropriate.)

We rated the population groups for older people, people with long-term conditions, people whose circumstances may make them vulnerable and people experiencing poor mental health (including people with dementia) as **good** and the population groups for families, children and young people and working age people (including those recently retired and students) as **requiring improvement**.

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

- Ensure that a DBS policy is in place and risk assessments where the practice decides not to carry out a check on a staff member. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).
- Ensure that a process is in place to correctly sign Patient Group Directives. (PGDs are written instructions for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for treatment).
- Review arrangements in respect of systems to ensure that safety alerts are acted upon and deliver improved outcomes for patient health.
- Consider ways to ensure that child immunisation rates meet World Health Organisation targets
- Consider ways to ensure that cervical screening rates meet Public Health England targets.
- Ensure that all staff receive regular appraisals.

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	Good 
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	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector and included a GP specialist advisor.

Background to The Belgravia Surgery

The Belgravia Surgery, 24-26 Eccleston Street, Belgravia, London, SW1W 9PY is located within the Westminster local authority. It is one of 28 practices serving the NHS Central London (Westminster) Clinical Commissioning Group (CCG) area and it provides general medical services to approximately 7,500 patients.

The practice was previously inspected in May 2015 and in the report published in October 2015 we reported the practice to be good overall and good in providing safe, effective, caring, responsive and well-led services. Although we found no breaches of regulation we did note that the practice should ensure that an automated external defibrillator (used to attempt to restart a person's heart in an emergency) was available or should carry out a risk assessment to identify what action would be taken in an emergency. At this inspection we saw that a defibrillator was in place and available.

The practice has a higher proportion of registered patients (70%) who are of working age when compared to the national average of 62%. It has a comparable

percentage (17.2%) of elderly patients over 65 years of age when compared to the national average of 17.3%. It also has a much lower percentage of patients under 18 (12.8%) compared to the national average of 20.7%.

Information published by Public Health England rates the level of deprivation within the practice population group as sixth on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is led by a male GP Partner who is contracted to provide General Medical Services (GMS) and who is registered with the CQC for the following regulated activities: diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury.

The Partner is supported clinically by two salaried GPs, a practice nurse and a healthcare assistant. There is also a Practice Manager and seven additional admin and reception staff.

Out of hour's services are not provided as these are provided by an out of hours provider whose contact details are available in the practice and on the website.