

# The Everglade Medical Practice

## Inspection report

Grahame Park Health Centre  
The Concourse  
London  
NW9 5XT  
Tel: 02084328641

Date of inspection visit: 01 November 2022 and 24 November 2022  
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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 to people's needs?

Requires Improvement



Are services well-led?

Requires Improvement



# Overall summary

We carried out an unannounced comprehensive inspection at The Everglade Medical Practice on 1 November 2022. We continued the inspection with a revisit of the practice on 24 November 2022. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - requires improvement

Caring - good

Responsive - requires improvement

Well-led - requires improvement

At our previous inspection on 17 May 2017 the practice was rated good overall and for all key questions. The full reports for previous inspections can be found by selecting the 'all reports' link for The Everglade Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We carried out this inspection to follow up concerns reported to us.

## How we carried out the inspection

This inspection was carried out by:

- Conducting staff interviews
- Completing clinical searches on the practice's patient records system
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A site visit over two days.

## 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 rated the practice as **requires improvement** for providing **safe** services because we had concerns relating to: infection prevention control; administration of Rotavirus vaccine; out of date and/or missing emergency medicines and equipment.

# Overall summary

We rated the practice as **requires improvement** for providing **effective** services because the uptake for cervical screening was well below the national target of 80%, and the uptake of childhood immunisations were also well below the world health organisation target of 95%. We also found there was no documented evidence confirming nurse prescribing was being regularly monitored.

We rated the practice as **good** for providing **caring** services because staff dealt with patients with kindness and respect and involved them in decisions about their care.

We rated the practice as **requires improvement** for providing **responsive** services because the GP patient survey data and patients we interviewed showed dissatisfaction with telephone access and the types of appointments offered.

We rated the practice **requires improvement** for **well-led** because we were not assured there was appropriate governance, systems and processes in place to ensure appropriate infection prevention control measures were in place; systems were in place to ensure medicines and equipment remained in-date; there were up-to-date policies; documented supervision of the nurse prescriber; and the safe administration of the rotavirus vaccine.

The provider took immediate action to address the concerns identified above and introduced systems and processes to prevent recurrence. However, as these changes are new, they need to be monitored and become embedded in practice before we can be satisfied the concerns have been fully mitigated. Please see the evidence tables for more details.

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

- Ensure that care and treatment is provided in a safe way (Please see the specific details on action required at the end of this report).
- 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).

In addition, the provider **should**:

- Take action to improve the uptake of cervical screening and childhood immunisations.
- Take action to improve patient experience evidenced by GP patient survey results data, particularly in regard to access.

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

**Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA**

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, nurse specialist advisor, practice manager specialist advisor; and a second CQC inspector.

## Background to The Everglade Medical Practice

The Everglade Medical practice is located within the Grahame Park Health Centre, situated in Barnet, North London. It is part of North Central London Integrated Care System in the Barnet local area. The practice holds a General Medical Services contract (an agreement between NHS England and general practices for delivering primary medical services).

The practice is registered with the Care Quality Commission to carry on the regulated activities of Maternity and midwifery services, Treatment of disease, disorder or injury, Family planning, Surgical procedures and Diagnostic and screening procedures.

The practice had a patient list of approximately 11,000.

The clinical team is comprised of four GP partners (one male and three females) and three salaried GPs (two female and one male).

The clinical team also includes two female nurses and a female health care assistant. The also has staff shared by their local primary care network, this includes clinical pharmacists, social prescribers, physiotherapists and a phlebotomist.

The practice is open from 8am to 6:30pm on Monday to Friday. Routine appointments with GPs and nurses are 10-15 minutes long. Patients may book appointments with the extended hours service, provided at Hub locations across four local practices. Additional extended hours service appointments could be booked weekdays between 6.30pm – 8pm and Saturdays 9am to 5pm.

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
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <ul style="list-style-type: none"><li>• There was no system for reviewing and updating policies relating to safeguarding, waste management and infection prevention control which had not been updated for over three years which meant they did not reflect up to date guidance and legislation.</li><li>• There was no documented cleaning schedules and logs.</li><li>• There was no documented risk assessment for not stocking emergency medicine to treat nausea/vomiting, analgesia and opiate overdose.</li><li>• There was no documented supervision of the nurse's prescribing.</li></ul> <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <ul style="list-style-type: none"><li>• The rotavirus vaccine was not being administered according to national guidelines.</li><li>• We found out of date and/or missing emergency medicines and equipment.</li><li>• Sharps bins were not signed and dated, nor did the practice stock all the necessary sharps bins required to safely dispose of the sharps they use.</li></ul> <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>