

# Upton Road Surgery

## Inspection report


Ground Floor Colne House  
21 Upton Road  
Watford  
Hertfordshire  
WD18 0JP  
Tel: 01923226266

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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

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Requires improvement 

Are services caring?

Requires improvement 

Are services responsive?

Requires improvement 

Are services well-led?

Inadequate 

# Overall summary

We carried out an announced focused inspection of Upton Road Surgery on 9 May 2019. This inspection was undertaken to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation set out in warning notices we issued to the provider in relation to Regulation 12 safe care and treatment and Regulation 17 Good governance.

The practice received an overall rating of inadequate at our inspection on 12 December 2018 and this will remain unchanged until we undertake a further full comprehensive inspection within six months of the publication date of the initial report.

The full comprehensive report from the December 2018 inspection can be found by selecting the 'all reports' link for Upton Road Surgery on our website.

Our key findings were as follows:

The practice had complied with the warning notices we issued and had taken the action needed to comply with the legal requirements.

- Governance arrangements in the practice had been strengthened. Meetings were formalised, and policies and procedures we reviewed had been updated. Permanent management arrangements were still being formalised. In the interim, a consultancy company was assisting the practice to establish leadership and management systems and providing day to day steer.
- Systems in place to ensure the safety of medicines that needed refrigerated storage had been improved.
- Systems had been implemented to manage and act upon Medicines and Healthcare products Regulatory Agency (MHRA) and other safety alerts.
- The process for identifying clinical and other audits relevant to patient care had been strengthened and there was evidence of audits in progress and completed.
- Risks associated with infection control had been identified and acted upon.

- Evidence of pre-employment checks were now available, and staff had received a disclosure and barring (DBS) check where relevant. Staff who acted as chaperone had been trained.
- The practice had reviewed the immunisation status of applicable employees and maintained a spreadsheet. This was work in progress and were expected to be completed by 1 June 2019.
- The practice was acting to implement the recently revised intercollegiate guidance 'Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff' to ensure practice nurses met the revised training requirements.
- Training needs of staff had been reviewed and records of staff mandatory training (as specified by the practice) were now maintained.
- Clinical staff had received regular appraisals, and appraisals for non-clinical staff were planned to happen very shortly.
- Records of significant events and complaints were maintained and handled according to practice policy.
- Areas of learning and improvement were shared, and actions taken where needed.
- Measures were in place to ensure the adequacy of practice premises, so care was delivered in an environment that was safe for patient and staff and ensured confidentiality.
- Following the formalisation of the service level agreements for the provision of care to patients living in two care homes, the practice had taken steps to ensure affected patients or their legal representatives had consented to the transfer of care from their previous provider.

**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

<b>Older people</b>	<b>Requires improvement</b> 
<b>People with long-term conditions</b>	<b>Good</b> 
<b>Families, children and young people</b>	<b>Good</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Good</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Requires improvement</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Good</b> 

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a practice manager specialist adviser.

## Background to Upton Road Surgery

Upton Road Surgery situated at Ground Floor Colne House, 21 Upton Road, Watford, Hertfordshire is a GP practice which provides primary medical care for approximately 9,450 patients living in Watford and surrounding areas.

Upton Road Surgery provides primary care services to local communities under a General Medical Services (GMS) contract, which is a nationally agreed contract between general practices and NHS England. The contract constitutes an enhanced service for inclusive healthcare for homeless and marginalised groups. The contract for this new service which commenced in October 2018 is currently being formalised with Herts Valleys Clinical Commissioning Group (CCG). The practice population is mixed comprising white British along with ethnic populations of Asian, Afro Caribbean, mixed race and Eastern European origin.

The practice has three female GP partners and one female salaried GP. There are two practice nurses, one

healthcare assistant, one healthcare assistant/receptionist combined role and one phlebotomist/receptionist combined role. (a phlebotomist draws and prepares blood for medical testing).

At the time of our inspection practice management was being developed. Interim practice management was led by a deputy manager who was supported by staff from a consultancy company. In addition, a manager from an adjoining practice provided support one day a week. A team of administrative and reception staff provide support services. The local NHS trust provides health visiting and community nursing services to patients at this practice.

The practice is open between 8am and 6.30pm Monday to Friday. There is extended opening one day each week on varying days until 9pm for GP appointments and 8.30pm for healthcare assistant appointments.

When the practice is closed services are provided by Herts Urgent Care via 111.