

London Street Surgery

Inspection report

72 London Street
Reading
RG1 4SJ
Tel:

Date of inspection visit: 6 December 2022
Date of publication: 16/02/2023

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?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced comprehensive inspection at London Street Surgery in April 2022. The overall rating for the practice was inadequate, specifically inadequate for the provision of safe and well-led services, requires improvement for effective services and good for caring and responsive services. We used our enforcement powers to take action against the breaches of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 including issuing two warning notices. We placed the practice in special measures to enable the practice to improve.

We carried out an announced focused inspection in September 2022 to determine if the breaches of regulations had been addressed following the inspection in April 2022 but did not provide a new rating. Whilst improvements had been made in relation to the safe provision of services at the last inspection, there were still issues which constituted a new and continued breach of regulations.

At this announced focused inspection carried out on 6 December 2022, we found significant improvements had been made to the provision of care and treatment. However, there remains a continued breach of regulation. Following this inspection, we have provided a new overall rating of Requires improvement and the key questions have been rated as:

Safe – Requires improvement

Effective – Requires improvement

Caring – not inspected, rating of good carried forward from previous inspection

Responsive – not inspected, rating of good carried forward from previous inspection

Well-led – Requires improvement

The full reports for previous inspections can be found by selecting the ‘all reports’ link for London Street Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection to follow up concerns and breaches of regulation from a previous inspection.

This was a focused inspection which included the key questions safe, effective and well-led and specific questions from responsive to find out whether patients could access services effectively and in a timely manner.

How we carried out the inspection

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 (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.

Overall summary

- A short site visit.
- Speaking to members of the patient participation group

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 this practice Requires improvement for providing safe services because:

- The practice did not have a process in place to ensure staff had received the appropriate vaccinations to keep themselves and patients safe.
- The practice did not always act in response to safety alerts.
- Patient Specific Directions were not in place for staff giving vaccines where required.
- Prescription stationery security was not sufficient.

We rated this practice Requires improvement for providing effective services because:

- The practice did not have an effective process in place to encourage eligible patients to attend cervical screening appointments.
- The practice did not have a programme of learning and development for staff.
- Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) decisions were not recorded accurately and were not reviewed.

We rated this practice Requires improvement for providing well-led services because:

- Quality assurance processes were not always effective in identifying issues and improving services.
- Governance systems and processes were not always effective.
- The system for the management of risks was not always effective.

We also found that:

- The practice had taken action following previous inspection to ensure patients were receiving appropriate monitoring and review.
- The practice had recruited and upskilled staff to increase its capacity to deal with patients.
- The provider recognised the importance of their Patient Participation Group and had re-started meetings following a pause during the COVID-19 pandemic.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- The practice was focused on person-centre care.
- The practice had reviewed their appointment booking system and implemented changes they hoped would lead to an increase in availability.

Overall summary

We found 1 breach of regulation. The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Additionally, the provider **should**:

- Take steps to improve the update of cervical screening
- Improve the written recording of reviewing staff competencies.
- Take steps to implement a programme of targeted quality improvement.
- Take steps to review each staff role and ensure staff have completed all the necessary training.

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

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 who was supported by a second CQC inspector. They reviewed evidence off-site, spoke with staff using video conferencing facilities and undertook a site visit. The team also included GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to London Street Surgery

Provider: Dr Najat Essa

London Street Surgery is located at

72 London Road

Reading

Berkshire

RG1 4SJ

The practice website is www.londonstreetsurgery.co.uk

The provider is registered with CQC to deliver the following Regulated Activities:

- Diagnostic and Screening Procedures
- Maternity and Midwifery Services
- Treatment of Disease, Disorder or Injury
- Family Planning Services

The practice is located within the Berkshire West Integrated Care Partnership which is part of the wider Buckinghamshire, Oxfordshire and Berkshire Integrated Care System. The practice delivers general medical services to a patient population of approximately 5,800 patients under a contract held with NHS England.

The practice is part of a wider network of GP practices called a primary care network (PCN). The practice belongs to Reading Central PCN.

The practice clinical team consists of one lead GP, three long-term locums GPs, three practice nurses and a pharmacy technician. The clinical team is supported by a part-time practice manager and a team of administration and reception staff.

Information published by Public Health England shows that deprivation within the practice population group is in the fifth decile (5 out of 10). The lower the decile, the more deprived the practice population is relative to others. The practice has a high proportion of patients from ethnic minority backgrounds (approximately 33%), the ethnic make up of the practice is as follows: 19% Asian, 8% black and 6% mixed and other ethnicities.

The practice has opted out of providing out of hours (OOH) services to their patients when the practice is closed. Patients can access OOH services by contacting the NHS 111 telephone service.

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 Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>The registered person had failed to ensure there were effective systems and processes in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk from the carrying on of the regulated activity. In particular:</p> <ul style="list-style-type: none">• The practice did not have an effective system in place to ensure staff were up to date with appropriate vaccinations in line with national guidance.• The practice did not have a process to ensure they had responded or, had responded quickly, to patient safety alerts.• The practice did not have an effective system to ensure blank prescription stationary was kept securely and tracked through the practice.• The practice did not have oversight of all Do Not Attempt Cardio Pulmonary Resuscitation records and there was no process to ensure they were completed correctly and reviewed regularly.• The practice did not have a system to ensure staff had the appropriate authority to administer vaccines. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>