

St Bartholomews Surgery

Inspection report

292a Barking Road
East Ham
London
E6 3BA

Tel: 02084720669

www.stbartholomewssurgery.gpsurgery.net

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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 a focused inspection at St Bartholomews Surgery on 24 January 2020. The announced inspection was part of our inspection programme. Following a Care Quality Commission annual regulatory review to check for changes in quality we inspected the key questions effective and well-led. We used information from our previous inspection findings for the key questions safe, caring and responsive. The practice was previously inspected on 9 November 2017 and was rated good overall.

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 all population groups.

We found that:

- Patients generally received effective care and treatment that met their needs, but some areas of clinical oversight, performance or governance needed improving.
- The way the practice was led and managed kept patients safe and promoted the delivery of good-quality person-centre care.

We rated the practice as **Requires improvement** for providing effective services and requires improvement for the population groups because:

- The practice ensured that care and treatment was delivered according to evidence-based guidelines.
- Arrangements to ensure clinical effectiveness and consistency needed improving, including elements of health assessments, case finding, oversight or review of care, cancer care, mental health and child immunisations.

We rated the practice as **good** for providing a well led service because:

- There was a clear leadership structure and staff felt supported by management.
- The practice had a number of policies and procedures to govern activity and held regular governance meetings.
- The way the practice was led and managed promoted the delivery of person-centre care.
- The practice proactively sought feedback from staff and patients, which it acted on.

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

- 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

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead CQC inspector and included a GP specialist adviser.

Background to

St Bartholomews Surgery is a GP Partnership registered with the Care Quality Commission (CQC) to carry on the regulated activities of Diagnostic and screening procedures, Family planning, Maternity and midwifery services and Treatment of disease, disorder or injury from one location: St Bartholomew's Surgery, 292a Barking Road, East Ham, London E6 3BA, which is located in east London. St Bartholomews Surgery provides services to patients under a Primary Medical Services (PMS) contract with NHS England. The practice is a member of the NHS Newham Clinical Commissioning Group (CCG).

The practice has approximately 10,600 patients and serves an ethnically diverse population with many languages spoken in addition to English. The practice is in purpose built premises and all patient areas and facilities are wheelchair accessible. The practice has a hearing loop.

Four of the GP partners work full time at the practice (three male and one female), a fifth male partner works part time and collectively GPs provide 36 weekly sessions. There are two female Practice Nurse collectively providing 15 sessions, two part time female healthcare assistants collectively providing five sessions. The clinical staff are supported by a full time practice manager, and a team of reception and administrative staff working a variety of full and part time hours.

Surgery hours are between 8.00am and 6.30pm Monday to Friday and the practice does not close for lunch. Extended hours appointments are available through the Primary Care Network (Central 1) from 6.30pm to 9.30pm on Wednesdays, Thursdays and Fridays at Market Street Health Centre, 52 Market Street, East Ham, E6 2RA and on Saturdays mornings from 09:00am to 12:30pm at Greengate Medical Centre, 497 Barking Road, Plaistow, London E13 8PS. Patients can also book appointments at the Newham access 7 days a week service provided by Newham GP Co-op. Patients are directed to an out of hours GP service outside these times. The practice has a website:

The Information published by Public Health England rates the level of deprivation within the practice population group as three on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. 76.7% of people in the practice area were from BME groups. The practice area has a higher percentage than national average of people whose working status is unemployed (8% compared to 4% nationally), and a lower percentage of people over 65 years of age (8% compared to 17% nationally).

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 the service provider was not meeting. The provider must send CQC a report that says what action it is 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	Regulation 17 HSCA (RA) Regulations 2014 Good governance There were no effective systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular: <ul style="list-style-type: none">• To ensure health assessments for frail elderly• Case finding, oversight of care and review for patients with long term conditions• To escalate children requiring a missed immunisation• Clinical performance including for cancer care, mental health and child immunisations