

Hurley Clinic

Inspection report

Ebenezer House
Kennington Lane
London
SE11 4HJ
Tel: 02077357918

Date of inspection visit: 13 and 14 September 2023
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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 announced comprehensive inspection at Hurley Clinic on 13 and 14 September 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - requires improvement

Caring - good

Responsive – requires improvement

Well-led - requires improvement

Following our previous inspection on 19 November 2014 the practice was rated good overall and for providing safe, effective, caring and well-led services but requires improvement for providing responsive services. We carried out a focused follow-up inspection on 16 June 2016 and found improvements had been made. Following the 2016 inspection we rated the practice as good for providing responsive services.

The full reports for previous inspections can be found by selecting the 'all reports' link for Hurley Clinic on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014

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 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.
- A short site visit.

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.

Overall summary

We have rated this practice as **Requires Improvement**.

We have rated this practice as **Requires Improvement** for providing safe services because:

- The provider had not acted in relation to risks identified in legionella risk assessments.
- Staff did not always have the appropriate authorisations to administer medicines via the correct use of Patient Group Directions.
- All medicines were not always reviewed during medicine reviews.
- Safety alerts were not always actioned in line with national guidance.

We have rated this practice as **Requires Improvement** for providing effective services because:

- Patients with long-term conditions were not always monitored in line with best practice guidance.
- Improvements were needed to the uptake rates of childhood immunisations and cervical cancer screening.

We have rated this practice as **Requires Improvement** for providing responsive services because:

- The provider had attempted to improve patient access, however the impact of these changes was not yet reflected in patient feedback.

We have rated this practice as **Requires Improvement** for providing well-led services because:

- The practice had not identified and managed all risks relating to the management of; safety alerts; patients with long-term conditions; medicine reviews; access to appointments; and legionella management.

We found that:

- The practice learned and made improvements when things went wrong.
- The practice had a comprehensive programme of quality improvement activity.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Complaints were listened and responded to and used to improve the quality of care.

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

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

- Take steps to ensure staff immunisations are maintained in line with current UK Health and Security Agency guidance.

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

Overall summary

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook visits to both sites. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Hurley Clinic

Hurley Clinic is located at Ebenezer House, Kennington Lane, London, SE11 4HJ.

The practice has a branch surgery at Riverside Medical Centre, Hobart House, St George Wharf, London, SW8 2JB.

Our inspection team visited the main practice and branch surgery as part of our inspection.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, treatment of disease, disorder or injury and surgical procedures and family planning. These are delivered from both sites.

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the South East London Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 22,890. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices: North Lambeth Primary Care Network.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth lowest decile (4 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 57.5% White, 25.3% Black, 7.2% Mixed, 7.1% Asian, and 2.9% Other.

There are more working age and fewer older people and young people registered at the practice compared with local and national averages.

There is a team of 7 GPs who provide cover at both practices. The practice has a team of 2 nurses who provide nurse led clinics for long-term conditions at both the main and the branch location. The GPs are supported at the practice by a team of reception and administration staff. The practice manager works at both the main location and branch surgery to provide managerial oversight.

The practice is open between 8am to 8pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the PCN, where late evening and weekend appointments are available. Out of hours services are provided via NHS 111.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment was not always provided in a safe way for service users to ensure compliance with this part of the above Regulations.</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <ul style="list-style-type: none">• The provider had not taken action to mitigate risks identified in legionella risk assessments.• Staff did not always have the appropriate authorisations to administer medicines via the correct use of Patient Group Directions.• All medicines were not always reviewed during medicine reviews.• Safety alerts were not always actioned in line with national guidance.• Patients with long-term conditions were not always monitored in line with best practice guidance• Improvements were need to the uptake rates of childhood immunisations and cervical cancer screening. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p>

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Requirement notices

Treatment of disease, disorder or injury

Systems or process were not established and operated effectively to ensure compliance with the requirements in this Part. Such systems or processes did not enable the registered person to;

Assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:

- The practice had not identified and managed all risks relating to the management of; legionella management; medicine reviews; safety alerts; access to appointments and patients with long-term condition.

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.