

# The Wapping Group Practice

### Inspection report

22 Wapping Lane London E1W 2RL Tel: 0207 481 9376 www.wappinggrouppractice.nhs.uk

Date of inspection visit: 09/10/2018 Date of publication: 07/11/2018

Good

Good

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**

Are services well-led?

# **Overall summary**

#### This practice is rated as Good overall.

#### The key questions at this inspection are rated as:

#### Are services well-led? - Good

We previously carried out an announced comprehensive inspection of The Wapping Group Practice on 23 November 2017. We rated the practice as good overall, and as requires improvement for the well-led key question. The full comprehensive report of the 23 November 2017 inspection can be found by selecting the 'all reports' link for The Wapping Group Practice on our website at www.cqc.org.uk.

We carried out this focused inspection on 9 October 2018 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the practice was now providing well-led care.

At the inspection on 9 October 2018, the provider had made improvements and is now rated as good for providing well-led services.

Our key findings were as follows:

• The practice had taken action to improve communication with patients who have a hearing impairment. They had submitted a request to NHS Property Services to install a hearing loop and had alerts on the computer system to identify patients with hearing difficulties to reception staff.

- The data for 1 July 2017 to 30 June 2018 for prescription items for co-amoxiclav, cephalosporins and quinolones as a percentage of the total number of prescription items for selected antibacterial drugs was above the national average (14% for the practice, compared to 8.7% nationally). This indicates higher antibiotic prescribing on the part of the practice. The practice had previously completed a two cycle audit in 2016 to reduce antibiotic prescribing, but was not aware of the recent data.
- Clinical and non-clinical staff were positive about the culture of the practice.
- Leaders were visible and approachable.
- We saw evidence of regular staff meetings which involved clinical and non-clinical members of staff.
- Staff felt able to raise concerns, were encouraged to do so, and were confident that these would be addressed.
- Staff were clear about their roles and responsibilities.

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

• Review the level of antibiotic prescribing for the practice.

**Professor Steve Field** CBE FRCP FFPH FRCGPChief Inspector of General Practice

## Please refer to the detailed report and the evidence table for further information.

### Population group ratings

#### Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) inspector, who was accompanied by a GP specialist adviser.

### Background to The Wapping Group Practice

The Wapping Group Practice is situated at 22 Wapping Lane, London E1W 2RL, in purpose-built premises with access to eight consulting rooms. The building is owned and maintained by NHS Property Services. The practice provides NHS primary care services to approximately 10,000 patients living in Wapping through a General Medical Services (GMS) contract (a contract between NHS England and general practices for delivering general medical services).

The practice is part of NHS Tower Hamlets Clinical Commissioning Group (CCG), which consists of 36 GP practices split into eight networks. The Wapping Group Practice is part of the 'Highway Network', comprising of four practices in the locality.

The practice population of male and female patients between the age brackets of 25 and 44 is higher than the national average. The practice reports a 25% turnover of patients each year.

The practice is registered as a partnership with the CQC to provide the regulated activities of: diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures; and treatment of disease, disorder or injury. The practice staff comprises of two male and two female GP partners (totalling 21 clinical sessions per week) and four female salaried GPs (totalling 24 clinical sessions per week). The clinical team is supported by two practice nurses and two healthcare assistants. The administration team consists of a practice manager, a medical secretary, two administrators and seven receptionists.

The practice is a training and teaching practice.

The practice telephone lines are open from 9am to 6.30pm on Monday to Friday. Extended hours are provided on Tuesday from 8am to 9am and from 6.30pm to 7.30pm, and on Wednesday and Thursday from 6.30pm to 7.30pm.

When the surgery is closed, out of hours services are accessed through the local out of hours service or NHS 111. Patients can also access appointments out of hours through several hub practices within Tower Hamlets between 6.30pm and 8pm on weekdays, and between 8am and 8pm on weekends.

# Are services well-led?

### We rated the practice as good for providing a well-led service.

#### Leadership, culture and governance arrangements

At the comprehensive inspection on 23 November 2017, staff told us the leadership was not always approachable and did take the time to listen to or communicate with all members of staff. Staff did not feel able to raise concerns. There was evidence of a clear division between some of the partners, which manifested itself in staff taking sides and low morale. Therefore, the practice was rated as requires improvement for this key question.

At this inspection we found improvements had been made in relation to the leadership, culture and governance arrangements.

• Clinical and non-clinical staff were positive about the culture of the practice, describing it as open, professional, supportive and friendly.

- Leaders were visible and approachable. Staff told us there are no longer divisions between the leadership at the practice, and that management and the GPs worked professionally and were supportive.
- We saw evidence of regular staff meetings which involved clinical and non-clinical members of staff.
- Staff said that, since the last inspection, they have felt able to raise concerns, were encouraged to do so, and were confident that these would be addressed. We saw specific examples where concerns had been raised by staff and these had been acted upon by management.
- Reception staff arranged their own cover when booking annual leave and told us that this system worked well.
- Staff were clear and knowledgeable about their roles and responsibilities.

### Please refer to the evidence table for further information.