

Evergreen Surgery Limited

Inspection report

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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?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Good	

Overall summary

We carried out an announced comprehensive at Evergreen Surgery Limited on 8 August 2022. Overall, the practice is rated as good.

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Following our previous inspection on 27 September 2018, the practice was rated Good overall and for all key questions.

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

Why we carried out this inspection

We carried out this inspection in response to risk specifically regarding child immunisation rates, cervical screening uptake rates and regarding low levels of patient satisfaction on phone access.

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 and on site.
- 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.

We found that:

Overall summary

- Leaders had an inspiring shared purpose to tackle local health inequality. Clinical performance in areas such as child immunisations and diabetes management were routinely monitored. We noted that patients with diabetes had seen a reduction in their blood glucose, blood pressure and cholesterol levels.
- Leaders were aware of the practice's performance on cervical screening uptake and we noted a range of interventions had been introduced in order to improve performance.
- Leaders were aware of low patient satisfaction regarding phone access. They outlined a range of improvement activity including imminent purchase of a new phone system and ongoing publicising of alternative methods of communicating with the Practice. We noted language barriers resulted in longer call handling times and were also advised that considerable staff time was taken up with having to redirect local NHS Hospital Trust callers who had erroneously been given the practice's phone number.
- When something went wrong there was an appropriate review involving all relevant staff and people who used the service. However, the threshold for what constituted a significant incident was not consistent with the provider's Significant Incident policy.
- The practice had a systematic approach to working with other organisations to improve healthcare outcomes. For example, projects had been developed with local NHS Hospital Trusts to reduce musculoskeletal hospital referrals and to manage wider hospital outpatient backlogs.
- There was a strong focus on continuous learning and improvement at all levels of the organisation. For example, we saw evidence that learning points from complaints had been discussed and used to improve the service.
- Mechanisms were in place to support GPs and promote their positive wellbeing. For example, the practice had reduced GPs' workload through increased use of clinical pharmacists in the care of patients with long-term conditions. A Fellowship programme also provided additional mentoring support to new GPs.
- Effective practice management arrangements underpinned and supported the delivery of high-quality and person-centred care.

Whilst we found no breaches of regulations, the provider **should**:

- Continue to monitor and take action to improve cervical screening and child immunisation uptake rates.
- Continue to monitor and take action to improve patient satisfaction regarding phone access.
- Take action to ensure that significant incidents are defined in accordance with its significant incident policy.

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

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 spoke with staff using video conferencing facilities and undertook a site visit. 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 Evergreen Surgery Limited

Evergreen Surgery Ltd is located in Edmonton, North London and has a patient list of approximately 20,000. The practice is part of the North Central London Integrated Care system and has a deprivation score of 2 out of 10 (1 being the most deprived). Evergreen Surgery cares for a diverse population (with approximately 52% of its patients from Black and minority ethnic backgrounds). The area is extremely diverse with over eighty languages spoken in the borough.

The practice holds a General Medical Service (GMS) contract with NHS England. This is a contract between general practices and NHS England for delivering primary care services to local communities. The practice is open between 8:00am and 6:30pm Monday to Friday. Appointments are from 8:30am to 6:00pm daily.

Extended hours surgeries are offered every weekday from 6.30pm to 8:00pm and 8:00am to 8:00pm at weekends. Outside of these times, patients are referred to a local out-of-hours provider. Details of how to access the service are displayed in reception and on the provider's website. The provider also hosts an 8:00am to 8:00pm weekend walk in centre.

The services provided include child health care, ante and post-natal care, immunisations, sexual health and contraception advice, management of long-term conditions and smoking cessation clinics.

There are eleven GPs, two of whom are directors. Three of the GPs are male and eight are female. There are three female practice nurses, one female health care assistant, a practice manager, a Digital Lead and a range of administrative staff.

We were advised that the provider has a branch site which is located at Ordinance Unity Centre for Health, 645 Hertford Road, Enfield, Middlesex, EN3 6ND. The branch location was not visited as part of this inspection and during our inspection we were advised that the practice would shortly be applying to separately register the branch location.