

# Western Road Medical Centre

## Inspection report

99 Western Road  
Romford  
Essex  
RM1 3LS  
Tel: **01708 775300**  
[www.westernroad.co.uk](http://www.westernroad.co.uk)

Date of inspection visit: 12 February to 12 February  
2019  
Date of publication: 13/03/2019

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?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at Western Road Medical Centre on 12 February 2019 as part of our inspection programme.

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,
- 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 have rated the provider good in effective, caring, responsive and well led because: -

- 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.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- The practice had a culture which drove high quality sustainable care.
- The GP survey result scored 96% for patient overall experience.

We have rated safe as requires improvement this is because:

- At the time of the inspection the practice did not have an overall view to enable the monitoring of staff training. This had resulted in some staff not completing their mandatory safety training in child safeguarding awareness, infection control, fire and basic life support.

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

- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out the duties.
- (Please see the specific details on action required at the end of this report).

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

- Review the governance systems to ensure that the provider can evidence that staff have completed the necessary training, and have had the appropriate immunisations.
- Review the prevention and management infections action plan to ensure progress is monitored and actions completed,
- Review the recruitment procedure all the correct documentation is obtained prior to a member of staff commencing work.
- Review the policies and procedures to ensure that they reflect the staff practices.

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

**Professor Steve Field** CBE FRCP FFPH FRCGP Chief Inspector of General Practice

## Population group ratings

<b>Older people</b>	<b>Good</b>	
<b>People with long-term conditions</b>	<b>Good</b>	
<b>Families, children and young people</b>	<b>Good</b>	
<b>Working age people (including those recently retired and students)</b>	<b>Good</b>	
<b>People whose circumstances may make them vulnerable</b>	<b>Good</b>	
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Good</b>	

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser, and a second inspector.

## Background to Western Road Medical Centre

Western Road Medical Centre is located at:

99 Western Road

Romford

Essex

RM1 3LS

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice has a contract with the Havering Clinical Commissioning Group (CCG). The practice provides personal medical services for 17,093 (8,313 male, 8,780 female) patients.

The practice has seven partners, (five male and two female) and two salaried GPs. There are two advanced nurse practitioners and two practice nurses. There is a practice manager who is supported by a management team of three and an extensive administrative team. The practice is a GP training practice and had could train upto fours GP registrars at a time.

The practice is open Monday to Friday between 8am to 6.30pm. When the practice is closed, out of hours cover for emergencies is provided by Havering GP Federation and NHS 111 services. The practice part of the wider network of GP practices in Havering.

The practice catchment area is classed as being within one of the least deprived areas in England. The practice scored seventh on the deprivation measurement scale; the deprivation scale goes from one to 10, with one being the most deprived. People living in more deprived areas tend to have greater need for health services.

National General Practice Profile describes the practice ethnicity as being 86.6% white British, 6.6% Asian, 4.1% black, and 2.3% mixed and 0.8% other non-white ethnicities.

The practice demographics show a slightly higher than average percentage of people in the 65+ year age group. Average life expectancy is 80 years for men and 84 years for women compared to the national average of 79 and 83 years respectively. The general practice profile shows that 47% of patients registered at the practice have a long-standing health condition, compared to 52% 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	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>The service provider had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they were employed to perform. In particular:</p> <p>At the time of the inspection the practice did not have an overall view to enable the monitoring of staff training. This had resulted in some staff not completing their mandatory safety training in child safeguarding awareness, infection control, fire and basic life support.</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	