

London Street Surgery

Inspection report

72 London Street Reading RG1 4SJ Tel:

Date of inspection visit: 26 September 2022 Date of publication: 24/10/2022

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	Inspected but not rated	
Are services safe?	Inspected but not rated	
Are services effective?	Inspected but not rated	
Are services well-led?	Inspected but not rated	

Overall summary

We carried out an announced focussed follow up inspection at London Street Surgery on 26 September 2022 to determine if improvements had been made following our previous inspection in April 2022 which led to enforcement action. This inspection was to determine whether the highest concerns identified at the last inspection had been acted on or were being managed and mitigated. We did not provide a rating as a result of this inspection.

We inspected London Street Surgery in April 2022 and rated them Inadequate overall. As a result of that inspection, we issued two Warning Notices which required them to make improvements.

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

Why we carried out this inspection

We carried out this inspection to follow up breaches of regulation from a previous inspection.

• At this inspection we followed up breaches of Regulation 12: Safe care and treatment and Regulation 17: Good governance, under the Health and Social care Act 2008 (Regulated Activities) Regulation 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 facilities.
- 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 the provider and other organisations.

We found that:

- Improvements had been made to the monitoring of patients on high-risk medicines.
- Medication reviews took place but did not always follow national guidance or best practice.
- Improvements had been made to the monitoring of patients with long-term conditions.
- Clinicians had access to accurate information, but this was not always used when repeat prescriptions were issued.
- A new system had been introduced and was followed to ensure medicines safety alerts were acted on.
- Systems and processes existed to ensure oversight and management of clinical correspondence from external sources.
- A care coordinator maintained oversight and management of health reviews for patients with a learning disability.
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- A new process existed to ensure blank prescription stationary was stored securely and was tracked through the practice.
- Management had oversight of completed training, could identify non-compliance and action resulted where necessary.
- Audit and quality assurance activity had been introduced but was was limited and did not proactively identify risks to the quality of patient care.

We found one breach of regulation. The provider **must**:

• 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 table.

This inspection focused on the key areas of service provision listed above. We will undertake a comprehensive inspection to determine whether the location can be removed from special measures and consider a new rating within six months of the publication of the last inspection report

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 London Street Surgery

Provider: Dr Najat Essa

London Street Surgery is located at:

72 London Road

Reading

Berkshire

RG14SJ

The practice website is www.londonstreetsurgery.co.uk

The provider is registered with CQC to deliver the Regulated Activities: diagnostic and screening procedures, maternity and midwifery procedures, treatment of disease disorder and injury and family planning services.

The practice is located within the Berkshire West Integrated Care Partnership (ICP) which is part of the wider Buckinghamshire, Oxfordshire and Berkshire Integrated Care System (ICS). The practice delivers general medical services to a patient population of approximately 5,800 patients under a contract held with NHS England.

The practice is part of a wider network of GP practices called a primary care network (PCN). The practice belongs to Reading Central PCN.

The practice clinical team consists of one lead GP partner, one salaried GP and three long-term locums working at the practice. The clinical team also consists of three practice nurses and a pharmacy technician employed by the practice. The clinical team are supported by a part-time practice manager and a team of administration and reception staff.

Information published by Public Health England shows that deprivation within the practice population group is in the fifth decile. The lower the decile, the more deprived the practice population is relative to others. It has a high proportion of patients from ethnic minority backgrounds (approximately 33%) with 19% of the patient list describing themselves as from as Asian background, 8% black and 4% mixed ethnicity.

The practice has opted out of providing out of hours (OOH) services to their patients when the practice is closed. Patients can access OOH services by contacting the NHS 111 telephone service.

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	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Treatment of disease, disorder or injury	How the regulation was not being met:
Maternity and midwifery services	The registered person had failed to ensure there were effective systems and processes in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk from the carrying on of the regulated activity.
	 The service did not consistently ensure all patients were recalled for medication reviews and routine monitoring tests in line with national guidance. The service did not ensure all patients with a long-term condition were recorded accurately on their clinical system. For example 41 patients were identified with a potential missed diagnosis of chronic kidney disease stages four or five and this had not been recorded. The service did not ensure all medication reviews contained documented outcomes in line with best practice guidance. The service did not ensure monitoring tests were checked and up to date before prescriptions were issued for all patients. This was in breach of regulation 17(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014.