

Sands End Health Clinic

Quality Report

Bridge House Centre for Health
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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 service

Good 

Are services safe?

Good 

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Sands End Health Clinic on 20 April 2016. The overall rating for the practice was good but required improvement for providing safe services. This was specifically in relation to some aspects of medicines management and fire safety precautions. The full comprehensive report on the 20 April 2016 inspection can be found by selecting the 'all reports' link for Sands End Health Clinic on our website at www.cqc.org.uk.

This inspection was a follow up desk based focused inspection carried out on 19 May 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in regulation that we identified in our previous inspection on 20 April 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

The practice is now rated good for providing safe services and the overall rating remains as good.

Our key findings were as follows:

- Improvements had been made in the management and storage of medicines which now included an effective fridge temperature monitoring process and, a system to monitor that all medicines kept at the practice were in date.
- Effective fire safety arrangements were now in place including fire extinguishers that were fit for purpose.

We also reviewed the actions taken since the last inspection to the areas where we identified the practice should make improvement and saw that they had been addressed.

Our findings were as follows;

- Staff who undertook chaperone duties had undertaken additional training to expand their competency skills to effectively perform the role.
- Improvements had been made to the practice's cervical screening uptake rates. Data for 2015/16 showed that the percentage of women aged 25 to 64 years of age who had a cervical screening test performed in the preceding 5 years was comparable with the Clinical Commissioning Group (CCG) and national averages.
- The practice had increased the number of patients identified as carers and currently had a carer's register of 167 patients (2% of the practice list size).

Summary of findings

- Information about interpreting services was now made available to patients.
- Arrangements were in place for the purchase of a new hearing loop to assist patients with a hearing impairment.

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

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

The practice is rated as good for providing safe services.

- Arrangements for managing medicines, including emergency drugs and vaccinations, in the practice kept patients safe.
- Risks to patients in relation to fire safety were assessed and well managed.

Good



Sands End Health Clinic

Detailed findings

Our inspection team

Our inspection team was led by:

This follow up desk based focused inspection was conducted by a CQC inspector.

Background to Sands End Health Clinic

Sands End Health Clinic is a well-established GP practice situated within the London Borough of

Hammersmith & Fulham. The practice lies within the administrative boundaries of NHS Hammersmith and Fulham Commissioning Group (CCG) and is a member of the Hammersmith & Fulham GP federation and part of the south Fulham GP network.

The practice provides primary medical services to approximately 8,000 patients, 6000 of whom are working age. The practice holds a core General Medical Services Contract (GMS) and Directed Enhanced Services Contracts.

The practice is located at Bridge House Centre for Health, 1 Broughton Road Approach, London SW6 2FE, with good transport links by bus and rail services. The practice operates from a converted building owned by a private landlord and managed by Community Health Partnerships.

The building is shared with another GP practice and is arranged over three floors with stair and lift access and with accessible facilities.

The registered practice population is ethnically diverse and is characterised by a high proportion of working age adults. There is a higher than the national average number of patients between 0 and 9 years of age and between 25 and

49 years of age. There is a lower than the national average number of patients 50 years plus. The practice area is rated in the fifth less deprived decile of the national Index of Multiple Deprivation (IMD). People living in more deprived areas tend to have greater need for health services. Data from Public Health England 2015/16 shows that the practice has a lower percentage of patients with a long-standing condition compared to CCG and England averages (44%, 42%, and 53% respectively).

The practice is registered with the Care Quality Commission to provide the regulated activities of diagnostic & screening procedures, family planning, maternity & midwifery services, surgical procedures and treatment of disease disorder & Injury.

The practice team comprises of one female GP managing partner, a female and a male GP partner, one male and four female salaried GPs and a female GP retainer, who collectively work 39 clinical sessions. They are supported by two practice nurses, a health care assistant, a physician's associate, systems manager, operations manager, two administrators and six receptionists.

The practice opening hours and consultation times are from 8am to 6.30pm Monday to Friday. The clinical sessions of individual doctors and nurses vary within these hours. Extended hour appointments are offered in the morning from 7am to 8am and in the evening from 6.30pm to 7pm Monday to Friday and from 8am to 10am on Saturday mornings. The out of hours services are provided by an alternative provider. The details of the out-of-hours service are communicated in a recorded message accessed by calling the practice when it is closed and on the practice website.

The practice provides a wide range of services including chronic disease management, minor surgery and health

Detailed findings

checks for patients 40 years plus. The practice also provides health promotion services including, cervical screening, childhood immunisations, child health surveillance and contraception and family planning.

Why we carried out this inspection

We undertook a comprehensive inspection of Sands End Health Clinic on 20 April 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall, although the key question safe was rated as requires improvement. The full comprehensive report following the inspection on 20 April 2016 can be found by selecting the 'all reports' link for Sands End Health Clinic on our website at www.cqc.org.uk.

We undertook a follow up desk based focused inspection of Sands End Health Clinic on 19 May 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

We carried out a follow up desk based focused inspection of Sands End Health Clinic on 19 May 2017. This involved the review of documentation we had asked the practice to submit to demonstrate that improvements had been made in the areas of concern that were identified at our previous inspection on 20 April 2016.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 20 April 2016, we rated the practice as requires improvement for providing safe services as the arrangements in relation to some areas of medicines management and aspects of fire safety provision were not adequate. These arrangements had significantly improved when we undertook a follow up inspection on 19 May 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

When we inspected the practice on 20 July 2016 we found that although there were processes and practices in place to keep patients safe, there were areas of concern in relation to medicines management. We found that some medicines held at the practice had expired and that vaccine fridge temperature monitoring was not consistently recorded each working day.

At this inspection we found that arrangements for managing medicines, including emergency drugs and vaccinations, in the practice kept patients safe. There was an effective system for the monitoring and recording of

fridge temperatures to ensure the cold chain storage of vaccines and medicines. We saw that spot checks were regularly performed to attest that these records were correctly maintained. The practice maintained a stock record of medicines held including quantity and expiry date which was regularly reviewed to ensure that expired medicines were expediently disposed of.

Monitoring risks to patients

When we inspected the practice on 20 July 2016 we found that there were procedures in place for monitoring and managing risks to patient safety and staff, with the exception of some fire safety arrangements. We found that although the practice had an up to date fire risk assessment, recommendations from this had not been completed including the replacement of expired fire extinguishers.

At this inspection we found that this issue had been addressed. We were provided with evidence that expired fire extinguishers had been replaced and a further fire risk assessment had been undertaken of the whole building in January 2017 with a target date for the completion of outstanding actions by July 2017.