

Dr Telesilla Gueret Wardle

Quality Report

Christchurch Hall Surgery

Haringey

N8 8AE

Tel: 020 8340 2877

Website: www.christchurchhallsurgery.co.uk

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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 effective?

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 Dr Telesilla Gueret Wardle on 15 November 2016. The overall rating for the practice was good. However the practice was rated as requires improvement for providing an effective service as no two cycle clinical audits had been completed. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Dr Telesilla Gueret Wardle on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 9 August 2017 to confirm that the practice had carried out their plan to meet the areas for improvement identified in our previous inspection on 15 November 2016. This report covers our findings in relation to the progress made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- The practice has now begun to undertake two cycle clinical audit but these were yet to be completed.
- Carers were appropriately identified and support was being provided.
- Portable appliance testing (PAT) had been carried out.

However, there were also areas of practice where the provider needs to make improvements.

The provider should:

- To continue to review and conduct clinical audit cycles for patient quality assurance.

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 effective?

The practice is rated as good for providing an effective service.

- The practice has now begun to undertake two cycle clinical audit but these were yet to be completed.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The provider had resolved the concerns for, effective identified at our inspection on 15 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for, effective identified at our inspection on 15 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for, effective identified at our inspection on 15 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for, effective identified at our inspection on 15 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for, effective identified at our inspection on 15 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for, effective identified at our inspection on 15 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- To continue to review and conduct clinical audit cycles for patient quality assurance.

Dr Telesilla Gueret Wardle

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Dr Telesilla Gueret Wardle

Dr Telesilla Gueret Wardle (Christchurch Hall Surgery) is located in Haringey, North London. The practice has a patient list of approximately 3600. Twenty nine percent of patients are aged under 18 (compared to the national practice average of 44%) and 15% are 65 or older (compared to the national practice average of 20%). Forty two percent of patients have a long-standing health condition.

The services provided by the practice include child health care, ante and post-natal care, immunisations, sexual health and contraception advice and management of long term conditions.

The staff team comprises a female GP (working 9 sessions a week), a male long term locum (working two sessions a week), a male clinical assistant (working an alternate schedule three and four sessions a week), a female practice nurses (working twenty hours a week), a female healthcare assistant (working eight hours a week), a full time practice manager secretarial and reception staff. Dr Telesilla Gueret Wardle (Christchurch Hall Surgery) holds a Personal Medical Service (PMS) contract with NHS England.

The practice's opening hours are:

- Monday, Tuesday, Thursday and Friday 8:00am-6:30pm
- Wednesday 8:00am to 1pm

- Monday, Tuesday and Thursday 6:30pm-7:30pm (extended hours)

Appointments are available at the following times:

- Monday, Tuesday and Thursday 8:30am – 10:30am and 4:30pm – 7:30pm
- Wednesday – 8:30am – 1pm
- Friday 8:30am – 10:30am and 4:30pm – 6:30pm

In addition to pre-bookable appointments that could be booked up to four weeks in advance, urgent appointments are also available for people that need them. When the practice was closed, patients were directed to the local out of hour's provider.

The practice is registered to provide the following regulated activities which we inspected: family planning, treatment of disease, disorder or injury; diagnostic and screening procedures, and maternity and midwifery services.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Telesilla Gueret Wardle on 15 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good, however the practice was rated as requires improvement for providing an effective service as no two cycle clinical audits had been completed. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Dr Telesilla Gueret Wardle on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up desk based inspection of Dr Telesilla Gueret Wardle on 9 August 2017. This inspection was carried out to review the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

- Relevant staff had now completed their required safeguarding children training.
- An ongoing clinical audit plan had been implemented.
- Policies and procedures had been updated.

How we carried out this inspection

We carried out a desk-based focused inspection of Dr Telesilla Gueret Wardle on 9 August 2017. This involved reviewing evidence that:

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 15 November 2016, we rated the practice as requires improvement for providing effective services as no two cycle clinical audits had been completed.

These arrangements had improved when we undertook a desk top review on 9 August 2017. The practice is now rated as good for providing an effective service.

Management, monitoring and improving outcomes for people

The practice undertook an audit in March 2017 to ensure that patients with type 2 diabetes were following the

correct treatment path. Fifteen patients were identified as having type 2 diabetes. The practice requested the patient to undertake a blood test to ascertain whether medication was the correct option for their treatment. Once the blood tests were returned, patient's treatment plans were reviewed in line with the results. Eight patients were prescribed medications, one patient was offered advice on lifestyle modification and a further seven patients were referred to an educational programme. A second audit cycle was started in July 2017 where seven patients were identified. These patients were sent for blood tests and the practice were awaiting the results in order to complete the second cycle of the audit.