

Lawrence House Surgery

Inspection report

107 Philip Lane
Tottenham
London
N15 4JR
Tel:
www.lawrencehousesurgery.com

Date of inspection visit: 17 November 2022
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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 well-led?

Good 

Overall summary

We carried out an announced focused inspection at Lawrence House Surgery on 17 November 2022. Overall, the practice is rated as Good.

The ratings for each key question were rated as:

Safe - Good

Effective - Good

Caring - Not inspected, rating of Good carried forward from previous inspection

Responsive - Not inspected, rating of Good carried forward from previous inspection

Well-led - Good

Following our previous inspection on 19 December 2016, the practice was rated Good overall and for the key questions Effective, Caring, Responsive and Well-led. The practice was rated requires improvement for the key question Safe.

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

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities. The focus of the inspection included:

- Inspecting the Safe, Effective and Well-led key questions.
- Following up on areas identified for improvement from previous inspections and remote monitoring activity.

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:

- 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

Overall summary

- information from the provider, patients, the public and other organisations.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Staff interviewed describe a positive working environment and manager/staff relationships. Staff interviewed state they know who to report to if any concerns and staff are clear on roles/responsibilities within the team.
- There is evidence of a strong focus on patient-centred care and innovation within the practice. For example, partners within the practice are well connected with local networks and share learning.
- The practice has an effective system for monitoring staff training records and all staff files looked at had completed all mandatory training in the required time frames.
- Staff spoken with felt supported within their roles and were given appropriate time to pursue additional learning and training.
- Leaders within the practice showed awareness of current issues and had plans in place to address any identified concerns. For example, working on improving access and trialling use of a GP / other staff covering phone lines during early morning busy periods.
- Patients received effective care and treatment that met their needs.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

- Take action to ensure all patients with a Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) order, and who are deemed to lack mental capacity in relation to that decision, have a supporting formal capacity assessment available in their clinical record.
- Implement a system to monitor the oxygen levels within the oxygen cylinders when completing checks on the emergency medicines supplies.
- Review the disabled toilet facilities and the use of an emergency pull cord for patients.
- Continue efforts to improve the uptake of childhood immunisations and cervical screening.

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 and undertook a site visit. The team included a second CQC inspector and a GP specialist advisor who spoke with staff and completed clinical searches and records reviews.

Background to Lawrence House Surgery

Lawrence House Surgery is located at 107 Philip Lane, London, N15 4JR. The practice is situated a short walking distance from Bruce Grove and Seven Sisters underground stations and is also accessible on several local bus routes.

The practice is registered with CQC to deliver the Regulated Activities: Diagnostic and screening procedures; Maternity and midwifery services; Family planning; Treatment of disease, disorder or injury; and Surgical procedures.

The practice is situated within the North Central London Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 17 000.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the second lowest decile (two of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 48.9% White, 27.1% Black, 11.8% Asian, 6.8% Mixed, and 5.4% Other.

There is a team of 11 GPs and three GP registrars who work at the practice. The practice has five nurses, one nursing associate and one healthcare assistant who provide nurse led clinics for long-term conditions. The GPs are supported at the practice by a team of 18 reception/administration staff. The practice manager and two assistant operations managers provide managerial oversight.

The practice is open between 8:30am to 6:30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided by the practice on Tuesdays and Wednesdays between 6:30pm and 8:30pm, where late evening appointments are available. The practice also opens on Saturdays between 8:30am and 6:30pm.