

# Harford Health Centre

## Inspection report

115 Harford Street  
London  
E1 4FG  
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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?

Requires Improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Good



# Overall summary

We carried out an announced comprehensive inspection of Harford Health Centre on 2 November 2020.

The practice was last inspected on 20 February 2020 where we rated it as inadequate overall and placed the practice in special measures.

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

At this inspection, we have rated the practice as **good** overall.

We rated the practice as **requires improvement** for providing safe services because:

- We identified some examples where GPs had prescribed two types of medicine without evidence of all of the required monitoring having been completed. We also identified limited evidence documented within consultation notes that GPs had discussed with patients the addictive potential of specific types of controlled drugs and the possibility of reducing the medicine. Immediately after our inspection, the practice took appropriate action to address these areas.
- Following our previous inspection the practice had put in place a new system to monitor safety alerts. However, we found evidence of prescribing contrary to some older safety alerts. Prior to our site visit, the practice had taken action to contact patients and amend prescriptions to ensure safety.
- Staff had completed adult and child safeguarding training to an appropriate level for their role.
- Recruitment checks were carried out in accordance with regulations.
- A record of staff vaccination was maintained.
- The practice held appropriate emergency medicines and there was evidence of regular checks of stock levels and expiry dates.
- Test results were reviewed in a timely manner.
- Appropriate safety checks and procedures had been put in place in relation to the premises.

We rated the practice as **good** for providing effective services because:

- The practice reviewed and monitored the effectiveness and appropriateness of the care and treatment it provided through quality improvement activity.
- The practice was able to demonstrate that staff had the skills, knowledge and experience to carry out their roles.
- Staff told us they were given protected time to complete training and that the practice encouraged staff to upskill.
- Staff worked together and with other organisations to deliver effective care and treatment.
- Staff helped patients to live healthier lives.

We rated all population groups as **good** for providing effective services, except for the population group of 'working age people', which we rated as **requires improvement** due to the low uptake for cervical screening.

We rated the practice as **good** for providing caring services because:

- The practice had discussed the GP Patient Survey results for 2020 and had put in place a documented action plan to try and improve patients' experience.

# Overall summary

- There had been an improvement in the GP Patient Survey results for 2020, as compared to 2019, for questions relating to healthcare professionals being good at listening to patients and patients having confidence and trust in the healthcare professionals they saw.
- The practice had carried out its own patient feedback exercise between April and September 2020, the results of which were positive.
- Feedback we received from members of the Patient Participation Group (PPG) advised that the practice meets the needs of and listens to its patients.

We rated the practice as **good** for providing responsive services because:

- The practice had discussed the GP Patient Survey results for 2020 and had put in place a documented action plan to try and improve patients' experience.
- The practice had completed a quality improvement project to improve access, which included trialling a 'total triage' model for booking appointments.
- The practice had implemented the 'total triage' model from October 2020 and feedback we heard from staff and members of the Patient Participation Group (PPG) was very positive about this new system.
- Members of the PPG told us patients were able to easily access appointments.
- The practice had carried out its own patient feedback exercise between April and September 2020, which included specific questions around telephone access and appointments, the results of which were positive.
- Complaints were listened to and responded to and used to improve the quality of care.

These areas affected all population groups, so we rated all population groups as **good** for providing responsive services.

We rated the practice as **good** for providing well-led services because:

- Following the last inspection there had been changes to the partnership at the practice, with the former lead GP retiring. The practice had engaged in sessions with an external consultancy company, to strengthen and develop the leadership team, and these sessions included incoming partners who had recently joined the practice.
- Following the previous inspection in February 2020, the practice had created a specific action plan which detailed the risks that had been identified; this plan was monitored and updated to ensure that risks were addressed and escalated where necessary.
- We saw that, following changes to the leadership team, partners' involvement and oversight had improved, including in relation to the safety of the premises.
- All of the specific concerns we identified at the previous inspection had been satisfactorily addressed at this inspection.
- Although we identified some issues regarding management of specific medicines, the practice took prompt action to resolve this.
- Staff told us they were able to raise concerns and that management and leaders were approachable.

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

- Ensure care and treatment is provided in a safe way to patients.

(Please see the specific details on action required at the end of this report).

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

# Overall summary

- Continue to take action to improve patients' access to care and treatment, particularly in relation to contacting the practice by telephone.
- Work to improve the uptake rate for cervical screening.

I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by this service.

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

**Dr Rosie Benneyworth** *BM BS BMedSci MRCGP*

Chief Inspector of Primary Medical Services and Integrated Care

## 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>Requires Improvement</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, who was assisted by a GP specialist advisor.

## Background to Harford Health Centre

Harford Health Centre is situated in East London, within NHS Tower Hamlets Clinical Commissioning Group (CCG). The practice provides services to approximately 9,750 patients under a General Medical Services contract (an agreement between NHS England and general practices for delivering primary care services).

The practice operates from a purpose-built medical centre at 115 Harford Street, London E1 4FG. There is an independently-operated pharmacy within the building. The property is managed and maintained by NHS Property Services.

The practice has a website: [www.harfordhealthcentre.nhs.uk](http://www.harfordhealthcentre.nhs.uk)

The practice is registered with the CQC to carry on the following regulated activities: Diagnostic and screening procedures; Family planning; Maternity and midwifery services; Surgical procedures; and Treatment of disease, disorder or injury.

The clinical team at the practice (which was going through changes to the partnership at the time of our inspection) consists of one male GP partner and one female nurse practitioner partner. There are five salaried GPs (one male and four female), one female practice nurse working full time, and three female and one male practice nurse working part time, one female pharmacist and two female healthcare assistants. Non-clinical staff include a practice manager and a team of reception and administrative staff members.

The practice is open as follows:

- Monday from 8am to 8pm;
- Tuesday from 8am to 6.30pm;
- Wednesday from 8am to 1pm and from 3pm to 8pm;
- Thursday from 8am to 6.30pm;
- Friday from 8am to 6.30pm;
- Saturday from 9am to 1pm.

Appointments are available:

- Monday from 9am to 12pm and from 3pm to 7.30pm;
- Tuesday from 8am to 12pm and from 3pm to 5.50pm;

- Wednesday from 9am to 12pm and from 3pm to 7.30pm;
- Thursday from 9am to 12pm and from 3pm to 5.50pm;
- Friday from 9am to 12pm and from 3pm to 5.50pm;
- Saturday from 9am to 12pm.

Appointments include home visits, telephone consultations and online consultations. Patients telephoning when the practice is closed are directed to the local out-of-hours service provider.

Information published by Public Health England rates the level of deprivation within the practice population group as two, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. In England, people living in the least deprived areas of the country live around 20 years longer in good health than people in the most deprived areas. National General Practice Profile describes the practice ethnicity as being 32.6% white, 54.7% Asian, 7.1% black, 3.8% mixed race, and 1.8% other ethnicities.

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 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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>There was unsafe management of medicines, in particular:</b></p> <ul style="list-style-type: none"><li>• Monitoring of specific medicines;</li><li>• Documenting discussions regarding specific addictive medicines and advice regarding reducing prescribing;</li><li>• Some prescribing contrary to older safety alerts.</li></ul> <p><b>These matters are in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</b></p>