

University Hospital Lewisham – Urgent Care Centre

Inspection report

University Hospital Lewisham
Lewisham High Street
London
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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 well-led?

Good 

Overall summary

This service is rated as Good overall. The service was previously inspected by the CQC on 24 February 2017. At that inspection the rating for the service was requires improvement overall. This rating also applied to safe and well led. Effective, caring and responsive rated as requires improvement.

The report stated where the service must make improvements:

- Ensure all staff are up-to-date with safeguarding children and adult training.
- Ensure that hospital trust staff undertaking chaperoning are trained and have received a Disclosure and Barring Service (DBS) check.
- Develop an effective system for sharing patient safety alerts and national guidance.
- Implement a process to keep staff at the location aware of local systems, protocols and policy changes.

The areas where the provider should make improvements are:

- Review the privacy and dignity during examinations, investigations and treatment arrangements for patients.

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out a focused inspection of the University Hospital Lewisham - Urgent Care Centre (formerly called South East London Doctors Cooperative Limited (SELDOC) Out-of-Hours Service - University Hospital Lewisham) on 30 May (including visits to the management hub and the main site). The focussed inspection was to check if areas within the safe and well led domains which were in breach of CQC regulations were now resolved

At this inspection we found:

- Staff were up-to-date in all training including for safeguarding, and all staff had received a Disclosure and Barring Service (DBS) check.
- There was a system in place for sharing alerts and updates with staff.
- The service had arranged for a screen to be available to maintain patients' privacy and dignity if an examination was required.

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

Our inspection team

Our inspection team consisted solely of a Care Quality Commission Lead Inspector.

Background to University Hospital Lewisham - Urgent Care Centre

South East London Doctors Cooperative Limited (SELDOC) is a doctors' cooperative established in 1996 and owned by its 120 member surgeries. SELDOC provides out-of-hours (OOH) primary medical services to approximately 280,000 patients from four south east London locations in the boroughs of Lewisham, Southwark and Lambeth. Each of these locations are registered separately with the Care Quality Commission (CQC).

University Hospital Lewisham - Urgent Care Centre operates from one consulting room located in the Urgent Care Centre at University Hospital Lewisham, Lewisham High Street, London, SE13 6LH. The consulting room is used by the hospital trust when the OOH service is not operating. The OOH service is delivered by one SELDOC GP at each session. There are no other SELDOC staff at the location. The service utilises the hospital trust's

reception team in the Urgent Care Centre. Call handling for the service is undertaken at SELDOC's administration base at Dulwich Community Hospital. A service manager provides oversight of the service and there is also a duty doctor available by telephone to provide support during the OOH sessions provided at Lewisham.

The service operating from the Lewisham location is GP-led and appointment only on Monday to Friday from 8pm to midnight and at weekends and bank holidays from 10am to 10pm. The service from this location does not provide consultations in patients' homes so there were no vehicles allocated to this location.

The provider is registered with the Care Quality Commission (CQC) for the regulated activities treatment of disease, disorder or injury and transport services, triage and medical advice provided remotely.

Are services safe?

At our previous inspection on 24 February 2017, we rated the provider as requires improvement for providing safe services and stated that the practice must:

- Ensure all staff are up-to-date with safeguarding children and adult training.
- Ensure that hospital trust staff undertaking chaperoning are trained and have received a Disclosure and Barring Service (DBS) check.
- Develop an effective system for sharing patient safety alerts and national guidance.
- Implement a process to keep staff at the location aware of local systems, protocols and policy changes.

At this inspection we found that these areas had been addressed, and we rated the service, and all of the population groups, as good for providing safe services.

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse.

- All staff received up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns. Staff who acted as chaperones were trained for the role and had received a DBS check.

Information to deliver safe care and treatment

Staff had the information they needed to deliver safe care and treatment to patients.

- The service had systems for sharing information with staff and other agencies to enable them to deliver safe care and treatment. The service utilised a variety of newsletters, e-mails and clinical meetings to ensure that staff were up-to-date.

Are services well-led?

At our previous inspection on 24 February 2017, we rated the provider as requires improvement for providing well led services and stated that the practice must have systems in place to:

- Ensure all staff are up-to-date with safeguarding children and adult training.
- Ensure that hospital trust staff undertaking chaperoning are trained and have received a Disclosure and Barring Service (DBS) check.
- Develop an effective system for sharing patient safety alerts and national guidance.
- Implement a process to keep staff at the location aware of local systems, protocols and policy changes.

At this inspection we found that these areas had been addressed, and we rated the service, and all of the population groups, as good for providing well led services.

Governance arrangements

There were clear responsibilities, roles and systems of accountability to support good governance and management.

- Structures, processes and systems to support good governance and management were clearly set out, understood and effective. This included informing staff about patient safety alerts and new national guidance.
- Staff were clear on their roles and accountabilities including in respect of safeguarding and reporting significant events.
- The provider had monitoring arrangements in place to ensure that the service was reporting significant events and making safeguarding referrals in line with its protocols.