

The Old Dairy Health Centre

Inspection report

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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?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at The Old Dairy Health Centre on 6 June 2019 as part of our inspection programme. We decided to undertake an inspection of this service as having moved from their prior premises, this was a newly registered location that had yet to be inspected by CQC.

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.

We have rated this practice as good overall, good in all key questions other than safe and good for all population groups. Safe is rated as requires improvement.

We found that:

- In most cases, the practice provided care in a way that kept patients safe and protected them from avoidable harm. However, in some areas systems were not in place to keep patients safe, specifically the safe management of medicines and infection control processes.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

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

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

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

- Ensure the route by which complaints might be escalated is included in the reply to letters.
- Review how records of staff training are maintained.
- Review how safety alerts are accessed, including details of actions taken.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Good 
Working age people (including those recently retired and students)	Good 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a practice manager specialist advisor.

Background to The Old Dairy Health Centre

The Old Dairy Health Centre is based at 19b Croxted Road, London, SE21 8SZ and provides services to 6000 patients in Lambeth. The surgery has good transport links and there is a pharmacy located nearby.

The practice has a higher than average population of those of working age and children. The practice is in the sixth most deprived decile in England. Of patients registered with the practice, approximately 65% are White or White British. However, the practice list is relatively diverse and there are patients from a variety of ethnic populations registered at the practice, and many users of services do not speak English as a first language.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury.

The practice is located in a new purpose-built building. There are six consulting rooms on the ground floor, four GP rooms and two treatment rooms. There is step free access to the ground floor and an accessible toilet.

There are three partners who share management responsibilities at the service. The practice employs a further salaried GP, and one long term locum GP. There are also three nurses (one of whom is a nurse practitioner) and a healthcare assistant. The clinical team is supported by a pharmacist who works one day a week at the practice. The non-clinical team includes a practice manager, an assistant practice manager and nine other reception and administrative staff.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <p>The provider had failed to ensure the proper and safe management of medicines;</p> <ul style="list-style-type: none">• The service did not stock medicines to manage all emergency presentations.• The practice did not retain full copies of patient group directives, only the signed sheets were kept. <p>The provider had not followed guidelines for management of infection control.</p> <ul style="list-style-type: none">• The practice had not completed an infection control audit in the 12 months before the inspection. <p>Staff did not have all of the information they needed to ensure that safe care and treatment were delivered.</p> <ul style="list-style-type: none">• Pathology results were sent to the GPs who had requested them. There was no system in place to ensure that urgent results were followed up on days in which GPs did not work, although there were arrangements to cover annual leave. <p>Systems were not in place to keep people safe:</p> <ul style="list-style-type: none">• The service stored liquid nitrogen on the premises. The room in which the cylinder was stored had no windows and was not ventilated, and the service had not risk assessed how it was stored.• The service was not able to show that references had been received and reviewed prior to the recruitment of some staff at the service. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>