

# Salisbury Avenue Healthcare

## Inspection report

7 Salisbury Avenue  
Barking  
IG11 9XQ  
Tel: 08444778704  
[www.salisburyavenue.nhs.uk](http://www.salisburyavenue.nhs.uk)

Date of inspection visit: 1 December 2022, 15  
December 2022, 22 December 2022, 9 January 2023  
Date of publication: 11/05/2023

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		Inadequate	
Are services safe?		Inadequate	
Are services effective?		Inadequate	
Are services caring?		Requires Improvement	
Are services responsive to people's needs?		Inadequate	
Are services well-led?		Inadequate	

# Overall summary

We carried out an announced comprehensive site inspection at Salisbury Avenue Healthcare on 1 December 2022. This was accompanied by a remote inspection on 15 December 2022, 22 December 2022 and 9 January 2023. Overall, the practice is rated as inadequate.

Safe - inadequate

Effective - inadequate

Caring - requires improvement

Responsive - inadequate

Well-led - inadequate

Following our previous inspection on 15 January 2016 and a subsequent follow up inspection of 6 September 2016 and a focused inspection on 29 May 2019, the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Salisbury Avenue Healthcare on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We carried out this inspection in line with our inspection priorities. Further concerns were raised following the 1 December 2022 inspection.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video and telephone conferencing.
- 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 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
- information from the provider, patients, the public and other organisations.

We found that:

# Overall summary

- The practice did not have adequate systems, practices and processes to keep people safe and safeguarded from abuse.
- The systems to assess, monitor and manage risks to patient safety were inadequate.
- Staff did not always have the information they needed to deliver safe care and treatment.
- The practice did not have systems for the appropriate and safe use of medicines.
- The practice did not have an adequate system to learn and make improvements when things went wrong.
- The practice had not taken steps to improve in all the areas of lower than average performance identified in the national GP patient survey.
- The practice could not demonstrate how they complied with the accessible information standard.
- Patients were not always involved in decisions about care and treatment.
- The practice was unable to demonstrate that staff had the skills, knowledge and experience to carry out their roles.
- Patients' needs were not always assessed, and care and treatment was not always delivered in line with current legislation, standards and evidence-based guidance.
- Complaints were not always used to improve the quality of care.
- Leaders could not demonstrate that they had the capacity and skills to deliver high quality sustainable care.
- The overall governance arrangements were inadequate.
- The practice culture did not adequately support high quality sustainable care.

We found breaches of regulations. The provider **must**:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the provider **should**:

- Implement a system to improve the identification of and support of carers and young carers in the practice.
- Consider implementing a language translate option on the practice website.
- Review and improve cervical screening uptake.
- Review and improve childhood immunisations.
- Take action to respond to areas of low patient satisfaction.
- Consider patient satisfaction surveys.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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

# Overall summary

**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 using video conferencing facilities and undertook a site visit. The CQC lead inspector was accompanied onsite by a practice nurse specialist adviser. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Salisbury Avenue Healthcare

Salisbury Avenue Healthcare is situated at 7 Salisbury Avenue, Barking, IG11 9XQ and located in Barking in the London Borough of Barking & Dagenham. The practice operates from a converted house, off Barking High Street. The ground floor is accessible to wheelchair users with assistance from staff. On the ground floor, there is the waiting area, one patient toilet, a GP consulting room and the practice nurse's treatment room. A second GP consulting room is up a flight of stairs and this level also includes an administration office, a kitchen and staff toilet. The practice is close to public transport and there is some free and disabled on street parking nearby in an area where parking is otherwise restricted. There is no branch surgery.

It is one of the 40 member GP practices in NHS Barking and Dagenham Integrated Care Board (ICB) and is a part of a wider network of practices called West One Primary Care Network (PCN) of seven neighbouring practices. The practice has approximately 4,968 registered patients. Services are provided under a General Medical Services (GMS) contract with NHS England. The practice is registered with the Care Quality Commission to carry on the regulated activities of treatment of disease, disorder or injury; diagnostic and screening, family planning and surgical procedures.

The practice serves a predominantly Asian population (45%). A further 33% of the local population identifies itself as White and 15% as Black, 4% mixed and the rest as other. Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth most deprived decile of areas in England (four of 10). The lower the decile, the more deprived the practice population is relative to others.

The partnership is made up of two GPs, one female lead GP partner provides four clinical sessions a week and one male GP partner provides four to five sessions a week. There are six male and female GPs working at the practice in addition to the two GP partners who provide 14 clinical sessions a week. Supporting the GPs is one Advanced Nurse Practitioner who provides six hours a week every Thursday and Friday and three other practice nurses. Also recruited is one physiotherapist who works once a week, two clinical pharmacists and one pharmacy technician. Administration staff include one part-time compliance manager and one full-time assistant manager and they are supported by six administration and reception staff.

The practice is open between 8.00am and 6.30pm on Monday to Friday. They do not provide extended hours as these are now available through Together First, the local GP federation. The practice offers a range of appointment types including telephone consultations and advance appointments. Out of hours services are provided by PELC from 6.30pm to 8.00am.

This section is primarily information for the provider

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that were not being met.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Family planning services	
Surgical procedures	We are considering the appropriate regulatory response to the issues we identified during this inspection. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.
Treatment of disease, disorder or injury	

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Surgical procedures	
Treatment of disease, disorder or injury	We are considering the appropriate regulatory response to the issues we identified during this inspection. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.
Family planning services	