# Charlton House Medical Centre

## Inspection report

581 High Road
London
N17 6SB
Tel:
www.charltonhouse.medicalcentre.co.uk

Date of inspection visit: 22 September 2021
Date of publication: 26/11/2021

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 | Inspected but not rated |
|---|---|
| Are services safe? | **Inspected but not rated** |
| Are services effective? | **Inspected but not rated** |
| Are services caring? | **Inspected but not rated** |
| Are services responsive to people's needs? | **Inspected but not rated** |
| Are services well-led? | **Inspected but not rated** |

# Overall summary

We carried out an announced focussed inspection at Charlton House Medical Centre on 22 September 2021. The practice was previously inspected on 8 June 2021 with remote medical records searches carried out on 26 May and 18 June 2021.

Following our previous inspection, the practice was rated inadequate overall and inadequate for providing safe, effective, responsive and well-led services, it was rated as requires improvement for providing caring services and placed into special measures. We also rated the practice as inadequate for all population groups. We issued Warning Notices for breaches of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance). The practice was required to address these concerns by 20 September 2021.

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

We have not reviewed the ratings for the key questions or for the practice overall as this was a focussed follow-up inspection to assess whether the breaches of regulations outlined in the Warning Notices had been rectified. Nor have we reviewed our findings for the individual patient population groups. We will consider the practice's ratings in all key questions and overall and for the population groups when we carry out a full comprehensive inspection at the end of the period of special measures.

**Why we carried out this inspection**

This was a focused inspection to follow up on Warning Notices we issued following our previous inspection on 8 June 2021 in relation to breaches of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance). The practice was required to address these concerns by 20 September 2021.

**How we carried out the inspection**

Throughout the pandemic CQC has continued to regulate services and respond to risk to patients. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

**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:

- Insufficient action had been taken since our comprehensive inspection in June 2021, such that:
  - Arrangements for monitoring patients prescribed high risk medicines continued to place patients at risk of harm.
  - Arrangements for monitoring and review of patients with long-term conditions continued to place patients at risk of harm.

# Overall summary

- Arrangements for monitoring and review of patients experiencing poor mental health (including people with dementia) continued to place patients at risk of harm.
- Although the practice had introduced a formal programme of clinical meetings there was no evidence of links with multidisciplinary teams to adequately review treatment and monitoring of patients with complex medical issues this continued to place patients at risk of harm.
- There was no active or adequate oversight of GPs, GP locums and nurses working in the practice which continued to place patients at risk of harm.
- Insufficient action had been taken since our comprehensive inspection in June 2021, such that there were no peer reviews of work undertaken by GPs, GP locums, nurses and healthcare assistants which continued to place patients at risk of harm.

- The practice had completed one full clinical audit, however it had not created a formal plan to audit clinical areas specific to the needs of the practice population identified as at risk during our previous inspection which continued to place patients at risk of harm.
- On 27 September 2021 the newly appointed clinical lead emailed CQC to advise he had withdrawn from his role with the practice leaving no active clinical lead to direct clinical staff and to make clinical decisions, this placed patients at risk of harm.

- Action had been taken since our comprehensive inspection in June 2021, such that

- The practice provided us with evidence of clinical equipment having undergone re-calibration testing within the last 12 months.
- The practice provided evidence of a fire risk assessment being carried out within the last 12 months.
- The practice provided us with evidence of a premises/security risk assessment being carried out within the last 12 months.
- The practice provided us with evidence of a health and safety risk assessment being carried out within the last 12 months.

- The practice provided us with evidence of an infection prevention and control audit having been carried out within the last 12 months.
- The practice had updated its infection prevention and control policy to provide appropriate contact details for Public Health England.
- The practice had acted on issues identified in its most recent infection prevention and control audit.
- The practice provided evidence of staff having completed infection prevention and control training.
- The practice had developed and distributed GP locum packs.
- Clinical and practice meetings were taking place, each had agenda items for important issues to be discussed.
- The practice had reviewed and widened the scope of issues it recorded as significant events.
- The practice's performance for cervical screening of eligible patients had improved.
- Whilst the premises occupied remained unfit for purpose the practice had taken what action it could to improve the facilities to patients benefit. It also provided us with evidence of plans to move into purpose-built premises within 12 months.
- A system had been implemented to receive and distribute clinical alerts to all relevant staff including GP locums.

We deemed this to be not sufficient to meet the requirements of the Warning Notices and the regulations.

A final version of this report, which we will publish in due course, will include full information about our regulatory response to the concerns we have described.

# Overall summary

**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** | Not inspected |
| **People with long-term conditions** | Not inspected |
| **Families, children and young people** | Not inspected |
| **Working age people (including those recently retired and students)** | Not inspected |
| **People whose circumstances may make them vulnerable** | Not inspected |
| **People experiencing poor mental health (including people with dementia)** | Not inspected |

## Our inspection team

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

## Background to Charlton House Medical Centre

Charlton House Medical Centre is located in North London at:

581 High Road,

Tottenham,

London,

N17 6SB

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

The practice is situated within the North Central London Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to approximately 6,800 patients.

Information published by Public Health England report deprivation within the practice population group as two on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

It caters for a high proportion of patients with type 2 diabetes: 11%, compared to a local average of 6% and the national average of 7%.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

Extended access is provided locally by four GP Hubs, where late evening and weekend appointments are available. Patients can book appointments with the local hubs by contacting the practice. When the practice is closed, patients are redirected to a contracted out-of-hours service.