

Halbutt Street Medical Practice

Inspection report

Tel: 02085921544

2 Halbutt Street

Dagenham

Essex

RM9 5AS

Date of inspection visit: 11 January 2019

Date of publication: 22/03/2019

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.

Overall summary

This practice is rated as inadequate. (Previous rating October 2018 – Inadequate)

We carried out an announced focused inspection at Halbutt Street Medical Practice on 11 February 2019. This was to follow up on breaches of regulations set out in Warning Notices which were served on the provider on 7 November 2018. All five key questions were inspected, however only the issues identified in the Warning Notice were followed up on during this inspection. A full comprehensive inspection of this practice will follow within six months after the original comprehensive inspection on the 7 November 2018.

At this inspection we found:

- Some of the issues identified in the previous Warning Notices had been addressed, including some of those relating to infection control, patient feedback and fire safety and those relating to medicines and medical records management, staff roles, employment checks and cervical screening.
- Other issues identified had not been effectively addressed, in particular, those relating to safeguarding.
- The practice still scored below average for some areas in the national GP patient survey; specifically, regarding consultations with doctors and nurses.
- The practice informed us action had been taken to address telephone access delays and delays after patients' appointment times were yet to produce demonstrably improved results.
- There was an inconsistent coding of patients, for example of those patients who failed to attend hospital appointments, meaning there was a risk that necessary treatment would not be followed up on.
- There was no effective policy to ensure vulnerable adults were identified and correctly coded on the clinical management system.
- There was no clear recall system for vulnerable adults with long term conditions.

- There was no effective palliative care register in place.

The areas where the provider **must** make improvements as they are in breach of regulations are:

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

This practice will remain in special measures. Where a service is rated as inadequate for one of the five key questions or one of the six population groups and after re-inspection has failed to make sufficient improvement, and is still rated as inadequate for any key question or population group, we place it into special measures.

Services placed in special measures will be inspected again within six months. If, after re-inspection, the service has failed to make sufficient improvement, and is still rated as 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 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.

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

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

Our inspection team

Our inspection team consisted of a CQC inspector, a GP specialist adviser and a Practice Manager specialist adviser.

Background to Halbutt Street Medical Practice

Halbutt Street Surgery provides NHS primary care services to approximately 6750 people and is part of the NHS Barking and Dagenham Clinical Commissioning Group (CCG). The service is provided through a general medical services (GMS) contract. The practice is well served by local bus routes and permit free parking is available on surrounding streets.

The practice is led by one male and one female GP partners and has two regular male locums collectively working 25 clinical sessions per week. They are supported by one full time female practice nurse, one part-time female practice nurse and a part time female health care assistant (HCA), practice manager and four reception/administrative staff.

The practice is open between 8am and 7pm Monday to Friday. The practice telephone lines are open between 8am and 6.30pm. Appointments are available from 9am to 12.30pm every morning, with the exception of Tuesdays when the appointments start from 8.30am. Evening appointments are from 3pm to 6.30pm daily. Extended hours appointments are offered on Mondays, Tuesdays and Fridays from 6.30pm to 7.30pm. Out of hours services are provided by the Out of Hours GP Hub and NHS 111 services when the practice is closed. Information on the Out of Hours services is provided to patients on the practice website as well as through practice leaflets and on posters.

Information taken from the Public Health England practice age distribution shows the population distribution of the practice is similar to that of other practices in England, with the exception of a higher proportion of children between the ages of zero and 19 years. The life expectancy of male patients is 76 years, which is one year less than the CCG and three years less than the national average. The female life expectancy at the practice is 81 years, which is the same as the CCG average and two years less than the national average of 83 years. Information published by Public Health England (PHE) rates the level of deprivation within the practice population group as six on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

Halbutt Street Practice is registered to provide the following regulated activities.

- Diagnostic and Screening Procedures
- Treatments of Disease, disorder or injury
- Family planning
- Surgical procedures

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 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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:ire safety risks, infection control and safeguarding.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had systems or processes in place that operating ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:•Effective action had not been taken on all areas of below average performance.The registered person had systems or processes in place that operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:• Risks we found had not been identified and addressed by practice systems.• There was a lack of systems to allow effective oversight of policies, procedures and governance to manage safety risks.The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services. In particular:• Feedback on telephone access, appointment systems and delays.</p>