

Wood Street Health Centre

Inspection report

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Date of inspection visit: 25 September 2019 and 3 October 2019 Date of publication: 05/12/2019

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.

Ratings

Overall rating for this location	Inadequate	
Are services safe?	Requires improvement	
Are services effective?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Inadequate	
Are services well-led?	Inadequate	

Overall summary

We carried out an announced comprehensive inspection at Wood Street Health Centre on 25 September and 3 October 2019 to follow up on breaches of regulation identified in medicines management, clinical governance, patient satisfaction, infection control and recruitment and training processes, identified in a comprehensive inspection on 24 January 2019, where the practice was placed in special measures.

This inspection in October 2019 found that there were still improvements that were required to be made.

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 inadequate overall.

We rated the practice as **requires improvement** for providing safe services because:

- Recruitment procedures were not effective.
- The system for monitoring and managing the two-week cancer referral process was not effective.
- There were flaws with the cold chain procedures.
- Learning from significant events was not adequately shared with relevant staff members.

We rated the practice as **requires improvement** for providing effective services because:

- Quality improvement was not comprehensive.
- There was insufficient oversight of high exception reporting rates and areas of low QOF achievement.

We rated the practice as **good** for providing caring services because:

• Feedback from patients was generally positive about the way staff treated people.

• The practice respected patients' privacy and dignity.

We rated the practice as **inadequate** for providing responsive services because:

 There was insufficient attention given to low patient satisfaction with access to services, which had been an ongoing concern identified by CQC in 2016.

We rated the practice as **inadequate** for providing well-led services because:

- Changes made since the last inspection had not been embedded since the last inspection.
- There disjointed working between staff members.
- There was a lack of oversight in training, recruitment and governance.
- There was insufficient monitoring and management of patient satisfaction.

Whilst the practice had made improvements following their inspection in January 2019, further improvements are required. The practice therefore remains 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.

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.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

On the first day of inspection our inspection team consisted of a lead CQC inspector who was supported by two advanced nurse practitioner specialist advisors. The second day of inspection included a lead inspector and a GP specialist advisor.

Background to Wood Street Health Centre

Wood Street Health Centre is situated within NHS Waltham Forest Clinical Commissioning Group (CCG). The practice provides services to approximately 10,800 patients in the Walthamstow area of East London under a Personal Medical Services (PMS) contract. The provider also has a branch site, known as Forest Medical Centre, which patients can attend for appointments.

The provider – Waltham Forest Community and Family Health Services Limited, is registered with the CQC to carry on the following regulated activities: Diagnostic and screening procedures, Family planning, Maternity and midwifery services and Treatment of disease, disorder or injury.

The clinical team includes one male principal GP, who is supported by a mix of six male and female GPs, who complete a total of 34 clinical sessions a week six nurses and one trainee nurse, who complete a combined total of 21 sessions per week. There is also two pharmacists, a practice manager and reception manager and a team of reception/administration staff members.

The practice's opening times are 8am to 6:30pm Monday to Friday and 8:30am to 1:30pm on a Saturday.

Appointment times are held between 8:30am and 12pm and 4pm to 6:30pm daily.

Patients telephoning when the practice is closed are directed to the local out-of-hours service provider.

Information published by Public Health England rates the level of deprivation within the practice population group as three on a scale of one to ten. Level one represents the highest level of deprivation and level ten the lowest. In England, people living in the least deprived areas of the country live around 20 years longer in good health than people in the most deprived areas.

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	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment How the regulation was not being met The provider did not have systems to ensure that the cold chain was effectively managed.
	There was insufficient attention paid to ensuring adequate monitoring had taken place before prescribing high risk medicines. This was in breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good
Family planning services	governance
Maternity and midwifery services	How the regulation was not being me
Treatment of disease, disorder or injury	The practice did not have effective systems to ensure learning was shared with relevant staff members and insufficient attention was paid to mitigating risks in the practice.
	The practice had implemented improvements but due to time constraints were unable to demonstrate they had all been successfully embedded.
	This was in breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.