

Tudor Lodge 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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at Tudor Lodge Health Centre on 11 December 2019 as part of our inspection programme, because the practice had changed from being run by a single GP to being run as a partnership.

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 requires improvement overall and requires improvement for all population groups.

- We have rated the practice as requires improvement for Safe because arrangements to keep people safe were not consistently implemented, including for recruitment checks, medicines management and for staff training.
- We rated the practice as requires improvement for Effective because data showed that the practice was below average/target for several measures of care in 2018/19. Although action plans were in place unverified data did not show improvement to in line with target/2018/19 averages. The practice had a programme of learning and development to provide staff with the skills, knowledge and experience to carry out their roles, but was unable to demonstrate that this was fully completed.
- We have rated Caring as good because staff dealt with patients with kindness and respect and involved them in decisions about their care.
- We have rated Responsive as good because the practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

- We have rated Well-led as good because although there were areas for development, in general, the way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We have rated all of the population groups as requires improvement for Effective, because some of the issues impact all patients. A rating of requires improvement for this key question means that the population groups are all rated as requires improvement.

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

- Ensure care and treatment is provided in a safe way to patients.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.

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

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

- Continue to improve outcomes for patients with diabetes and uptake of learning disability health checks, immunisations and screening.
- Develop governance processes to ensure training is completed and documented, complaints management is fully documented, and that governance documentation is complete and clear, including arrangements for whistleblowing.

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

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 Tudor Lodge Health Centre

Tudor Lodge Health Centre provides primary medical services in Southfields to approximately 9110 patients and is one of 44 practices in Wandsworth Clinical Commissioning Group (CCG).

The practice population is in the sixth least deprived decile in England. The proportion of children registered at the practice who live in income deprived households is 28%, which is higher than the CCG average of 21%, and for older people the practice value is 26%, which is higher than the CCG average of 23%. The practice has a larger proportion of patients aged 0 to 44 years than the CCG average, and a much smaller proportion of patients aged 45 to 85+ years. Of patients registered with the practice, the largest group by ethnicity are white (66%), followed by Asian (15%), black (11%), mixed (5%) and other non-white ethnic groups (3%).

The practice operates from the ground floor of a two-storey purpose built premises (the first floor is used by local NHS community services). Car parking is available on site and in the surrounding streets. The practice has access to five doctors' consultation rooms and one nurse consultation room.

The practice team at the surgery is made up of one full time male GP and one full time female GP (who are the practice principals) and two part time female salaried GPs. In total 32 GP sessions are available per week. In

addition, the practice also has three part time female nurses and two part time female healthcare assistants. The practice team also consists of a practice manager and six reception/administrative staff.

The practice operates under a Personal Medical Services (PMS) contract, and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract), including providing the violent patient scheme.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 8am to 1pm every morning, and 3pm to 6.30pm every afternoon. Patients can contact clinical staff by phone between 1pm and 3pm. Extended hours surgeries are offered between 6.30pm and 8pm Monday to Friday and from 8.30am to 11am on Saturdays.

When the practice is closed patients are directed to contact the local out of hours service.

The practice is registered as a partnership with the Care Quality Commission to provide the regulated activities of diagnostic and screening services; maternity and midwifery services; treatment of disease, disorder or injury; surgical procedures; and family planning.

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 Surgical procedures Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment 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: arrangements to keep people safeguarded from abuse, manage medicines and ensure staff had completed necessary training were not consistently implemented.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed The registered person's recruitment procedures did not ensure that only persons of good character were employed. In particular: the practice had failed to carry out seek and retain evidence of satisfactory evidence of conduct in previous employment concerned with the provision of services relating to (a) health or social care, (b) children or vulnerable adults.