

# Nexus Health Group

## 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 summary

We carried out an announced comprehensive inspection at Nexus Health Group on the following dates:

Provider inspection at Princess Street Group Practice – 1 November 2018

Manor Place Surgery – 7 November 2018

Princess Street Group Practice – 14 November 2018

Surrey Docks Health Centre – 15 November 2018

Aylesbury Medical Centre – 20 November 2018

The Dun Cow Surgery – 21 November 2018

Commercial way Surgery – 22 November 2018

Decima Street Surgery & Artesian Health Centre - November 2018

We rated the practice inadequate and they were placed into special measures. Because of the concerns found at the inspection, we served the provider with two warning notices for breaches of regulation 12 and 17 of the Health and Social Care Act 2008 (2014 Regulations).

This was an announced focused inspection on 13 February 2019. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements as detailed in the warning notices issued on 12 November 2018.

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.

This inspection was an unrated inspection to follow up on warning notices and the rating remains unchanged.

At this inspection we found:

- The provider had a backlog of patients who required a review of their medication, including some patients on high risk medicines. The provider had designed systems which aimed to ensure that patients had medication reviews in line with guidance going forward. However, the system did not require clinical intervention for

approximately two to three months after the missed review and did not outline how the practice would manage patients on high risk medicines who repeatedly failed to attend for reviews.

- Systems had been developed to introduce effective oversight of clinical tasks, correspondence and results. Safety monitoring had been introduced for systems used to enable non- clinical staff to review and workflow clinical documentation to GPs.
- The provider's two week wait referral systems had been improved to ensure that they were failsafe.
- Risk management systems related to legionella, fire and the oversight of emergency equipment were now in place.
- Prescriptions were secure and their use monitored. The provider had implemented systems to ensure periodic reviews of uncollected prescriptions.
- The provider had developed systems to check locum staff mandatory training was in place although we saw one instance where a long-term locum GP had not completed basic life support training in the last 12 months.
- Both clinical and managerial support had been provided to Manor Place Surgery.
- The provider had worked to improve the systems around the identification and prioritisation of risk.

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

- 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.

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

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

- Review systems around locum staff training.

A further inspection will be undertaken to ensure that the provider has complied with the conditions as set out above.

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

# Overall summary

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

## Population group ratings

## Our inspection team

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

## Background to Nexus Health Group

Nexus Health Group head office address is located at 2 Princess Street, Elephant and Castle, London, SE1 6JP. The eight sites are located at the following addresses:

Princess Street Group Practice - 2 Princess Street, Elephant and Castle, London, SE1 6JP  
Manor Place Surgery - 1 Manor Place, London, SE17 3BD  
Surrey Docks Health Centre - 12-13 Blondin Way, London SE16 6AE  
Aylesbury Medical Centre - Thurlow Street, London SE17 2XE  
The Dun Cow Surgery - 279 Old Kent Road, London, SE1 5LU  
Commercial Way Surgery - 109 Commercial Way, London SE15 6DB

Decima Street Surgery - 6 Decima Street, London, SE1 4QX

Artesian Health Centre - 138 Grange Road, London, SE1 3GF

We were told that the intention was to organise services in a way that enabled patients to be seen at multiple sites and to undertake joint working across sites. However, this was still in development and at present patients were linked to a particular practice or group of practices that worked together historically. For example, Aylesbury Medical Centre, Dun Cow Surgery and Commercial Way Surgery had previously merged into the Aylesbury partnership and shared staff and back office functions across sites. Decima Street Surgery and Artesian Health Centre operated in the same way under Bermondsey and Lansdowne Medical Mission 2.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning, surgical procedures and treatment of disease, disorder or injury. These are delivered from all eight sites.

Nexus Health Group's eight sites are situated within Southwark Clinical Commissioning Group (CCG) and provide services to approximately 74,000 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a partnership comprised of 15 partners including two non-clinical partners. Authority is delegated from the partnership which is comprised of a chair, the Chief Officer and board members; including clinical leads for each site. Authority is then delegated to locality managers who have responsibility for a number of sites and lead on a number of areas across Nexus. At site level there are operations managers covering between one and two sites and each site has a team leader. There was a vacancy for a team leader and an operations manager at the time of our inspection.

The staffing at each site is:

Surrey Docks - 43 GP sessions including six locum sessions, 3 part time Health Care Assistants (HCA) and a part time nurse working 23 hours per week.

Princess Street - 44 GP sessions, a full time HCA, full time nurse, part time nurse and full time advanced nurse practitioner

Manor Place surgery - 25 GP sessions, a full time and a part time nurse and two-part time HCAs

Aylesbury Medical Centre, Dun Cow Surgery and Commercial Way - 70 GP sessions plus 12 registrar sessions, three part-time pharmacists, an advanced nurse practitioner who works 42 hours per week an elderly Care Nurse working 30 hours per week, one full time and one part-time HCA and six full time nurses.

Decima Street Surgery and Artesian Health Centre - 79 GP sessions, two full time practice nurses, a part time nurse and a full-time nurse practitioner, part time HCA and full time clinical pharmacist

The practice is a member of Quay Health Solutions Federation.

There are a higher than average number of patients of working age registered with Nexus Health Group compared with the national average and lower numbers of patients over the age of 65. The age demographics were comparable to those of other practices within the CCG. The percentage of patients not in employment was

over double the national average and the practice has a slightly lower proportion of patients with long standing health conditions. The National General Practice Profile states that 21% of the practice population is from a black ethnic background with a further 15% of the population originating from Asian minority groups, 10% of patients are from mixed or other non-white ethnic groups. This information is historic and likely only relates to Princess Street Group Practice location. 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 levels of deprivation and level ten the lowest. The practice has almost double the levels of deprivation affecting children and older people compared to the national average. Again, this information is historic and only relates to the Princess Street location. The provider told us that annual patient turnover across the eight sites ranged from 10 – 20%.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>How the regulation was not being met:</b></p> <p>Medicines were not being managed in a safe way as not all patients who were prescribed high risk medicines and were overdue monitoring tests, had the required monitoring undertaken and medication review completed as set out in local and national guidance and recommendations.</p> <p>This is in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>How the regulation was not being met:</b></p> <p>The provider did not have systems and processes in place to ensure patient who are taking medicines which require regular monitoring and medication reviews are identified, called/recalled, monitored and reviewed in accordance with the relevant local and national clinical guidelines.</p> <p>The provider did not have systems and process in place to ensure that patients who failed to engage with the monitoring process had the risk of continued prescribing assessed the risk of continued prescribing assessed.</p> <p>This is in breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>