

Central Surgery

Inspection report

Surbiton Health Centre
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Date of inspection visit: 21 April 2022
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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 to people's needs?

Good



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced inspection at Central Surgery on 21 April 2022. Clinical records reviews were carried out remotely on 20 April 2022. Overall, the practice is rated as requires improvement.

Safe - Requires Improvement
Effective - Requires Improvement
Caring - Good
Responsive - Good
Well-led - Requires Improvement

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

Why we carried out this inspection

We undertook this inspection as part of a random selection of services rated Good and Outstanding to test the reliability of our new monitoring approach.

How we carried out this inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. 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. This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

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 have rated this practice as requires improvement overall

We found that:

- The practice had not completed monitoring for all patients on high risk medicines.
- The practice had not completed monitoring for all patients with long-term conditions.
- The practice had not acted in response to all MHRA alerts.
- There was no patient participation group or patient feedback process.
- Some staff had not completed recommended training.
- There was no clear governance or quality assurance process in place for patient monitoring, significant events, complaints, safeguarding or patient feedback.
- Patients had given positive feedback about the levels of access at the practice and the care provided by clinicians.
- The premises were clean and well organised.

Overall summary

- The practice responded to and engaged well with complaints and feedback from patients.

We found breaches of regulations. The provider must:

- 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.

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

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff and undertook a site visit. The team included a GP specialist who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Central Surgery

Central Surgery is located in Surbiton at:

Surbiton Health Centre, Ewell Road, KT6 6EZ

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 and surgical procedures.

The practice is situated within South West London Clinical Commissioning Group and delivers Personal Medical Services (PMS) to a patient population of about 13,000. This is part of a contract held with NHS England. The practice team is made up of 12 GPs (three Partners), four nurses, one senior pharmacist, two Primary Care Network (PCN) pharmacists, one paramedic, three healthcare assistants, one PCN physiotherapist and two PCN social prescribers. The practice manager and assistant are supported by 17 administration and reception staff.

The practice is open Monday to Friday from 7.30am to 6.30pm. Extended hours surgeries are offered between 8am and 8pm most days and there is an out of hours service available 24 hours a day. The practice operates from a 3-storey purpose built premises, which also houses three other practices and a range of community services. Car parking is available on-site. The reception desk, waiting area and consultation rooms are situated on the ground floor. The practice manager's office and administrative office are situated on the second floor. The practice has access to 13 doctors' consultation rooms and three treatment rooms.

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 were not being met. The provider must send CQC a report that says what action they are 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 <ul style="list-style-type: none">• Some staff had not completed safeguarding training and the safeguarding register had not been reviewed and was not up to date.• Some patients on high risk medicines were not being safely monitored.• The infection control processes were not effective.• MHRA alerts were not always acted on to ensure patient safety. |
| Regulated activity | Regulation |
| Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury | Regulation 17 HSCA (RA) Regulations 2014 Good governance <ul style="list-style-type: none">• There was a lack of governance. There were no clear audits of significant events, safeguarding, complaints, patient feedback and phone access data.• There was no patient participation group for feedback. |