

Langstone Way Surgery

Inspection report

28 Langstone Way

London

NW7 1GR

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www.langstonewaysurgery.nhs.uk

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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

Inspected but not rated



Are services safe?

Inspected but not rated



Are services well-led?

Inspected but not rated



Overall summary

We carried out an announced inspection of Langstone Way Surgery on 14 September 2021. We have not revised the ratings from our previous inspection, which remain:

Overall, the practice is rated as Requires improvement.

The ratings for each key question are:

Safe - Requires improvement

Effective - Requires improvement

Caring - Good

Responsive – Requires improvement

Well-led – Inadequate

The full report of our previous inspection on 9 June 2021 can be found on our website at:

<https://www.cqc.org.uk/location/1-540666441/reports>

At our previous inspection we identified concerns over governance at the practice, regarding the management of Medicines and Healthcare products Regulatory Agency (MHRA) alerts and a concerning backlog of correspondence in clinician inboxes. We found the practice did not have an effective system in place to ensure that MHRA alerts were consistently communicated and actioned. In addition, we were not assured clinical correspondence was reviewed and actioned in a timely manner.

We served a warning notice under Section 29 of the Health and Social Care Act 2008 in relation to breaches of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and a requirement notice in relation to Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The practice told us it had taken immediate steps to address our concerns and subsequently sent us a plan of the actions taken.

Why we carried out this inspection

We carried out this focused inspection on 14 September 2021 looking at the identified breaches set out in the Regulation 17 warning notice, under the key question Well-led, and to review the action taken by the practice. We found the practice had taken sufficient action to deem the warning notice met. We did not review the Regulation 12 requirement notice and have not revised ratings for the practice. We will consider those issues when we carry out a further follow up inspection in due course.

How we carried out the inspection

Overall summary

Throughout the pandemic, the Care Quality Commission (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:

- A site visit on 14 September 2021 to review patients' records with the practice manager and to consider the actions taken by the provider;
- A remote clinical review of patients' records and the clinical correspondence system on 09 September 2021, and discussion between the lead GP and a CQC GP specialist advisor (GP SpA) regarding actions taken in response to the warning notice.
- A remote review of relevant policies and protocols developed or revised by the provider since our last 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 practice, patients, the public and other organisations.

We found that:

- The practice had identified and contacted all patients prescribed Sodium-Glucose Co-Transporter-2 (SGLT-2) inhibitors to warn them of the potential associated risk of Fourniere's gangrene.
- The practice had made contact with all patients prescribed omeprazole and clopidogrel and changed these patients from omeprazole to lansoprazole where appropriate (one patient declined despite being made aware of the risks as they did not wish to change).
- The practice had developed and implemented an in-house policy and protocol for managing MHRA alerts, and provided evidence that this was discussed at clinical meetings as a standard agenda item.
- The practice had cleared the backlog of correspondence which was outstanding on the Docman system.

We shall programme a further inspection in due course to check and confirm the changes made have been fully established.

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	Not inspected 
People with long-term conditions	Not inspected 
Families, children and young people	Not inspected 
Working age people (including those recently retired and students)	Not inspected 
People whose circumstances may make them vulnerable	Not inspected 
People experiencing poor mental health (including people with dementia)	Not inspected 

Our inspection team

Our inspection team was comprised of a CQC lead inspector, a second CQC inspector and a GP specialist advisor.

Background to Langstone Way Surgery

Langstone Way Surgery is located at 28 Langstone Way, Barnet, London, NW7 1GR. The practice is situated a short walking distance from Mill Hill East underground station and is also accessible on several local bus routes.

The practice is registered with the CQC to provide the Regulated Activities: Diagnostic and screening procedures; Maternity and midwifery services; Treatment of disease, disorder or injury.

The practice is part of the North Central London Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 8500.

Information published by Public Health England report deprivation within the practice population group as 8 on a scale of 1 to 10. Level one represents the highest levels of deprivation and level 10 the lowest. The practice population is predominantly from either a white (59.2%) or Asian (21%) background.

There is a team of seven GPs who work at the practice, with two GPs as partners. The practice has four nurses, three of whom are trained as advanced nurse practitioners. The GPs are supported by a team of ten reception/administration staff. The practice manager provides managerial oversight. The practice has additional support from colleagues within the Primary Care Network (PCN), including pharmacists, social prescribers, a physiotherapist and a care co-ordinator.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered an appointment at the practice.

Extended hours access is provided by the practice on Tuesday evenings, where pre-bookable later evening appointments are offered between 6:30pm – 7:30pm. In addition, patients have access to out of hours appointments from 6:30pm – 9pm Monday to Friday and 8am – 9pm at weekends and bank holidays under an extended hours service provided by the CCG and operated at several GP practices in Barnet.