

The Westway Surgery

Inspection report

13 Westway
Shepherds Bush
London
W12 0PT
Tel: 020 8743 3704
thewestwaysurgery.org.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 summary

We carried out an announced comprehensive inspection at Westway Surgery on 13 June 2019. The practice was previously inspected on 8 January 2019. Following this inspection, the practice was rated Inadequate overall and in safe, effective and well-led domains and placed in special measures. We issued warning notices for breaches of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance). The practice was required to address these concerns by 15 May 2019.

We did not review the ratings awarded to this practice at this inspection.

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 found the provider had not made sufficient improvements in providing safe services regarding:

- The provider did not have an effective system in place to safely manage patients who had been prescribed high-risk medicines.
- The provider did not have an effective system to safely manage infection prevention and control (IPC) practices.

We found the provider had improved some systems to keep patients safe regarding:

- The practice had improved its systems for the management of emergency medicines.
- Receptionists have undertaken training and given guidance on identifying red flag signs for deteriorating or acutely unwell patients.

We found the provider had made some improvements for providing effective services regarding:

- The provider had improved its systems and processes regarding clinical governance and had adhered to national guidelines.
- The provider had increased their clinical capacity, by two GP sessions each week and by one session each week for the practice nurse, to meet patient demand for appointments.

- The provider had undertaken a comprehensive schedule of regular training for all staff since our inspection on 8 January 2019.

However we found:

- The provider could not demonstrate that all staff had the skills, knowledge and experience to carry out their roles.

We found the provider had improved in providing well-led services because:

- The practice had a clear vision, that was supported by a credible strategy.
- The practice culture supported the drive to achieving good quality sustainable care.
- The practice could demonstrate they had effective processes in place for managing risks, issues and performance.
- The provider had improved the support available for carers.
- The provider had improved its provision of services for patients who have additional communication needs.

The areas where the provider must make improvements are:

- The provider must ensure and demonstrate they have systems in place to safely and effectively manage patients who have been prescribed high-risk medicines.
- The provider must ensure and demonstrate they have systems in place to safely and effectively manage infection prevention and control (IPC) practices in line with national guidelines.
- The provider must ensure that persons providing care or treatment to service users have the qualifications and experience to do so safely.

The service will remain in special measures until we have undertaken the next inspection and this will be reviewed at that time. This will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

Overall summary

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, a second CQC inspector, a practice nurse specialist advisor and a practice manager specialist advisor.

Background to The Westway Surgery

The Westway Surgery is located at 13 Westway, Shepherds Bush, London, W12 0PT. The surgery has good transport links and there is a pharmacy located nearby. The practice is based in an adapted residential building.

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

The practice provides NHS primary care services to approximately 3446 patients and operates under a General Medical Services (GMS) contract. The practice is part of NHS North West London Clinical Commissioning Group (CCG).

The practice is registered with CQC as an individual provider, and the regulated activities provided are diagnostic and screening procedures, treatment of disease, disorder or injury and maternity and midwifery services.

The practice staff comprises a lead GP who is salaried, a GP partner and one long-term female GP locum (1.75 whole time equivalent (WTE) combined). The medical team are supported by a practice nurse (0.4 WTE). There is a practice manager who is a partner, an assistant practice manager, and four administration/reception staff.

The practice population is in the second most deprived decile in England. There are higher than average numbers of patients in the 25 to 44 age range, with the number of people over the age of 75 lower than the national average. Male life expectancy is 78 years compared to the national average of 79 years. Female life expectancy is 84 years compared to the national average of 83 years.

Information published by Public Health England, rates the level of deprivation within the practice population group as two, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice reception is open Monday to Friday between 9.30am-6.30pm apart from Wednesday when the practice closes at 1.30pm. Consultation times are between 9.30-1.30pm and 3.30-6pm each day except for Wednesday. When the practice is closed patients are directed to contact the local out of hours service and NHS 111. Patients may book appointments by telephone, online or in person. Out of hours services are provided by London Central and West.

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 Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Warning notice</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• The provider could not demonstrate they have an effective system in place to safely manage patients who had been prescribed high-risk medicines.• The provider could not demonstrate they have an effective system in place to safely manage infection prevention and control (IPC) practices.• The provider could not demonstrate that all staff had the skills, knowledge and experience to carry out their roles. <p>This was in breach of regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>