

# Belsize Priory Medical Practice

## Inspection report

208 Belsize Road  
London  
NW6 4DX  
Tel: 02073268200  
www.belsizepriorymedicalpractice.co.uk

Date of inspection visit: 8th September 2021  
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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 comprehensive inspection at Belsize Priory Medical Practice between 6th -8th September 2021. Overall, the practice is rated as requires improvement.

## Why we carried out this inspection

We carried out an inspection to follow up on the previous inspection carried out in January 2019 where the practice received a requires improvement rating for the responsive domain. The full reports for previous inspections can be found by selecting the 'all reports' link for Belsize Priory Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## How we carried out the 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 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 rated the practice as **requires improvement** for providing safe services because:

- We had concerns regarding the actioning of a drug safety alert, the cleanliness of the public toilets, the lack of posters stating what to do in the event of a sharp's injury and safe disposal of sharps bins.

We rated the practice as **requires improvement** for providing effective services because:

- The practice's uptake for childhood immunisation was below the national targets.
- The practice's uptake for cervical screening was below the national targets.

# Overall summary

We rated the practice as **good** for providing caring services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

We re-rated the practice as **good** for providing responsive services because:

- We were now satisfied the practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

We rated the practice as **requires improvement** for providing well-led services because:

- We were not assured there was appropriate processes in place for actioning all drug safety alerts; disposing of sharps bins; and to maintain standards of hygiene appropriate for the purposes for which the premises were being used.

## Population Groups

- We rated older people and people whose circumstances may make them vulnerable as good.
- We rated people with long-term conditions as good.
- We rated families, children and young people as requires improvement because the practice has not met the WHO based national target of 95% (the recommended standard for achieving herd immunity) for five of five childhood immunisation uptake indicators.
- We rated working age people as requires improvement as the practice had not met the 80% national uptake target for cervical screening.
- We rated people experiencing poor mental health (including people with dementia) as good.

We found two breaches of regulations. The provider **must**:

- Ensure that care and treatment is provided in a safe way (Please see the specific details on action required at the end of this report).
- Maintain appropriate standards of hygiene for premises and equipment (Please see the specific details on action required at the end of this report).

The provider **should**:

- Continue with efforts to improve the uptake of cervical screening and childhood immunisations.
- Consider increasing nursing staff and/or nursing working hours.
- Ensure sharps bins are disposed and replaced as per best practice guidelines.
- Ensure sharps injury posters are displayed in all consultation rooms.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

# Overall summary

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included an additional inspector, and a GP specialist advisor.

## Background to Belsize Priory Medical Practice

The Belsize Priory Medical Practice is located in the London Borough of Camden at the following address: 208 Belsize Road, London NW6 4DX. The registered provider and Lead GP is Dr Nabila Hanosh. Further information about this practice can be found on the website: [www.belsizepriorymedicalpractice.co.uk](http://www.belsizepriorymedicalpractice.co.uk).

The practice serves approximately 4,500 people living in the local area. People living in the area speak a range of different languages and express a range of cultural needs. The practice operates from a single site, which we visited as part of our inspection. It is situated on the first floor of a purpose-built health centre, which also houses a range of other health and social care services. There are six consulting rooms. The service can be accessed by a ramp leading to the first floor. There is also a disabled toilet available.

The practice is registered with the Care Quality Commission (CQC) to carry out the following regulated activities: Diagnostic and screening procedures; Family planning; Maternity and midwifery services; Treatment of disease, disorder or injury. The practice is led by a female GP and employs one long-term male locum GP. The clinical team is completed by a practice nurse, two Physician Associates and a healthcare assistant. There is a deputy practice manager and a team non-clinical staff who share reception and administrative duties.

The practice offers pre-bookable and on the day appointments. The practice has appointments from 10am to 1pm and 3pm to 6.30pm on Monday to Friday. The practice provides extended opening hours on Tuesdays between 6.30pm and 7.

In addition to the extended hours operated by the practice, the CCG has commissioned an extended hours service, operating from 6.30pm until 8pm on weekdays and between 8am and 8pm at weekends and bank holidays at three sites across the borough. Appointments can be booked by patients contacting their own general practice. There is also a walk-in service available to all patients at a central location. The practice has opted out of providing an out of hours service. Patients calling the practice when it is closed are connected to the local out-of-hours service provider. There is information given about the out-of-hours service provided on the practice website.

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

Maternity and midwifery services  
Treatment of disease, disorder or injury  
Diagnostic and screening procedures  
Family planning services

#### Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

- The provider did not record, or action a drug safety alert received by the healthcare authorities. The alert related to concerns regarding patients aged over 65 who were being prescribed Citalopram (medicine used to treat depression). Research showed that these individual's could be at risk of harm and that they should be closely monitored and reviewed to ensure it was still safe for them to continue taking this medicine. However, on the day of the inspection we found all patients had not had this review carried out.

**This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.**

#### Regulated activity

Diagnostic and screening procedures  
Family planning services  
Treatment of disease, disorder or injury  
Maternity and midwifery services

#### Regulation

Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment

**The registered person had failed to maintain standards of hygiene appropriate for the purposes for which the premises were being used. In particular:**

- The patient toilets were visibly unclean, unhygienic and in disrepair.

**This was in breach of Regulation 15 (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.**