

# Dr Philip Matthewman

## 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 rating for this location

Good 

Are services safe?

Good 

Are services effective?

Requires improvement 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at Dr Philip Matthewman, on 7 August 2018, and rated the practice as inadequate for safe, effective and well-led and good for caring and responsive. This gave the practice an overall rating of inadequate and the practice was placed into special measures.

At the inspection, on 7 August 2018, we rated safe, effective and well-led as inadequate because:

- The practice had not provided care and treatment in a way that kept patients safe and protected them from avoidable harm;
- Clinical outcomes for patients with diabetes and those due for cervical cytology screening were low; and
- There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.

Following our inspection, on 7 August 2018, we served a warning notice under Section 29 of the Health and Social Care Act 2008, as the provider was failing to comply with the relevant requirements of Regulation 12, (1), Safe care and treatment, of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We also served a requirement notice, as the provider was failing to comply with the relevant requirements of Regulation 17 Good Governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The full comprehensive report on the August 2018 inspection can be found by selecting the 'all reports' link for Dr Philip Matthewman on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We carried out a warning notice follow up inspection, on 18 December 2018, to assess whether the concerns identified in the warning notice had been addressed by the provider. At that inspection we found that the provider had appropriately addressed all the concerns identified in the warning notice. The warning notice report can also be found by selecting the 'all reports' link for Dr Philip Matthewman on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced comprehensive inspection carried out, on 13 June 2019, to confirm the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations we identified in the warning notice and requirement notice issued after the August 2018 inspection.

This report and the supplementary evidence table covers our findings in relation to those requirements and a re-rating of all five key questions.

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.

At this inspection we have rated this practice as good overall.

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

- The practice now provided care and treatment in a way that kept patients safe and protected them from avoidable harm.
- The provider had an effective system in place for the monitoring and recording of the availability of emergency equipment and medicine.
- Comprehensive care records were maintained for patients that were administered high-risk anticoagulant medicine.

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

- Although there was some evidence of improvement we were not satisfied that the practice had fully addressed the previous concerns identified for patients with diabetes.
- The practice's performance was lower than the CCG and England averages for cancer indicators relating to cervical screening, bowel cancer screening, breast cancer screening and two-week wait cancer referrals.
- The practice carried out clinical audits to improve patient outcomes.
- The practice able to show that staff had the skills, knowledge and experience to carry out their roles.

We rated all population groups in effective as **good** except for people with 'long-term conditions' and 'working age people' which we rated as **requires improvement**. This was because clinical outcomes for patients with diabetes and cancer were lower than local and national averages.

# Overall summary

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

- Staff involved and treated patients with compassion, kindness, dignity and respect.
- The practice organised and delivered services to meet most patients' needs and preferences.

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

- Services were tailored to meet the needs of individual patients. They were delivered in a flexible way that ensured choice and continuity of care.
- Patients found the appointment system easy to use and reported that they could access care when they needed it.

We rated all population groups in responsive as **good**.

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

- Systems and processes had now been established and operated effectively to ensure compliance with requirements to demonstrate good governance.
- There were now arrangements for identifying, recording and managing risks, issues and implementing

mitigating actions and these were operated effectively, in particular in relation to the management of emergency equipment and medicines, medicines management as a whole and staff training.

- The provider had increased its clinical and administrative staff to provide a more efficient service for its patients.

The provider **should**:

- Continue with efforts to improve outcomes for patients with diabetes.
- Continue with efforts to improve the uptake of cervical, bowel and breast cancer screening.
- Consider whether the practice opening times are in line with NHS contractual obligations.
- Establish a formal patient participation group in addition to the virtual group.

**I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by the service.**

**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

<b>Older people</b>	<b>Good</b> 
<b>People with long-term conditions</b>	<b>Requires improvement</b> 
<b>Families, children and young people</b>	<b>Good</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.  
The team included a GP specialist advisor.

## Background to Dr Philip Matthewman

Dr Philip Matthewman (the provider) is a sole GP practitioner, whose practice operates at 87-89 Prince of Wales Road, London NW5 3NT. The provider is part-owner of the premises which are shared with another provider of healthcare services. There are good transport links with tube and overground stations nearby.

The practice provides NHS services through a General Medical Services (GMS) contract to approximately 1,800 patients. The practice is part of the NHS Camden Clinical Commissioning Group (CCG) which is made up of 35 general practices. The practice is registered with the CQC to carry out the following regulated activities: Diagnostic and screening procedures, Surgical procedures, Family planning, Maternity and midwifery services and Treatment of disease, disorder or injury. The patient profile for the practice has an above-average working age population, between the ages of 20 and 49 years and fewer than average children, teenagers and older patients, aged over-50. The locality has a higher than average deprivation level. Over a third of the practice area population is of black and minority ethnic background.

The practice's clinical team is led by the provider, who provides nine clinical sessions per week. A regular female locum GP provides one clinical session per week. A female nurse provides one clinical session a week –

usually a Wednesday afternoon/evening. A male long-term locum GP provides occasional sessions to cover the provider's absence. There is a practice manager, an IT administrator and two receptionists.

The practice reception operates during the following times:

Monday 9am – 12 noon; 3pm – 5pm

Tuesday 9am – 12 noon; 4pm – 6 pm

Wednesday 9am – 12 noon; 4pm – 7.30pm

Thursday 9am – 12 noon; Closed pm

Friday 9am – 12 noon; 4pm – 6.30pm

A walk in clinic operates between 9am and 11.30 am, Monday to Friday, for which no appointment is needed. Between 11.30am and 12 noon, the GP is available for telephone consultations with patients. Patients can book appointments for the afternoon clinics, which operate during the following times:

Monday 3pm – 5pm

Tuesday 4pm – 6pm

Wednesday 5pm – 7.30pm

Friday 4.30pm – 6.30pm

The practice is closed on Thursday afternoons. Standard appointments are 10 minutes long, with patients being encouraged to book double slots should they have several issues to discuss. Patients who have previously registered to do so may book appointments online. The provider is able to carry out home visits for patients whose health condition prevents them attending the surgery.

In addition to the extended hours operated by the practice on Wednesday evening, the CCG has commissioned an extended hours service, which operates between 6.30pm and 8pm on weeknights and

from 8am to 8pm at weekends at four external “Hub” locations across the borough. Patients may book appointments with the service by contacting the practice or the Hubs themselves.

The practice has opted out of providing an out-of-hours service. However, the provider is available outside usual surgery hours, with the practice’s phone line being routed to an answering service, which will pass on messages. Otherwise, patients calling the practice when it is closed are connected with the local out-of-hours service provider via NHS 111.