

# Freuchen Medical Centre

## Quality Report

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Date of inspection visit: 11 August 2017

Date of publication: 12/09/2017

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 service	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

# Summary of findings

## Contents

### Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	5
Areas for improvement	6

### Detailed findings from this inspection

Our inspection team	7
Background to Freuchen Medical Centre	7
Why we carried out this inspection	7
How we carried out this inspection	7
Detailed findings	9

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Freuchen Medical Centre on 1 November 2016. The overall rating for the practice was requires improvement. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Freuchen Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection carried out on 11 August 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 1 November 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The practice had made improvements in respect of the arrangements to respond to emergencies and major incidents.
- Data from the Quality and Outcomes Framework showed patient outcomes had improved since our previous inspection.
- There was evidence that appraisals and personal development plans had been implemented for all staff.
- Information had been displayed in languages appropriate for the local community and translation services were advertised in the patient waiting room. Facilities had been updated to meet the needs of mothers, babies and those patients who are hard of hearing and privacy curtains were available in all consultation rooms.
- The practice had drawn up an action plan to improve patient satisfaction with the service.

The areas of practice where the provider needs to make further improvements are:

The provider should:

# Summary of findings

- Continue to improve cervical screening uptake and childhood immunisation rates to bring them in line with local and national averages.

- Continue to monitor and act on feedback from patients.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**  
Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### Are services safe?

The practice is rated as good for providing safe services. Improvement had been made in respect of the arrangements for dealing with medical emergencies.

Good



### Are services effective?

The practice is rated as good for providing effective services. Improvement had been made in respect of cervical screening uptake, childhood immunisation rates, overall Quality and Outcomes Framework (QOF) performance and staff appraisals.

Good



### Are services caring?

The practice is rated as good for providing caring services. This rating was given following the comprehensive inspection in November 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



### Are services responsive to people's needs?

The practice is rated as good for providing responsive services. This rating was given following the comprehensive inspection in November 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



### Are services well-led?

The practice is rated as good for providing well-led services. This rating was given following the comprehensive inspection in November 2016. A copy of the full report following this inspection is available on our website:

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The provider had resolved the concerns for providing safe and effective services identified at our inspection on 1 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### People with long term conditions

The provider had resolved the concerns for providing safe and effective services identified at our inspection on 1 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### Families, children and young people

The provider had resolved the concerns for providing safe and effective services identified at our inspection on 1 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### Working age people (including those recently retired and students)

The provider had resolved the concerns for providing safe and effective services identified at our inspection on 1 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### People whose circumstances may make them vulnerable

The provider had resolved the concerns for providing safe and effective services identified at our inspection on 1 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



### People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for providing safe and effective services identified at our inspection on 1 November 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Summary of findings

## Areas for improvement

### Action the service **SHOULD** take to improve

- Continue to improve cervical screening uptake and childhood immunisation rates to bring them in line with local and national averages.
- Continue to monitor and act on feedback from patients.

# Freuchen Medical Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

## Background to Freuchen Medical Centre

Freuchen Medical Centre is a GP practice which provides primary medical care through a GMS contract to approximately 5,700 patients in the Harlesden area of west London. It provides a number of services such as minor surgery and phlebotomy as well as nurse-led clinics. It is situated in an ethnically diverse inner city area with high levels of deprivation. One third of the patients in the practice have long term conditions such as heart disease and diabetes and there are a high number of patients with poor mental health. There was a higher than average number of patients aged between 25 and 54 years with a lower number of older patients above 55 years old.

The practice is registered with the Care Quality Commission to provide the following regulated activities; diagnostic and screening procedures, maternity and midwifery services, family planning, treatment of disease, disorder or injury and surgical procedures.

There are two female GP partners and one male GP partner (18 clinical sessions), one long-term locum GP (two clinical sessions), a full time female practice nurse, a part-time advanced nurse practitioner (three sessions), a health care assistant, a practice manager and six reception/administration staff.

The practice is open between 8am and 6:30pm Monday to Friday with the exception of Wednesday when the practice

closes at 1pm. Appointments are available from 8am to 12pm and 3:30pm to 6pm daily. Extended hours appointments are offered on Monday, Tuesday and Thursday until 7:30pm. GPs have opted out of providing out-of-hours services to their own patients and employ the services of an out of hours GP provider to fulfil this role.

Information within the practice and in the practice leaflet advertises telephone contact details for patients to call if they have medical problems after the surgery is closed or at weekends.

## Why we carried out this inspection

We undertook a comprehensive inspection of Freuchen Medical centre on 1 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection in November 2016 can be found by selecting the 'all reports' link for Freuchen Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Following our inspection in November 2016 the areas identified where the provider must make improvements were:

- Ensure all clinical and non-clinical staff receive annual basic life support training and update the emergency medicines kit to include Atropine (used for the management of a slow heart rate which can occur during intrauterine contraceptive device fitting).
- Improve performance in relation to cervical screening and childhood immunisation uptake to bring in line with local and national averages.

# Detailed findings

In addition areas where the provider should make improvements were:

- Continue to improve Quality and Outcomes Framework (QOF) performance.
- Provide information in languages appropriate for the local community and advertise translation services in the patient waiting area.
- Provide facilities to meet the needs of mothers, babies and those patients who are hard of hearing and provide privacy curtains in all consultation rooms.
- Ensure all staff are supported including appraisals and personal development plans.
- Consider ways to improve national GP patient survey results to bring in line with local and national averages.

We undertook a follow up focused inspection of Freuchen Medical Centre on 11 August 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

## How we carried out this inspection

We carried out a follow up focused inspection of Freuchen Medical Centre on 11 August 2017. This involved reviewing evidence that:

- Patient outcomes had improved.
- The arrangements in respect of dealing with medical emergencies had improved.
- Staff appraisals and personal development plans had been implemented.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

# Are services safe?

## Our findings

**At our previous inspection on 1 November 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of the management of medical emergencies were not adequate.**

**These arrangements had significantly improved when we undertook a follow up inspection on 11 August 2017. The practice is now rated as good for providing safe services.**

**Arrangements to deal with emergencies and major incidents**

At our inspection in November 2016, we found that staff training in basic life support (BLS) and medical emergencies was not up to date including training for two clinical staff. At this inspection we were provided with evidence that all staff had attended a recent training course. The practice manager told us that BLS training would be updated annually for all staff in the future.

At our inspection in November 2016, we found that the emergency medicines kit was in need of a review as it did not include Atropine (used for the management of a slow heart rate which can occur during intrauterine contraceptive device fitting). At this inspection we found that the practice had reviewed the emergency medicines to include Atropine.

# Are services effective?

(for example, treatment is effective)

## Our findings

**At our previous inspection on 1 November 2016, we rated the practice as requires improvement for providing effective services as the arrangements in respect of the practices Quality and Outcomes Framework (QOF) performance, cervical screening, childhood immunisations and staff appraisal needed improving.**

**These arrangements had improved when we undertook a follow up inspection on 11 August 2017. The practice is now rated as good for providing effective services.**

### Management, monitoring and improving outcomes for people

At our inspection in November 2016, we found the practices cervical screening uptake, childhood immunisation rates and overall QOF performance were below local and national averages. For example:

- Cervical screening uptake for 2015/16 was 65% compared to the Clinical Commissioning Group (CCG) average of 77% and the national average of 81%.
- Childhood immunisation rates in 2015/16 for the vaccinations given to under two year olds averaged 74% and five year olds averaged 70% compared to the national standard of 90%.

- Overall QOF performance for 2015/16 was 87% of the total number of points available compared to the CCG average of 95% and the national average of 96%.

At this inspection the practice provided us with unpublished data that showed improvement. For example:

- Cervical screening uptake for 2016/17 was 72%.
- Childhood immunisation rates in 2016/17 for the vaccinations given to under two year olds averaged 90% and five year olds averaged 78%.
- Overall QOF performance for 2016/17 was 94%.

Since our previous inspection the practice had improved the system for recalling patients and in addition they had displayed information in different languages in the waiting room to encourage patients to attend for example the cervical screening programme. Current figures for 2017/18 shown to us on the practices computer system indicated that cervical screening uptake was at 71%.

### Effective staffing

At our inspection in November 2016, we found that not all staff had received an appraisal within the last 12 months and they did not have personal development plans in place. At this inspection we were provided with evidence of completed staff appraisals which identified areas for improvement, training and development with agreed actions recorded.

## Are services caring?

### Our findings

Please note this was a follow up focused inspection of safe and effective care and treatment under the key questions safe and effective. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following website:

<http://www.cqc.org.uk/search/services/doctors-gps>

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

Please note this was a follow up focused inspection of safe and effective care and treatment under the key questions safe and effective. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following website:

<http://www.cqc.org.uk/search/services/doctors-gps>

# Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

## Our findings

Please note this was a follow up focused inspection of safe and effective care and treatment under the key questions safe and effective. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following website:

<http://www.cqc.org.uk/search/services/doctors-gps>