

Tooting South Medical Centre

Inspection report

22 Otterburn Street
Tooting
London
SW17 9HQ

Tel: 02086820521
www.tootingsouthmedicalcentre.co.uk

Date of inspection visit: 25 May 2021
Date of publication: 29/07/2021

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?	Inadequate 
Are services caring?	Requires Improvement 
Are services responsive to people's needs?	Requires Improvement 
Are services well-led?	Requires Improvement 

Overall summary

We carried out an announced inspection at Tooting South Medical Centre on 25 May 2021. Overall, the practice is rated as requires improvement.

Ratings for each key question:

Safe- Requires improvement

Effective- Inadequate

Caring- Requires improvement

Responsive- Requires improvement

Well-led- Requires improvement

Following our previous inspection on 5 December 2019, the practice was rated requires improvement overall and for all key questions but rated good for providing effective services.

The full reports for previous inspections can be found by selecting the 'all reports' link for Tooting South Medical Centre on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on breaches of Regulation 12 Safe care and treatment and Regulation 17 Good governance. At the previous inspection we found:

- The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular by ensuring actions taken had successfully mitigated the risks.
- There was not proper and safe management of medicines. In particular arrangements to ensure proper authorisation for medicines given.

We also followed up on areas we identified the practice should improve at the last inspection. Specifically:

- Continue to take action to improve uptake of childhood immunisations and cervical screening.
- Improve the identification of carers to enable this group of patients to access the care and support they need.

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.

Overall summary

This included:

- Conducting staff interviews using video conferencing

Overall Summary

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- 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 short 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 and requires improvement for all population groups except for effective, which we have rated as inadequate.

We found that:

- Policies were monitored, reviewed and updated.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Staff dealt with patients with kindness and respect.
- The way the practice was led and managed did not always promote the delivery of high-quality, person-centre care.
- We found the practice was not always providing care in a way that kept patients safe and protected them from avoidable harm.

We found a breach of regulations. The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Overall summary

We also found the provider **should**:

- Continue efforts to improve patient satisfaction re: access, how long patients wait on the phone to get through to the practice, and to involve patients in decisions about their care and treatment.
- Continue efforts to identify carers.
- Continue to take action to improve uptake of childhood immunisations and cervical screening.
- Continue to ensure that all staff have protected time for learning and development.

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

Our inspection team

Our inspection team was led by a CQC lead inspector and a second CQC inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team also included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Tooting South Medical Centre

Tooting South Medical Centre is located at: 22 Otterburn Street, Tooting, London SW17 9HQ.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury.

The practice is situated within the South West London Clinical Commissioning Group (CCG) and delivers Personal Medical Services (PMS) to a patient population of about 10,200. This is part of a contract held with NHS England. Tooting South Medical Centre is part of Balham, Tooting and Furzedown PCN.

The practice's clinical team consists of four GP partners, two salaried GPs, three nurses and two HCAs. The GPs are supported at the practice by a managing partner who is also the practice manager, a deputy practice manager and a team of reception/administration staff of 12.

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 surgery.

Out of hours services are provided by NHS 111.

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 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	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users. In particular: there were significant weaknesses in monitoring to assess if patients had had an up to date medication review before being prescribed repeat medications.• The registered person had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular, ensuring actions taken had successfully mitigated the risks and by failing to consider the impact of failings in monitoring.• The registered person had failed to assess, monitor and improve the quality and safety of the services being provided. In particular: there were weaknesses in monitoring to assess if actions taken had resulted in improvement. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>