

Crawley Road Medical Centre

Inspection report

479 High Road
Leyton
London
E10 5EL
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Date of inspection visit: 06 and 07 October 2022
Date of publication: 31/10/2022

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

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Are services responsive to people's needs?

Inspected but not rated



Are services well-led?

Inspected but not rated



Overall summary

We carried out an announced focused inspection on 06 and 07 October 2022.

The practice was previously inspected on 30 June 2022. Following this inspection, the practice was served with a notice to urgently suspend their registration as a service

Provider, in respect of regulated activities, for a period of three months. This notice was served under section 31 of the Health and Social Care Act 2008. The provider was rated inadequate overall and in all key questions and placed in special measures.

We previously inspected this provider on 24 November 2016 and the practice was rated requires improvement for safe and well-led services which resulted in an overall rating of requires improvement. A follow up inspection of the safe and well led key questions took place on 12 July 2017 where the practice was rated good overall.

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

Why we carried out this inspection

This was a focused inspection, without undertaking a site visit inspection, to follow-up on we had issued at our last inspection.

Following this inspection, due to some improvements made by the provider, we have lifted the suspension on the provider's registration.

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

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:

- Speaking with staff 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.

Our findings

We based our judgement of the quality of care at this service on a combination of:

Overall summary

- What we found when we inspected.
- Information from our ongoing monitoring of data about services.
- Information from the provider, patients, the public and other organisations.

We found the provider had made some improvements in providing safe services regarding:

- The provision of safeguarding registers for children and vulnerable adults.
- The management of patients who are prescribed high-risk medicines.
- Emergency medicines held at the practice in the case of an emergency.

However, we found the provider had some continuing concerns in providing safe services regarding:

- Although the provider had implemented a safeguarding register for children and vulnerable adults, they could not demonstrate when the registers had been regularly reviewed.
- The management of patients who are prescribed medicines that require additional monitoring.
- Regular prescribing audits for members of staff who are non-medical prescribers.
- The lack of a practice system regarding Patient Specific Directions (PSDs).
- Although the practice had implemented a policy regarding triaging patients, they could not demonstrate they had delivered appropriate training for non-clinical staff.

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

- The management of some patients with long term conditions. For example, some patients with asthma who are prescribed rescue inhalers; patients who may have been diagnosed with chronic kidney disease (CKD) and hypothyroidism (under-active thyroid).
- The management of care planning for vulnerable patients, including those patients who have a learning difficulty.

However, we found continuing concerns in providing effective services regarding:

- The management of some patients with long term conditions. For example, hypertension (high blood pressure); some patients with Type Two Diabetes; some patients who have Diabetic retinopathy and patients who suffer with fluid build-up (Oedema).
- Documented clinical supervision for clinical staff in the practice.

We found the provider had made some improvements in providing responsive services regarding:

- The provision of appropriate information for patients relating to its complaints system.
- Information was available for patients on the practice website regarding practice opening times and on 'how to make appointments'.

We found continuing concerns in providing responsive services regarding:

- Response to and the management of patients' complaints.
- The management of the practice E-Consult system in response to patients' needs.
- Although information was available on the practice website regarding appointments and opening times, it was unclear how this was managed for patients who are digitally excluded.

Overall summary

We found the provider had made some improvements in providing well-led services regarding:

The management of some high-risk medicines and long term conditions and some systems had been implemented.

However we found the provider had some consistent concerns in providing well-led services regarding:

- Although some improvements had been implemented, leaders could not demonstrate that they had made improvements across all relevant areas.
- The provider had some systems in place to identify, manage and mitigate risks, however these were not always effective.
- The provider could not demonstrate they had oversight of all systems and processes to ensure effective care and to drive quality improvement.
- The management team could demonstrate they had awareness of some challenges to delivering care and had taken actions to make improvements.

The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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. 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.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector, a GP Specialist Advisor and a member of the CQC pharmacy team who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Crawley Road Medical Centre

Crawley Road Medical Centre is located at: 479 High Road, Leyton, London, E10 5EL. The practice has good transport links and is within easy reach of bus and train services providing direct access into Central London.

There is a clinical team of two GP partners; four salaried GPs; an Advanced Clinical Practitioner (ANP); two primary care pharmacists and a pharmacy technician and three practice nurses. Clinical staff are supported at the practice by a practice manager and a team of reception and administration staff.

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 and family planning.

The practice reception is open Monday-Friday between 8am-6:30pm, on Saturdays between 8.00am-12.30pm and appointments are available between these times. Patients may book appointments online, by telephone or in person.

The practice is situated within the North-east London Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of 10, 540 (as of 01 September 2022). This is part of a contract held with NHS England.

Information published by Public Health England shows that deprivation within the practice population group is in the second lowest decile (two of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 42% White, 21% Black, 27% Asian, 5% Mixed, and 5% Other.

Extended access is provided locally by an external hub, where late evening and weekend appointments are available.