

Eagle House Surgery

Inspection report

291 High Street
Ponders End
Enfield
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Date of inspection visit: 22-24 March and 12 April 2022
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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?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Requires Improvement 

Are services well-led?

Good 

Overall summary

We carried out an announced inspection at Eagle House Surgery on 22- 24 March 2022 and 6 April 2022. At this inspection safe, caring, effective and well led was rated as good, and responsive as requires improvement. Overall, the practice is rated as Good.

Safe - Good

Effective - Good

Caring - Good

Responsive – Requires Improvement

Well-led – Good

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on our previous inspection findings which took place on 9 November 2020. At that inspection we rated the practice as good for safe, caring and well led and requires improvement for effective and responsive. This gave the practice an overall rating of requires improvement.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Eagle House Surgery on our website at www.cqc.org.uk

At the November 2020 inspection, we issued a requirement notice for breach of Regulation 12 HSCA (RA) Regulations 2014 safe care and treatment, as we found the registered person had not done all that was reasonably practicable to mitigate risks to health and safety of service users receiving care and treatment. In particular, there had been a significant decline in performance for review of patients with chronic obstructive pulmonary disease (COPD) and cervical screening rates were below national targets. At this inspection, we were satisfied there had been adequate improvement and this requirement notice had now been met and as a result we re-rated the effective domain to good (please see below evidence tables for more details).

At the November 2020 inspection, we also issued a requirement notice for breach of Regulation 9 HSCA (RA) Regulations 2014 person-centred care. In particular, we found patient feedback as evidenced by the GP Patient Survey and from NHS Choices demonstrated the practice needed to improve access to the service; and make sufficient suitable appointments available to meet patient needs. At this inspection, although we found some improvement, we were not satisfied this requirement notice had been met, as a result the responsive domain remained as requires improvement (please see below evidence tables for more details).

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.
- 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.
- Information from the provider, patients, the public and other organisations.

We have rated this practice as Good overall

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic, however, patients could not always access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

- Ensure the care and treatment of patients is appropriate, meets their needs and reflects their preferences.

In addition, the provider **should**:

- Continue with efforts to meet national targets for the uptake of childhood immunisations and cervical screening.

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

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 a GP specialist advisor and two additional CQC inspectors.

Background to Eagle House Surgery

Eagle House Surgery is located at 291 High Street, Enfield, London, EN3 4DN. The surgery has good transport links and there is a pharmacy located nearby.

The provider is registered with CQC to deliver the Regulated Activities: Surgical procedures, Treatment of disease, disorder or injury, Diagnostic and screening procedures, Family planning and Maternity and midwifery services.

Eagle House Surgery is part of the NHS Enfield Clinical Commissioning Group (CCG) and provides services under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice has approximately 12,900 registered patients. The clinical team is comprised of five GP partners (one female and four males) and three salaried GPs (two female and one male). Between them, the GPs currently work 47 clinical sessions per week.

The clinical team also includes three female nurses, an advanced nurse practitioner, two pharmacists, two health care assistants and a physician assistant. There is a practice manager along with an administrative team.

The practice is open from 8am to 6:30pm on Monday to Friday. The practice operates an extended hours service on weekday evening 6:30pm and 7:30pm Monday, Tuesday and Wednesday. Routine appointments with GPs and nurses are 10-15 minutes long.

Patients may book appointments with the extended hours service, provided at Hub locations across Enfield. Additional extended hours service appointments could be booked weekdays between 4pm – 8pm and weekends 8am to 8pm.

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	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 9 HSCA (RA) Regulations 2014 Person-centred care</p> <p>In particular we found:</p> <ul style="list-style-type: none">• Patient feedback as evidenced by the GP Patient Survey, patient interviews and from online reviews demonstrated the practice needs to improve access to the service. In particular, telephone access and patient experience of making an appointment. <p>This was in breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>