

Eastern Avenue Medical Centre

Inspection report

167 Eastern Avenue Ilford Essex IG4 5AW Tel: 020 8550 4532

Date of inspection visit: 27 February 2019 Date of publication: 16/04/2019

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?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Requires improvement	

Overall summary

We carried out an announced comprehensive inspection at Eastern Avenue Medical Centre on 27 February 2019 as part of our inspection programme for practices rated inadequate in one or more key question at our last inspection of the practice.

We based our judgement of the quality of care at this service is 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, requires improvement for providing safe, effective and well led services and good for providing caring and responsive services.

We rated the practice requires improvement for safe services because

- Prescription security was not maintained during working hours.
- The practice nurse was not working to a recognised protocol which legally authorised them to administer vitamin B12 injections.
- Not all Patient Group Directions (PGDs) in use had been authorised by the provider or the practice manager.
- Safety alerts received were disseminated amongst staff but there was little evidence indicating that all relevant staff had read them.

We rated the practice as requires improvement for effective services because

- Not all patients on high risk medication had received recent reviews.
- Clinical staff did not always use current best practice guidelines when making clinical decisions.

We rated the practice requires improvement for well-led services because

• There was no oversight by the provider of the work undertaken by clinical staff employed at the practice.

• Meeting minutes showed a key member of clinical staff did not attend clinical meetings at the practice.

We rated the practice good for caring and responsive services because

- The practice made use of social prescribing to encourage patients to take ownership (with clinical support) of their health needs.
- The practice conducted clinical audits and could show improvement in patient care because of audits.
- Patient experiences at the practice were positive, except for occasionally not being able to obtain suitable appointments and the manner of some members of staff.
- Complaints were dealt with in line with recognised guidance.
- The practice had scored well in some areas of the National GP Patient survey relating to decisions about their care.

We have rated the practice as good for all the responsive population groups and requires improvement for the effective population groups. This means that the population groups are rated as requires improvement overall.

The areas where the provider must make improvements are:

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

(Please refer to the requirement notice section at the end of the report for more detail).

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

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

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. The team included a GP specialist adviser, a practice nurse adviser, a practice manager adviser and a second CQC inspector.

Background to Eastern Avenue Medical Centre

Eastern Avenue Medical Centre is based at 167 Eastern Avenue, Ilford, Redbridge IG4 5AW and provides GP services under a Personal Medical Services contract. This is a contract between the GP practice and NHS England to deliver local services.

The practice is registered with the CQC to carry out the regulated activities of: diagnostic and screening procedures; maternity and midwifery services; and treatment of disease, disorder or injury.

The practice is located in a converted semi-detached house that has limited parking available directly in front of the building which is on a busy main road. There is step-free access from the street to all waiting areas and clinical rooms.

Eastern Avenue Medical Centre is commissioned by Redbridge Clinical Commissioning Group (CCG) and has a practice list of 7191 registered patients. The practice is in the third least deprived group out of 10 on the national deprivation scale. The practice staff includes one male lead GP, one male salaried GP and one female locum GP collectively working 21 weekly sessions. The nursing team consists of one practice nurse who provides six sessions weekly. The practice also employs a clinical pharmacist who works two sessions per week. The clinical team is supported by a full-time practice manager, a reception manager and a team of administrative/reception staff.

The practice's opening times are from 8am to 6:30pm Monday to Friday.

The out of hours service is provided by the NHS 111 service and patients can also access appointments with the GP out of hours hub services should they have difficulty obtaining appointments with their own GP practice

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 the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment The registered person had systems or process in place that 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 with reference to the service not having the correct authorisation in place for the practice nurse to administer vitamin B12 injections. In addition, the security of prescriptions was not maintained during working hours by some members of staff and some clinical staff did not refer to current guidance for patient care

Regulation Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury Regulation 17 HSCA (RA) Regulations 2014 Good governance The registered person had systems or process in place that did not enable the registered person to provide effective clinical oversight of clinical staff working at the practice and there was evidence that members of clinical staff did not regularly attend clinical meetings.