

# The Penrhyn Surgery

## Inspection report

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Date of inspection visit: 04 May 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?		Good	
Are services well-led?		Good	

# Overall summary

We carried out an announced inspection at The Penrhyn Surgery on 05/05/2022. Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe – Good

Effective – Good

Caring – Good

Responsive – Good

Well-led – Good

Following a new provider registration in 2019, this was the first inspection of the location under the new provider. Following this inspection on 04 May 2022, the practice was rated Good overall and for all key questions.

The full report for this inspection can be found by selecting the ‘all reports’ link for The Penrhyn Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a comprehensive inspection and included the key questions: safe, effective, caring, responsive and well-led.

## 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:

- 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 site visit

## 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 and
- 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' needs were assessed, and care and treatment was delivered in line with current legislation, standards and evidence-based guidance.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Although the lead GP had reviewed systems and processes, Childhood immunisation uptake rates were below the World Health Organisation (WHO) targets. Uptake rates for the vaccines given were below the target of 95% in five areas where childhood immunisations are measured.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The practice had not demonstrated it had an effective strategy to improve its performance for cervical screening which was lower than the national average.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- The practice had an active patient participation group.
- There was evidence of systems for learning, continuous improvement and innovation. For example, during the COVID19 pandemic, the practice started a wellbeing gardening project at the practice in conjunction with a local gardening group. Staff worked with external partners and patients to develop and deliver a gardening project to support people experiencing loneliness and social isolation during the pandemic.

Whilst we found no breaches of regulations, the provider **should**:

- Continue to improve the uptake of cervical cancer screening and childhood immunisations.
- Review monitoring of patients on high risk medicines to ensure all patients have lithium levels checked.
- Review action plans to ensure housebound patients receive required blood pressure monitoring.
- Review coding of patients diagnosed with asthma or COPD and ensure staff document when appropriate medicine review takes place.
- Review systems to ensure scheduled staff appraisals take place when due.

**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 who completed clinical searches and records reviews on site at the location.

## Background to The Penrhyn Surgery

The Penrhyn Surgery is located in Walthamstow, North East London. The practice is in a converted house within a residential area.

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 North East London Clinical Commissioning Group (NEL CCG) and delivers (Personal Medical Services (PMS) to a patient population of about 9,545. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices Forest Eight Primary Care Network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the fifth lowest decile (five 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, 53.7% White, 18.7% Black, 17.8% Asian 4% Mixed, and 3% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

Five GPs work at The Penrhyn Surgery, two GP partners, two salaried GP's and one locum GP. There are two practice nurses and one locum Advanced Nurse Practitioner. The GPs are supported by a practice manager and assistant practice manager and a team of receptionists and administrators. A clinical pharmacist who is employed by the PCN, supports the practice.

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 a choice of either the main GP location or a local GP Enhanced Service hub surgery.

Extended access is provided locally through the GP Federation, at five local GP Extended Access hubs, where late evening and weekend appointments are available. Out of hours services are provided by NHS111.