

HHR Medical

Quality Report

1-3 Herne Hill Road Loughborough Junction London SE24 0AU Tel: 02077379393

Website: www.hernehillroadgp.co.uk

Date of inspection visit: 1 December 2017 Date of publication: 15/01/2018

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 service	Good	
Are services safe?	Good	

Summary of findings

Contents

Summary of this inspection Overall summary	Page 2
Detailed findings from this inspection	
Background to HHR Medical	4
Why we carried out this inspection	4
Detailed findings	6

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at HHR Medical on 25 May 2017. The overall rating for the practice was good but requires improvement for the key question: Are services safe? The full comprehensive report on the 25 May 2017 inspection can be found by selecting the 'all reports' link for HHR Medical on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 1 December 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 25 May 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice remains rated as good and is now rated good for key question: are services safe?

Our key findings were as follows:

- There was a consolidated child safeguarding policy which included all relevant information including the name of the practice lead.
- The practice had systems in place to monitor handwritten prescriptions.
- The practice were now reviewing uncollected prescriptions monthly and recording action taken in response to the review.

- Printer prescriptions were stored in locked cabinets.
- The most recently published Quality Outcomes
 Framework data for 2016/17 showed that some
 scores relating to the management of patients with
 diabetes were still below local and national
 averages. For example the percentage of patients
 with well controlled blood sugar was 61% compared
 with 76% in the CCG and 80% nationally). The
 practice informed us that the nurse was due to start
 a diploma in diabetes.
- Performance had improved in respect of the percentage of patients with complex mental health conditions who had a care plan in place compared to the previous year (83% compared with 90% in the CCG and 90% nationally). However the percentage of patients with a record of alcohol consumption was still lower than local and national averages (75% compared with 91% locally and nationally). According to unverified performance data the practice had, as at 22 November 2017, completed mental health care plans for 90% of patients with complex mental health conditions for 2017/18.
- In 2016/17 the percentage of patients with dementia who had an agreed care plan in place was also now in line with local and national averages (86% compared to CCG and national average of 84%).
- In 2016/17 the percentage of patients with atrial fibrillation who met specific clinical requirements

Summary of findings

that were being treated with anticoagulation therapy was now in line with local and national averages (80% compared with 86% of the CCG and national average of 88%).

- Although we were not provided with any recent complaint response which included contact information for organisations that patients could escalate concerns to, the practice provided a leaflet with this information which we were told was available at reception and on the practice's website.
- The percentage of patients who had bowel cancer screening in 2016/17 was in line with local averages (44% compared with 41% in the CCG).

However, there was also an area of practice where the provider needs to make improvements.

The provider should:

• Continue with action to improve performance in respect of the management of patients with diabetes.

Professor Steve Field CBF FRCP FFPH FRCGP

Chief Inspector of General Practice



HHR Medical

Detailed findings

Background to HHR Medical

HHR Medical is part of Lambeth Clinical Commissioning Group (CCG) and serves approximately 6500 people. The practice is registered with the CQC for the following regulated activities Diagnostic and Screening Procedures, Treatment of Disease, Disorder or Injury, Maternity and Midwifery Services and Family Planning and Surgical Procedures.

The practice population has a larger working age population and smaller proportion of patients over the age of 65 compared to the national average. The ethnicity of the patient list is diverse with 8.2% identifying as mixed, 5.8% as Asian, 35.6% black and 3.2% other non-white ethnic groups. The practice is located in an area which is ranked as the second most deprived decile on the index of multiple deprivation with higher levels of deprivation amongst both older people and children.

The practice is run by two male partners and employs two GPs one male and one female. The practice employs a full time nurse practitioner and two part time nurses. The practice offers 28 GP sessions.

The practice is open between 8.00 am and 6.30 pm Monday to Friday. Appointments are from 8.30 am to 11.20 am Monday to Friday and resume 3.30pm to 6 pm in the evening except on Thursday when surgery resumes at 4pm. Extended surgery hours are offered between 7.30 am and 8.30 am and 6.30 pm to 7.30 pm on Wednesdays. In addition to pre-bookable appointments that can be booked up to one month in advance, urgent appointments are also available for people who need them which can be booked the same day. Patients can also book appointments 24 hours or 48 hours in advance. If patients

require treatment at the weekend the practice can refer them to the local GP access hub which provides care from 8am – 8pm seven days a week through the local Federation.

HHR Medical operates from 1-3 Herne Hill Road, Loughborough Junction, London, SE24 0AU which are purpose built premises which are owned by the partnership. The service is accessible for patients with mobility difficulties and has a lift to enable patients to access consulting and treatment rooms on the upper floors.

Practice patients are directed to contact the local out of hour's provider when the surgery is closed.

The practice operates under a Personal Medical Services (PMS) contract, and is signed up to a number of local and national enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract). These are: extended hours access, learning disabilities health checks, out of area registration, minor surgery and GP delivery scheme.

Why we carried out this inspection

We undertook a comprehensive inspection of HHR Medical on 25 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement for providing safe services. The full comprehensive report following the inspection in May 2017 can be found by selecting the 'all reports' link for HHR Medical on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up desk-based focused inspection of HHR Medical on 1 December 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.



Are services safe?

Our findings

At our previous inspection on 25 May 2017, we rated the practice as requires improvement for providing safe services as the arrangements for the management of medicines were not adequate specifically in respect of the security and monitoring of prescriptions and for following up patients who have failed to collect their prescriptions. The practice's child safeguarding information was also spread across three different documents and there was no reference to the safeguarding lead in any of this documentation.

These arrangements had significantly improved when we undertook a desk based review on 1 December 2017. The practice is now rated as good for providing safe services.

Safety systems and processes

At our last inspection we found that child safeguarding information was split across three documents and the name of the practice lead was not mentioned in any of this documentation.

At this inspection the practice provided us with an updated child safeguarding policy which included all relevant information including the name of the practice safeguarding lead.

Safe and appropriate use of medicines

At our last inspection we were informed that uncollected prescriptions were reviewed approximately every three months but there was no process for action to be taken when a prescription had not been collected.

At this inspection the practice provided audits of uncollected prescriptions. The audits indicated that reviews of uncollected prescriptions were undertaken monthly. Uncollected prescriptions were handed to the GP who would contact patients if it was deemed necessary.

At our last inspection we found that there was no system in place to monitor the use of handwritten prescription pads.

At this inspection the practice provided a log which documented the serial numbers at the beginning and end of the prescription pads in the practice. The practice informed us that no handwritten prescriptions had been used since our inspection.

At our last inspection we found that prescriptions kept in printers, though kept in locked rooms, were accessible to contract staff. The practice have provided pictures as part of this review showing lock boxes used to store prescriptions.