

St Lukes

Quality Report

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Date of inspection visit: 18 May 2017

Date of publication: 03/07/2017

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

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at St Luke's on 9 February 2016. The overall rating for the practice was Good. The full comprehensive report on the February 2016 inspection can be found by selecting the 'all reports' link for St Luke's on our website at www.cqc.org.uk.

At our previous inspection on 9 February 2016, we rated the practice as requires improvement for providing safe services as the practice had no health and safety risk assessment in place. In addition, we found that the practice had not conducted regular Legionella or fire safety checks, and that premises and medical equipment cleaning had not been undertaken.

This inspection was an announced focused inspection carried out on 18 May 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 9 February 2016.

This report covers our findings in relation to those requirements and also additional improvements made since our last inspection. At this inspection, we found that the practice had put in place a system to conduct regular Legionella and fire safety checks and had conducted a recent health and safety assessment. In addition, we found that the practice had implemented a cleaning schedule for the premises and for medical equipment. As a result of these findings, the practice rating remains as Good overall.

Our key findings were as follows:

- The practice had put in place a system of processes and practices to keep patients and staff safe. For example, the practice evidenced that fire safety and Legionella checks were now being conducted and that a schedule of cleaning for the premises and medical equipment was in place.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

The practice is rated as Good for providing safe services.

Good



- The practice had an up to date fire risk assessment and carried out regular fire drills.
- Annual and monthly infection control audits were undertaken and we saw evidence that action was taken to address any actions identified as a result.
- The practice had defined and embedded systems, processes and practices in place to keep patients safe
- We saw evidence that the practice conducted regular cleaning of their premises and medical equipment.

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The practice is rated good for the care of older people. As the practice was found to be providing good services overall, this affected the rating of the population groups we inspect against.

Good



People with long term conditions

The practice is rated good for the care of people with long-term conditions. As the practice was found to be providing good services overall, this affected the rating of the population groups we inspect against.

Good



Families, children and young people

The practice is rated good for the care of families, children and young people. As the practice was found to be providing good services overall, this affected the rating of the population groups we inspect against.

Good



Working age people (including those recently retired and students)

The practice is rated good for the care of working age people (including those recently retired and students). As the practice was found to be providing good services overall, this affected the rating of the population groups we inspect against.

Good



People whose circumstances may make them vulnerable

The practice is rated good for the care of people whose circumstances may make them vulnerable. As the practice was found to be providing good services overall, this affected the rating of the population groups we inspect against.

Good



People experiencing poor mental health (including people with dementia)

The practice is rated good for the care of people experiencing poor mental health (including people with dementia). As the practice was found to be providing good services overall, this affected the rating of the population groups we inspect against.

Good



St Lukes

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC lead inspector.

Background to St Lukes

St Luke's practice is located in a converted church building in Canning Town. The practice shares its reception area with another GP practice located in the same building.

The practice provides services to approximately 2,000 patients under an Alternative Provider Medical Services (APMS) contract. The practice serves a diverse and relatively young population. Seventy per cent of residents are from black and ethnic minority communities and 59% per cent are aged between 15 and 44 years old.

In addition to St. Luke's Practice, Lantern Health Community Interest Company (CIC) operates two other practices for the CCG. NHS Newham Clinical Commissioning Group is St Luke's commissioning body.

The staff team at the practice are managed and supported by the Lantern Health CIC leadership team and include two long-term locum GPs (one female, one male) working nine sessions per week. In addition, there is a practice nurse who works 1.5 sessions per week, a part time female health care assistant working between one and two sessions every other week, a full time practice manager working across all three Lantern Health practices. A team of four reception and administrative staff work a mixture of part time hours at the practice.

The practice is open from 8.00 am to 6.00 pm each weekday except Thursday when they close at 1.00pm.

Clinical sessions are as follows:-

- 9:00 am - 12:00 pm; 3:30 pm - 5:30 pm (Monday, Tuesday, Wednesday)
- 9:00 am - 11:30 am (Thursday)
- 8:30 am - 11 am; 3:00 pm - 5:30 pm (Friday)

Appointments also occur between morning and afternoon surgery which include home visits, telephone consultations and urgent appointments for patients who need them. Appointments can be booked 4 weeks in advance by telephone or online. The practice has opted out of providing an out-of-hours service but offers an extended hours clinic every weekday until 9.30 pm and from 9 am until 12.30 pm on Saturdays through a network of local practices. Patients telephoning when the practice is closed are transferred automatically to the local out-of-hours service provider.

Why we carried out this inspection

We undertook a comprehensive inspection of St Luke's on 9 February 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice overall was rated as Good, but requires improvement for the provision of safe services. The full comprehensive report following the inspection on 9 February 2016 can be found by selecting the 'all reports' link for St Luke's on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of St Luke's on 18 May 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.

Detailed findings

How we carried out this inspection

During our visit we:

- Spoke with a range of staff (one business manager and one practice manager).

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time

Are services safe?

Our findings

At our last inspection on 9 February 2016, we rated the practice as requires improvement for providing safe services as we found that the practice had no health and safety risk assessment in place. In addition, we found that the practice had not conducted regular Legionella or fire safety checks, and that premises and medical equipment cleaning had not been undertaken.

We asked the provider to take action to remedy the above. We undertook a follow up inspection on 18 May 2017 and found that improvement had been made and processes had been put in place. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- A notice in the waiting room advised patients that chaperones were available if required. All staff who acted as chaperones were trained for the role and had received a Disclosure and Barring Service check (DBS check). (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).
- The practice maintained appropriate standards of cleanliness and hygiene. We observed the premises to be clean and tidy, and saw that the practice had cleaning schedules in place which evidence that the practice was regularly cleaned. There were records

which confirmed that medical equipment cleaning had taken place. There was an infection control protocol in place and staff had received up to date in-house training. Annual and monthly infection control audits were undertaken and we saw evidence that action was taken to address any actions identified as a result.

- At this inspection, the arrangements for managing medicines, including emergency drugs and vaccinations, in the practice generally kept patients safe (including obtaining, prescribing, recording, handling, storing and security). Refrigerated vaccines we checked were in date and stored correctly. In addition, all emergency medicines we checked were in date and stored in a location of the practice known to all staff.

Monitoring risks to patients

Risks to patients were assessed and well managed.

- There were procedures in place for monitoring and managing risks to patient and staff safety. There was a health and safety policy available with a poster in the reception office which identified local health and safety representatives. The practice had up to date fire risk assessments and carried out regular fire drills. The practice had a variety of other risk assessments in place to monitor safety of the premises such as control of substances hazardous to health and infection control and legionella (Legionella is a term for a particular bacterium which can contaminate water systems in buildings).