

Chatham Street Surgery

Inspection report

The Surgery
121 Chatham Street
Reading
Berkshire
RG1 7JE
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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

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 Chatham Street Surgery on 27 February 2019 as part of our inspection programme. Following this inspection, the practice was rated as follows:

Are services safe? – Good

Are services effective? – Requires Improvement

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Requires Improvement

Consequently, the practice was rated as requires improvement overall.

At the February 2019 inspection we rated the practice as requires improvement for providing effective services because:

- There was limited monitoring of the outcomes of care and treatment.
- Some performance data was significantly below local and national averages.
- The practice could not demonstrate how they intended to improve uptake of childhood immunisations and cancer screening.

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

- The overall governance arrangements were operated inconsistently.
- The practice did not have clear and effective processes for managing risks, issues and performance.

We then undertook a focused inspection in response to concerns reported to the commission in July 2019. We did not rate the practice at this inspection, as not all key lines of enquiry were covered.

At the inspection on 23 July 2019 we found:

- The practice did not have clear systems, practices and processes to keep people safe and safeguarded from abuse.
- There were gaps in systems to assess, monitor and manage risks to patient safety.
- The practice was unable to demonstrate that staff had the skills, knowledge and experience to carry out their roles.

- The practice did not have clear and effective processes for managing risks, issues and performance.

This inspection was a comprehensive inspection to check whether the provider had made the necessary improvements.

At this inspection we found:

- The practice did not always provide care in a way that kept patients safe and protected them from avoidable harm.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- There were gaps in systems to assess, monitor and manage risks to patient safety.
- The practice was unable to demonstrate that all staff had the skills, knowledge and experience to carry out their roles.
- There was limited monitoring of the outcomes of care and treatment.
- Some performance data was significantly below local and national averages.
- The practice could not demonstrate effective plans to improve uptake of childhood immunisations and cancer screening.

The area where the provider **must** make improvements are:

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

A further comprehensive inspection will be undertaken to check the progress made against our enforcement action.

(Please see the specific details on action required at the end of this report).

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

Dr Rosie Benneyworth BS BM BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
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 also included a GP specialist advisor and a practice nurse specialist advisor.

Background to Chatham Street Surgery

Chatham Street Surgery is located in a purpose built health centre and is situated in the heart of Reading town centre. There are approximately 6,800 registered patients.

Chatham Street Surgery is a practice within the Berkshire West Clinical Commissioning Group (CCG). (A CCG is responsible for planning and designing local health services in a specific geographic area. They do this by 'commissioning' or buying health and care services).

The practice has a mixed patient population. Patients registered at the practice are from many different ethnic backgrounds with no specific background being prominent due to the variety of cultures in Reading. There are a large proportion of the patients who speak English as a second language. The practice also provides care to asylum seekers, homeless people and refugees.

The practice population has a higher than national average patient group aged between 25-34, with a number of patients being working professionals. However, 10% of the practice population has a working status of unemployed compared to the national average of 6.2%. National data shows the practice ranked five in a scale of one to 10 for economic deprivation (with 10 least deprived and one most deprived). People living in more deprived areas tend to have greater need for health

services. The practice also has a transient patient population with patients often outside of the country for long periods. This has an impact on screening and recall programmes.

There are four GPs (three male and one female) at the practice comprising three partners and two long term locum GPs. Two of the partners are full time and the remaining is part time at the practice. The GP sessions held at the practice equate to 3.75 whole time GPs. The all-female nursing team consists of two practice nurses and two phlebotomists with a mix of skills and experience. The practice has a General Medical Services (GMS) contract.

During the last four years the practice has undergone a significant amount of change. This has involved changes in GP partners and practice management. The appointment of a third partner in early 2017 has stabilised both the clinical and management structure at the practice.

The practice is open between 8.00am and 6.30pm Monday to Friday. Appointments are offered from 8.30am to 12.50pm every morning and afternoon clinics commenced at 12pm with the last appointment at

5.30pm daily. Extended hours appointments are offered on a Monday at the practice and at other GP surgeries in the local area from Tuesday to Sunday as part of federated arrangements.

All services are provided from 121 Chatham Street, Reading, Berkshire, RG1 7JE

The regulated activities for which the practice is registered are:

- Treatment of disease disorder and injury
- Maternity and midwifery services

- Diagnostic and screening procedures
- Family planning
- Surgical procedures

The practice has opted out of providing out of hours services to their patients. Out of hours services are provided by Westcall. The out of hours service is accessed by calling NHS 111. There are arrangements in place for services to be provided when the surgery is closed and these are displayed at the practice and in the practice information leaflet.

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	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>There was a lack of documented evidence of discussions about gaps in employment for a newly recruited member of staff.</p> <p>Actions following an infection control audit were not always responded to.</p> <p>Blank prescription stationery was not always held securely and recorded upon delivery to the practice.</p> <p>Patient group directives were not all appropriately authorised for use by the current staff using them.</p> <p>There was a lack of documented evidence of supervision of allied health professionals.</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	

This section is primarily information for the provider

Enforcement actions

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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Family planning services	State enforcement action taken ...
Maternity and midwifery services	A warning notice was issued
Surgical procedures	
Treatment of disease, disorder or injury	