

# Nuffield House Doctors Surgery

## Inspection report

Minchen Road  
The Stow  
Harlow  
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Date of inspection visit: 12 October 2020  
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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?

Good



Are services caring?

Requires Improvement



Are services responsive to people's needs?

Good



Are services well-led?

Good



# Overall summary

We carried out an announced comprehensive inspection at Nuffield House Doctors Surgery on 12 October 2020. This inspection was to follow up on breaches of regulations identified at a previous inspection on 4 November 2019 and to provide new ratings for the practice.

We took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering how we carried out this inspection. We therefore undertook some of the inspection processes remotely and spent less time on site. We conducted staff interviews between 5 October and 8 October 2020 and carried out a site visit on 12 October 2020.

At the previous comprehensive inspection of 4 November 2019, the practice was rated as inadequate overall and placed into special measures. Safe and effective were rated as requires improvement and caring, responsive and well-led were rated as inadequate. A warning notice was issued in respect of the governance at the practice.

We had scheduled an inspection to follow up on the warning notice earlier this year although this was cancelled due to the COVID-19 pandemic. Therefore, we followed up on the warning notice at this inspection. The provider has met the requirements of this warning notice.

There have been five previous inspections of this practice, four of which were comprehensive inspections where ratings were awarded and one, a focused inspection. The focused inspection was carried out to ensure compliance with a warning notice that was served following the 2017 inspection. The focused inspection was not rated.

The previous inspection history is as follows:-

- Comprehensive inspection on 27 October 2016. The practice was rated as required improvement overall, with safe, effective and well-led rated as requires improvement.
- Follow-up comprehensive inspection on 8 August 2017 and 5 September 2017. The practice was rated as inadequate overall and placed into special measures for a period of six months. The practice was issued with a warning notice.
- Focused inspection on 20 March 2018. The practice had complied with the warning notice.
- Comprehensive inspection on 21 May 2018. The practice was rated as requires improvement, with effective, caring, responsive and well-led rated as requires improvement.
- Comprehensive inspection on 29 April 2019. The practice was rated as requires improvement overall with well-led rated as inadequate.

We based our judgement of the quality of care at this service 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.**

We rated the practice **requires improvement** for people with long-term conditions because:

- Not all patients with diabetes were identified and coded on systems to enable treatment and monitoring.

We rated the practice **requires improvement** for safe because:

- Not all patients prescribed high risk medicines were being monitored.
- We found instances where changes to prescribing guidelines had not been incorporated into prescribing practice.

# Overall summary

We rated the practice **requires improvement** for caring because:

- The practice needed to continue to embed improvements in patient satisfaction into routine systems.

The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The provider **should**:

- Embed improvements made in respect of care and access patient survey data into the day to day running of the practice.
- Continue to identify patients on the practice list who are carers.

I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by this service.

**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

## Population group ratings

Older people	Good	
People with long-term conditions	Requires Improvement	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

## Our inspection team

The remote and onsite inspection team included a GP specialist inspector and a second inspector. The team was led by a CQC inspector.

Prior to the inspection, we carried out remote interviews with the GPs, nurse, practice manager, reception and secretarial staff, patient participation group and representatives from care homes. During our short inspection visit, we looked at records, policies, staff files and other documents that could not reasonably have been viewed remotely.

## Background to Nuffield House Doctors Surgery

Nuffield House Doctors Surgery is situated in Harlow, Essex in premises shared with health visitors and speech and language therapists. There are parking bays for patients who are disabled or with limited mobility; otherwise there is a public car park available close by.

The list size of the practice is approximately 13,500. There are four GP partners and three salaried GPs. They are supported by three practice nurses and an advanced nurse practitioner. There are a number of other staff carrying out administrative and clerical duties.

Since our previous inspection, a new practice manager has been appointed.

This practice is a teaching and training practice, although there are currently no GP registrars at the practice. GP registrars are fully qualified doctors and will have had at least two years of post-graduate experience. Medical students may observe patient consultations and examinations with the patient's consent.

We carried out an announced comprehensive inspection on 12 October 2020. This inspection was to follow up on breaches of regulations identified at a previous inspection on 4 November 2019.

There have been five previous inspections of this practice, four of which were comprehensive inspections where ratings were awarded and one, a focused inspection. The focused inspection was carried out to ensure compliance with a warning notice that was served following the 2017 inspection. The focused inspection was not rated.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Family planning services Maternity and midwifery services Surgical procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance  <b>Systems and processes had not been operated effectively to:</b> <ul style="list-style-type: none"><li>• Identify and monitor patients with diabetes;</li><li>• Ensure patients prescribed certain medicines were appropriately reviewed and monitored.</li></ul> Regulation 17 (1) (2) Good Governance