

The Firs

Inspection report

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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

Inspected but not rated



Are services safe?

Inspected but not rated



Are services well-led?

Inspected but not rated



Overall summary

We previously carried out an announced inspection of The Firs on 5 May 2021. At that inspection, we found the practice was in breach of Regulation 17: 'Good governance' of the Health and Social Care Act 2008. In line with the CQC's enforcement processes, we issued a warning notice which required The Firs to comply with the regulations by 1 July 2021.

The Firs is currently rated as inadequate overall (inadequate for the key questions of 'Safe' and 'Well-led', requires improvement for 'Effective', and good for 'Caring' and 'Responsive').

The full report of the practice's previous inspection can be found by selecting the 'all reports' link for The Firs on our website at www.cqc.org.uk.

We carried out this announced focused inspection on 14 July 2021 to check whether the provider had addressed the issues in the warning notice and now met the legal requirements. This report covers our findings in relation to those specific areas, is not rated, and does not change the current ratings held by the practice.

Throughout the COVID-19 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 did not require a site visit, and included:

- Conducting staff interviews using video conferencing;
- Requesting evidence be provided electronically in advance of the inspection;
- Reviewing documents and information on the practice's computer system and clinical system using video conferencing.

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.

At the inspection on 14 July 2021 we found the provider had taken action to address the issues we identified at the previous inspection, although there was one area in relation to staff training which was still in breach of the regulations.

Our key findings were as follows:

- There were ineffective systems for staff training, in relation to mandatory training requirements for staff and monitoring completion of staff training.
- The practice had systems in place to safeguard vulnerable patients at risk of abuse.
- The practice had made improvements to its recruitment processes and ongoing employment checks.
- Required actions relating to premises and equipment safety had been completed and documented appropriately.
- The practice had implemented an effective system of clinical oversight for the nursing and healthcare staff.

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

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

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

Overall summary

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

Dr Rosie Benneyworth *BM BS BMedSci MRCGP*

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Not inspected	
People with long-term conditions	Not inspected	
Families, children and young people	Not inspected	
Working age people (including those recently retired and students)	Not inspected	
People whose circumstances may make them vulnerable	Not inspected	
People experiencing poor mental health (including people with dementia)	Not inspected	

Our inspection team

Our inspection team consisted of a CQC lead inspector.

Background to The Firs

The Firs is situated in East London, within NHS Waltham Forest Clinical Commissioning Group (CCG). The practice provides primary medical services to around 7,778 patients in the Walthamstow area, under a General Medical Services contract (an agreement between NHS England and general practices for delivering primary care services).

The practice is registered with the CQC to carry on the following regulated activities: Diagnostic and screening procedures; Family planning; Maternity and midwifery services; Surgical procedures; and Treatment of disease, disorder or injury.

The clinical team at the practice consists of two male GP partners, five salaried GPs, a regular locum GP, a nurse practitioner, two practice nurses and a healthcare assistant. There is also a practice manager and a team of management and administrative staff.

The practice is open from 8am to 6.30pm Monday to Friday, with GP appointments available from 8am to 12pm and from 2.30pm to 6.30pm Monday to Friday.

Patients telephoning when the practice is closed are directed to the local out-of-hours service provider, which offers evening and weekend appointments for the practice's patients.

Information published by Public Health England rates the level of deprivation within the practice population group as four, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. In England, people living in the least deprived areas of the country live around 20 years longer in good health than people in the most deprived areas. National General Practice Profile describes the practice ethnicity as being 48.2% White, 24.4% Asian, 17.1% Black, 5.2% mixed ethnicity, and 5.1% other ethnicities.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>There were ineffective systems in relation to staff training. In particular:</p> <ul style="list-style-type: none">• A lack of clarity in relation to mandatory training requirements.• Ineffective monitoring of completion of staff training. <p>These matters are in breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>