

Crook Log Surgery

Inspection report

19 Crook Log
Bexleyheath
Kent

DA6 8DZ

Tel:

www.crooklogsurgery.co.uk

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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 summary

We carried out an announced comprehensive inspection at Crook Log Surgery on 27 March 2019.

At that inspection, we found that:

- Staff had not received relevant training and support for their roles, which impacted their abilities to carry out their duties properly
- Staff recruitment checks were incomplete.
- Clinical premises and equipment was not being properly maintained to ensure it was fit for use.
- The practice did not stock hydrocortisone for acute severe asthma or severe or recurring anaphylaxis.
- We carried out a record review of four patient files and found that one patient had not been coded as pre-diabetic and had not been referred to a diabetic prevention programme.
- The practice did not have a programme of quality improvement.
- Policies had not been updated (since 2017) within the required timeframe (annual) and referred to members of staff that were no longer employees.
- Complaints were not always appropriately managed

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 rated the practice inadequate overall and they were placed into special measures. Because of the concerns found at that inspection, we served the provider with warning notices for breaches of regulation 12 (Safe care and treatment) and regulation 17 (Good governance) of the Health and

Social Care Act 2008 (Regulated Activities) Regulations 2014 which we asked them to have become compliant with by 30 June 2019.

We carried out this focussed follow up inspection on 3 July 2019. We carried out this inspection to check whether the provider had made enough improvements to become compliant with regulations 12 and 17. The practice was not rated on this occasion.

At this inspection, we found that:

- The provider had implemented improvements to address breaches of regulations 12 and 17.
- The provider is maintaining ongoing engagement with the CCG and NHSE regarding improvement plans for the practice.
- Non-clinical staff we spoke with were happy with the changes and management plans in place since our last inspection.
- On review of the 11 items in the regulation 12 warning notice, we found that 8 were fully addressed. Actions were in progress for the three areas not fully addressed: DBS checks, staff immunisations and stocks of medicines for treating medical emergencies. The provider sent us evidence that all medicines not stocked were available in the practice shortly after our inspection.
- On review of the 15 items in the regulation 17 warning notice, we found that all were fully addressed.
- Diabetes reviews and management have been appropriately carried out.
- The provider had carried out an audit on diabetes diagnosis and coding (on their records system) following our last inspection.

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

- Continue to review the arrangements for the management of patients with diabetes in the practice to ensure they are correctly diagnosed and have access to appropriate care and treatment.

Population group ratings

Our inspection team

Our inspection team was led by a CQC lead inspector and supported by a GP specialist advisor.

Background to Crook Log Surgery

Crook Log Surgery is located at 19 Crook Log, Bexleyheath, Kent DA6 8DZ. The practice registered with the Care Quality Commission (CQC) in 2013 as a partnership to provide the regulated activities of: diagnostic and screening procedures, treatment of disease, disorder or injury, maternity and midwifery services, family planning and surgical procedures.

The practice list size is 8148 patients. The staff team comprises male GP partners (one male and one female). In addition, there are four salaried GPs, a part-time practice nurse, an associate practitioner, a prescription team (two members), three receptionists, seven administrators, a part-time practice manager, and part-time assistant practice manager. The practice has employed a new full-time practice manager who is due to start in May 2019. The practice is wheelchair accessible and has a lift and baby changing facilities.

The practice is open from 8am to 7.30pm on Monday and from 8am to 6.30pm on Tuesday, Wednesday, Thursday

and Friday. Pre-bookable appointments are from 8am-11am Monday to Friday for the walk-in clinic and from 3.30pm-6.30pm Monday to Friday. Extended hours are provided between 6.30pm and 8pm Monday. The practice has opted out of providing out-of-hours services; these services are provided by the locally agreed out-of-hours provider for the CCG.

The practice is a member of Bexley Clinical Commissioning Group (CCG) and is one of 28-member practices. The National General Practice Profile states that of patients registered at the practice 8% are from an Asian background, 86% are white, 4% are black and a further 6.9% originate from mixed or other non-white ethnic groups. Information published by Public Health

England, rates the level of deprivation within the practice population group as nine, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.