

Figges Marsh Surgery

Inspection report

182 London Road
Mitcham
CR4 3LD
Tel: 02086404445
www.figgesmarsh.co.uk

Date of inspection visit: 22 & 27 September and 01
October 2021
Date of publication: 04/11/2021

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	Good	
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Are services safe?	Requires Improvement	
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Are services effective?	Good	
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Are services caring?	Good	
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Are services responsive to people's needs?	Good	
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Are services well-led?	Good	
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Overall summary

We carried out an announced comprehensive inspection at Figges Marsh Surgery on 22 & 27 September and 01 October 2021 as part of our inspection programme. Overall, the practice is rated as Good. The practice was previously inspected in June 2019. Following that inspection, the practice was rated as requires improvement overall (requires improvement in safe, effective, caring and well-led) for issues in relation to safe care and treatment, staff training, patient experience and governance arrangements.

The ratings for each key question are:

Safe Requires Improvement

Effective Good

Caring Good

Responsive Good

Well-led Good

The full reports for previous inspections can be found by selecting the 'all reports' link for Figges Marsh Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was to follow up the breaches of regulation identified at the previous inspection.

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.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, considering the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections. This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included

- Requesting evidence from the provider in advance of the site visit .

Our findings

Overall summary

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 Good overall and requires improvement for safe due to a more consistent approach required to the recording and the follow up of blood tests for patients on high risk medicines. We have rated population group: working age people as requires improvement due to low uptake of cervical smears.

We found that:

- The practice had made significant improvements to their governance and systems.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Access to care had been improved at the practice with patients' feedback largely positive about their experience of accessing the practice.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Patients could access care and treatment in a timely way.

The provider should:

- Improve the process or recoding blood results to ensure the system of recording blood tests is consistent .
- Should continue efforts to increase childhood immunisations uptake and cervical smear screening.
- Should continue efforts to establish a Patient Participation Group.

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

Dr Rosie Benneyworth BM BS BMedSci MRCP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Figges Marsh Surgery

The registered provider of the service is Figges Marsh Surgery Located in Mitcham, South West London minutes away from St George's Hospital London.

Regulated activities are delivered to the patient population from the following address:

182 London Road
Mitcham
Surrey
CR4 3LD

The practice is registered as a partnership with the Care Quality Commission to provide the regulated activities of diagnostic and screening services, maternity and midwifery services and treatment of disease, disorder or injury. Regulated activities are provided at one location operated by the provider. The practice website is <https://www.figgesmarshsurgery.nhs.uk/your-surgery/>.

Figges Marsh Surgery provides services to 9400 patients in Mitcham, Surrey and is one of 23-member practices of Merton Clinical Commissioning Group (CCG) and are part of the East Merton GP Primary Care Network(PCN). The practice has a higher than local and national average population of children and young people and a lower than local and national average number of those over 65 .The practice also has a high transient population.

Figges Marsh Surgery operates from a purpose-built medical center, comprising eight consulting rooms, one treatment room, an 'annex' room, one conference room, administrative office space and a patient waiting area with three patient toilets. The surgery is accessible to those with mobility problems.

The practice staff consist of two full time male GPs who are partners. One fixed share partner female, two full time Salaried GPs, a female & male and a physician associate. The nursing team consists of one practice nurse and one full-time health care assistant. The practice has also employed another nurse due to commence in November 2021.The practice employs one phlebotomist who also undertakes administrative duties. One clinical pharmacist, a part time practice manager, a full-time patient services manager, two care coordinators, five reception staff and three administrators.

Information published by Public Health England shows that deprivation within the practice population group is in the fifth lowest decile (five of 10). The lower the decile, the more deprived the practice population is relative to others. According to the latest available data, the ethnic make-up of the practice area is approximately 44% are White or White British, 27% are Black or Black British, 21% are Asian or Asian British and 8% are other or mixed ethnic backgrounds.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. However, the practice had resumed face to face appointments after screening by a clinician. We also noted that the practice doors were open for patients to attend freely.