

East End Medical Centre

Quality Report

61 Plashet Road Plaistow London E13 0QA Tel: 020 8470 81186 Website: n/a

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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.

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Letter from the Chief Inspector of General Practice

We carried out an announced focused inspection at East End Medical Centre on 15 February 2018. This inspection was a follow-up inspection to an earlier inspection in March 2017. At the February 2018 inspection, we issued the practice with a warning notice for breach of Regulation 17 of the Health and Social Care Act (HCSA) 2014. We found that the provider did not have effective governance systems and processes in place to keep people safe. The report on the February 2018 focused follow-up inspection can be found by selecting the 'all reports' link for East End Medical Centre on our website at www.cqc.org.uk.

This inspection was a focused follow-up inspection carried out on 11 June 2018 to confirm that the practice

had addressed the issues in the warning notice and now met the legal requirements. This report covers our findings in relation to those requirements and will not change the current ratings held by the practice.

At the inspection we found that the requirements of the warning notice had been met.

Our key findings were as follows:

- The provider demonstrated role-specific training for nursing staff.
- Nursing staff conducted duties within a remit agreed by the provider.
- The provider had conducted appraisals for nursing staff.

Key findings

• Care records completed by nursing staff had been reviewed by a GP.

However, there were also areas of practice where the provider should make improvements.

In addition, the provider should:

• Establish a programme of care record reviews for all clinical staff

Professor Steve Field (CBE FRCP FFPH FRCGP) Chief Inspector of General Practice



East End Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC inspector and included a GP specialist adviser.

Background to East End Medical Centre

The East End Medical Centre provides services to approximately 6258 patients in east London under a Personal Medical Services contract (an agreement between NHS England and general practices for delivering personal medical services). The practice is within the Newham Clinical Commissioning Group (CCG). The practice provides services including childhood immunisations, influenza and pneumococcal immunisations, and learning disabilities health checks.

The staff team consists of two female partner GPs, one male salaried GP, two long term locum GPs (one male and one female), a part time healthcare assistant, a full time female practice nurse, a part time practice manager and business manager, and administrative and secretarial staff.

The practice provides a total of 25 GP sessions per week. The premises are a three-storey adapted residential property accessible to patients with mobility difficulties with consulting rooms on the ground floor.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments with GPs are 9.30am to 12pm and 4pm to 6.30pm. Appointments with the nurse and the healthcare assistant can be made from 8.30am each morning. Patients can access extended hours appointments through a network hub of local practices on

Mondays 6.30pm to 9pm and Saturdays 9am to 1pm, this service being provided by the local GP co- operative. In addition to pre-bookable appointments that can be booked up to four weeks in advance, urgent appointments are also available for people that need them. The practice provides an online appointment booking system and an electronic repeat prescription service.

The practice is registered with the Care Quality Commission as a partnership, to carry out the regulated activities of maternity and midwifery services, treatment of disease, disorder or injury, family planning, and diagnostic and screening procedures. The information published by Public Health England rates the level of deprivation within the practice population group as three on a scale of one to ten. Level one represents the highest levels of deprivation and level ten

the lowest. 80% of people in the practice area were from Black or Minority Ethnic (BME) groups.

Why we carried out this inspection

We undertook a follow up focused inspection of East End Medical Centre on 15 February 2018. Breaches of legal requirements of the Health and Social Care Act (HSCA) 2014 were identified and we issued a Warning Notice to the practice in respect of Regulation 17 of the HSCA 2014 – Good Governance. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

During our inspection we:

• Spoke with a practice nurse, a practice manager and a partner GP.

Detailed findings

- Reviewed practice documentation including staff records.
- Reviewed a sample of the personal care or treatment records of patients.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 15 February 2018, we rated the practice as requires improvement for providing effective services as the arrangements in respect of having effective systems and processes to ensure good governance, as well as providing appropriate support, training, and supervision for staff needed improving.

These arrangements had significantly improved when we undertook a follow up inspection on 11 June 2018.

Effective staffing

• The practice could demonstrate it ensured role-specific training and updating for practice nursing staff. Following our inspection in February 2018, the practice had implemented a system to allow oversight and monitoring of the work conducted by nursing staff. The nursing staff conducted clinical duties which had been agreed by the provider and within nursing staff's clinical areas of responsibility. These areas included reviewing patients with long-term conditions, administering immunisations and taking samples for cervical screening. All other areas of clinical practice and care was undertaken by GP's at the practice. The monitoring of accuracy in completing patient records by nursing staff was conducted regularly by GP's at the practice to

- ensure compliance with legal requirements. We saw evidence that nursing staff no longer undertook female patient's breast examinations and examinations for irregular menstrual bleeding for which they were not suitably trained. In addition, practice nursing staff no longer undertook elements of some patient assessments and reviews. This related in particular to patient specific considerations under the Mental Capacity Act 2005 such as learning disabilities or mental health.
- The practice provided us with evidence that the learning needs of members of clinical staff had recently been reviewed. At our inspection in February 2018, we found that nursing staff learning needs, duties, and related levels of competence were not always understood or addressed effectively by staff at the practice. At this inspection, we saw that nursing staff had been provided with a recent appraisal which reviewed performance as well as setting objectives/plans (including professional development) for the coming year. This appraisal had been documented and the provider told us that the appraisal would be reviewed periodically to ensure that objectives set were being met. We also saw that refresher training including understanding mental capacity, safeguarding and cytology had been booked for nursing staff to attend.