

Sidcup Medical Centre

Inspection report

2 Church Avenue
Sidcup
DA14 6BU
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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	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Requires Improvement	
Are services well-led?	Good	

Overall summary

We carried out a review of Sidcup Medical Centre on 6 July 2021. We carried out this inspection to check if Crook Log Surgery, which merged with Sidcup Medical Centre in 1 April 2020 has become compliant with regulations, as the last inspection of that service had found it requires improvement, but the practice had remained in special measures.

The full reports for previous inspections can be found by selecting the 'all reports' link for Crook Log Surgery and Sidcup Medical Centre on our website at www.cqc.org.uk

Why we carried out this review

This inspection was a comprehensive special measures follow up inspection.

We have rated this practice as Good overall, but requires improvement for providing responsive services and for providing services to the six population groups we inspect.

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 and the public.

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How we carried out the review

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 reviews differently.

This review was carried out by carrying out short visits to each of the practice sites, requesting documentary evidence from the provider and carrying out interviews with staff remotely, or asking to complete questionnaires and return them to us.

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

Ensure the care and treatment of patients is appropriate, meets their needs.

The areas where the provider should make improvements are:

- to review the outcomes of health and safety assessments, take and record any necessary actions as required.
- to continue monitoring patients' health in relation to the use of medicines including high risk medicines with appropriate monitoring and clinical review prior to prescribing
- to seek out and act on the experiences of people most likely to face inequalities in accessing services

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

Dr Rosie Benneworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities, reviewed completed staff questionnaires and undertook the sites' visits. 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 Sidcup Medical Centre

Sidcup Medical Centre operates across four sites:

Church Avenue Surgery, 2 Church Avenue, Sidcup, Kent

Burnt Oak Lane Surgery, 231 Burnt Oak Lane, Sidcup, Kent

Thanet Road Surgery, 63 Thanet Road, Bexley, Kent

Crook Log Surgery, 19 Crook Log, Bexleyheath, Kent

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 20107 patients. The staff team comprises six GP partners, one female and five male. In addition, there are six salaried GPs, five nurse practitioners, four part-time practice nurses, and an extensive team of administrative staff. The practice management is led by the Chief operating officer, who was previously the practice manager, a full time practice manager, and an assistant practice manager. The service also received support from three pharmacists through the local GP federation.

Each of the practice sites is wheelchair accessible, with lift access or accessible ground floor consultation rooms.

The practice is open from 8am to 8pm on Monday, and from 8am to 6.30pm on Tuesday, Wednesday, Thursday and 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 5% are from an Asian background, 89% are white, 3% are black and a further 3% 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 seven, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

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	Regulation 9 HSCA (RA) Regulations 2014 Person-centred care Reasonable adjustments were not being made to enable service users to receive their care or treatment. In particular: Patients did not experience timely access to care and treatment as patients reported having problems getting through to the practice by telephone and using the online consultation system effectively, having the type of access they needed for their condition.