

City Road Medical Centre

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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at City Road Medical Centre on 15 March 2019 as part of our inspection programme.

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 requires improvement overall.

We found that:

- The service staff did not ensure that staff commencing employment with the service underwent an induction programme.
- 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.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The overall governance arrangements required improvement.
- It had not ensured that all staff who needed one were supported by a programme of annual appraisals.

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

- Ensure care and treatment is provided in a safe way to patients.
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out the duties.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

- Review the current system for reviewing staff immunisation status so an up to date record is kept.
- Carry out regular fire drills to mitigate the risks associated with a fire.
- Make service leaflets available in other languages and in an easy read format for the benefit of patients who would otherwise experience difficulty in reading leaflets.
- Enable patients to access information about how to make a complaint on the service website.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor.

Background to City Road Medical Centre

City Road Medical Centre is sited within a GP practice, also named City Road Medical Centre, located at 190-196 City Road, London EC1V 2QH. It is one of three services providing nine clinics operating, between them, Monday to Friday each week providing specialist Ear Nose and Throat (ENT) outpatients clinic, and collectively known as Islington Community ENT Service.

The provider, which also runs a GP Hub service and a specialist community gynaecology service is registered with CQC to deliver the Regulated Activities of: Maternity and midwifery services; Surgical procedures; Diagnostic and screening procedures; Treatment of disease, disorder or injury.

City Road Medical Centre is situated within the Islington Clinical Commissioning Group (CCG) and provides a specialist ENT service. The provider Islington GP Group Limited is a GP Federation with shareholders comprising of 31 of the 32 GP Practices in Islington CCG. In addition to the ENT service it also provides local GP Hubs offering

appointments to patients between 6.30pm - 8.00pm Monday to Friday and 8.00am – 8.00pm at weekends and a community gynaecology service within Haringey and Islington.

The service is available, by referral, to all patients registered with a GP practice that is part of Islington CCG. The service operates under the terms of a contract with Islington CCG.

The clinical staff team at the service includes three part-time GPs, one of whom is also the clinical lead and Registered Manager of the service. All of the GPs had a special interest in ENT and had gained either a post-graduate diploma in ENT or an equivalent secondary care qualification. The non-clinical staff consist of a full-time operations manager and two administrators, though there are other staff of the provider who provide input into the service, including human resources and additional administration support to provide cover.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>The provider had not ensured:</p> <ul style="list-style-type: none">• There were formal arrangements to ensure chaperones were available, had received training for the role, and a DBS check.• The host GP practice held appropriate stocks of emergency medicines and equipment or that these were regularly checked and replenished as necessary.• The clinical room it occupied was being regularly cleaned, by the host practice, in accordance with the cleaning schedule.• GPs had access to medical equipment for the diagnosis of sepsis or other medical emergencies.• It had risk assessed what additional medicines or equipment it might need to deal with a medical emergency during treatment of patients. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular we found:• The service had not established regular meetings with recording of discussions and decisions for the benefit of learning and for staff who had been unable to attend.

This section is primarily information for the provider

Requirement notices

- There was no written protocol for the management of test results.
- The infection prevention and control audit the service had undertaken did not contain sufficient information to confirm which location it related to, or evidence that identified issues had been rectified.
- Staff of the host GP practice who interacted with patients had not signed confidentiality agreements for that purpose.

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing

How the regulation was not being met:

The registered provider had failed to ensure:

- All staff who needed one were supported via a programme of annual appraisals;
- Staff underwent induction training.

This was in breach of regulation 18(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.