

# Roxbourne Medical Centre





## Inspection report

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Harrow  
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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?	Inadequate	
Are services effective?	Requires Improvement	
Are services well-led?	Requires Improvement	

# Overall summary

We carried out an announced inspection at Roxbourne Medical Centre on 6 and 14 April 2022. Overall, the practice is rated as requires improvement.

Set out the ratings for each key question

Safe - inadequate

Effective – requires improvement

Well-led – requires improvement

Following our previous inspection on 4 December 2019, the practice was rated Good overall and for all key questions.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Roxbourne Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a focused inspection to follow up on:

- *Specific concerns reported by members of the public*

## How we carried out the inspection

Throughout the 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 inspections differently.

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:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice’s patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

## Our findings

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.

# Overall summary

## We have rated this practice as Requires Improvement overall

We found that:

- The practice had good systems in place to safeguard patients from abuse or harm.
- Staff recruitment and training files were not always complete, in particular vaccination records and prioritising mandatory training such as infection prevention and control.
- A significant number of documents were found on the digital patient records system awaiting review, coding and filing.
- Clinical searches found a number of patients on repeat and/or high-risk medicines who had not had reviews and monitoring in a timely manner.
- Two suggested emergency medicines were not found on the day of inspection. There was no formal risk assessment for the omission of these medicines. This was implemented immediately after the inspection.
- Patients with long term conditions did not always receive monitoring in a timely manner.
- Leaders did not always recognise the challenges to providing care to their practice population.
- The practice did not have a comprehensive succession plan in place.
- The practice had a vision; however, staff did not have a good awareness of it to apply to their daily job roles.
- Comprehensive policies were in place, but these were not sufficiently embedded to ensure that there were no gaps in care and treatment.
- The practice did not provide adequate access to all patients throughout the pandemic and leaders did not show that patient needs and concerns around access had been appropriately considered.
- Staff were very happy working at the practice and told us that leaders were friendly and approachable.

We found three breaches of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The provider **should**:

- Implement quality improvement processes for example in-house two-cycle audits to monitor quality of care and improve the quality of care provided at the practice.
- Investigate, respond, and utilise information to improve, when patients provide suggestions, feedback or voice concerns. Consider ways to improve access to care for all groups of patients, especially on site where doors were locked despite COVID restrictions easing, and alternative means to book appointments besides online-only.
- Develop appropriate succession planning.
- Continue work to improve rates of childhood immunisation and cancer screening.
- Modify existing induction systems to allow for new recruits to complete mandatory training in a timely manner to ensure patient safety.

**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

## 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 Roxbourne Medical Centre

Roxbourne Medical Centre is located in Harrow at:

37 Rayners Ln

Harrow

HA2 0UE

Roxbourne Medical Centre is a GP practice located in Harrow and is part of the North West London Clinical Commissioning Group (CCG).

The practice is located in purpose-built premises. A number of community health services are offered at the premises by the different providers. The practice is fully accessible and has disabled parking spaces and entrance at the rear of the building.

The practice has been part of the Healthsense Primary Care Network (PCN) since July 2019.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning, surgical procedures and treatment of disease, disorder or injury.

The practice provides services to approximately 7,455 patients under the terms of a General Medical Services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

There is a principal GP, supported by 3 salaried GPs and GP locums. Two GPs are male and two are female. The GP team normally provide 31 sessions per week.

The practice employs a practice nurse, a health care assistant, a clinical pharmacist and two phlebotomists, as well as a paramedic and a physician associate. The practice manager is supported by the operations manager, reception manager and a team of the administrative and reception staff.

Roxbourne Medical Centre is a teaching practice, where they teach medical students and physician associate students. Students have access to a senior GP throughout the day for support. The practice was approved as a GP training practice on 13 November 2019 and currently supports two GP registrars.

Out of hours (OOH) service is provided by 111.

The patient population is ethnically diverse and 63% of the population is composed of patients with an Asian, Black, mixed or other non-white background. Information published by Public Health England rates the level of deprivation within the practice population group as six, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 81 years compared to the national average of 79 years. Female life expectancy is 86 years compared to the national average of 83 years.

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

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

#### Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

- Two suggested emergency medicines were not found on the day of inspection. There was no formal risk assessment for the omission of these medicines. This was implemented immediately after the inspection.

#### Regulated activity

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

#### Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

The registered person had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed.

In particular:

- Staff recruitment and training files were not always complete, in particular vaccination records.

This section is primarily information for the provider

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that were not being met.

Regulated activity	Regulation
Diagnostic and screening procedures	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <ul style="list-style-type: none"><li>• A significant number of documents were found on the digital patient records system awaiting review, coding and filing dating to November 2021.</li><li>• Comprehensive policies were in place but these were not sufficiently embedded to ensure that there were no gaps in care and treatment.</li><li>• The practice was not able to evidence effective governance. In particular, appropriate care of patients on high risk medicines or with long term conditions, and efficient management of documentation relating to patient care.</li></ul>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	