

Care UK - North West London

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

Good 

Are services safe?

Good 

Overall summary

Our previous comprehensive inspection at the Care UK - North West London Out of Hours (OOH) service on 19 & 20 September 2018 found breaches of regulations relating to the safe delivery of services. The full comprehensive report on the previous inspection can be found on our website at: www.cqc.org.uk/location/1-347527923.

We carried out an announced focused inspection at the Care UK - North West London OOH service on 12 September 2019 to follow up on those breaches of regulations relating to the safe key question.

The key questions are rated as:

Are services safe? – Good

At this inspection we found:

- The service had made improvements and they were providing safe care in accordance with the relevant regulations.
- They had implemented a monitoring system to assure that all self-employed GPs clinical equipment was checked and calibrated to ensure it was safe to use and was in good working order.

- The service had taken steps to monitor and review the fire safety and the management of legionella at the Hillingdon out of hours primary care centre (OOH PCC) and the Harrow OOH PCC.
- They had carried out site specific lone worker risk assessments.
- A risk assessment had been carried out to assess the suitability of the premises at the Harrow OOH PCC and monthly health and safety checks were implemented to ensure continuous monitoring.
- The service had maintained written records of oxygen cylinder checks.
- The service had carried out two disease specific audits to ensure effective monitoring of antimicrobial prescribing.
- Hearing induction loops had been provided at all out of hours primary care centres (OOH PCCs) to improve access to patients with hearing difficulties.

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Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

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

Background to Care UK - North West London

Care UK is a large UK based independent provider of health and social care.

Care UK-North West London provides out-of-hours (OOH) primary medical services when GP practices are closed. The out-of-hours service covers a population of over a million people across outer North West London including Brent, Harrow, Hillingdon, Ealing and Hounslow.

The provider is contracted by the NHS clinical commissioning groups and also has 162 Service Level Agreements (SLA's) for individual practices.

Most patients access the out of hours service via the NHS 111 telephone service. Patients may be seen by a clinician, receive a telephone consultation or a home visit, depending on their needs. Rarely patients access services as a walk-in patient.

The administrative base and call centre for Care UK-North West London is located in Southall. The full address for call centre and headquarters is:

- Care UK- North West London, Unit 1, Square One, Navigator Park, Southall Lane, Southall, UB2 5NH. We visited the administrative base and call centre to review relevant information and meet with the service staff.

Out-of-hours (OOH) services are delivered from three primary care centres (PCCs). They are:

- Harrow OOH PCC: St Marks Hospital opened from 8pm to 11pm Monday to Friday, from 9am to 11pm on a Saturday and from 9am to 10pm on a Sunday. We visited this base.
- Hillingdon OOH PCC: Hillingdon Hospital opened from 7.30pm to midnight Monday to Friday, from 8am to 11pm on a Saturday and from 9am to 11pm on a Sunday.
- Hounslow OOH PCC: Skyways Medical Centre opened from 10am to 1pm and 3pm to 7pm on a Saturday and Sunday.

OOH Primary Care Centres are situated in rented spaces and the facilities are managed by the host organisations.

The provider is registered to provide two regulated activities:

- Treatment of disease, disorder or injury;
- Transport services, triage and medical advice provided

Are services safe?

We rated the service as good for providing safe services.

When we inspected the service in September 2018 we found that this service was not providing safe care in accordance with the relevant regulations. This was because:

- The service had not assured that all self-employed GPs' clinical equipment was checked and calibrated to ensure it was safe to use and was in good working order.
- The service was unable to demonstrate that they had an effective monitoring system to assure themselves that appropriate health and safety checks had been undertaken regularly to maintain fire safety and legionella at the Hillingdon out of hours primary care centre (OOH PCC) and the Harrow OOH PCC.
- The service had not carried out site specific lone worker risk assessments. Staff we spoke with and written feedback we received, raised concerns regarding inappropriate safety and security arrangements at the Harrow OOH PCC and the Hounslow OOH PCC.

In addition, we said the provider should make improvements in the following areas:

- Provide clinical staff with access to a paediatric pulse oximeter which could help assess a child patient with presumed sepsis.
- Review feedback on the suitability of the premises at the Harrow OOH PCC and take any necessary action.
- Implement a system to ensure written records were maintained of oxygen cylinder checks.
- Carry out disease specific audits to ensure effective monitoring of antimicrobial prescribing.

At the September 2019 inspection, we found improvements had been made and the service was providing safe care in accordance with the relevant regulations.

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse.

- The service conducted safety risk assessments.
- The service ensured that facilities and equipment were safe and that equipment was maintained according to manufacturers' instructions.
- For example, each out of hours primary care centre (OOH PCC) had calibrated clinical equipment provided

by the service. Self employed GPs were allowed to use their own clinical equipment, but they were asked to sign a declaration to confirm that their equipment had been calibrated within the last 12 months.

- If a self employed GP decided to use their own clinical equipment, then at the start of every shift, reception staff checked the clinical equipment to ensure they were calibrated and safe to use. This information was documented in the daily shift report.
- The service had carried out ad hoc audits to check for compliance.
- The service organised annual calibration of equipment at the call centre and all clinicians were invited to bring their own equipment for calibration.
- The service had a lone worker policy in place. The service had carried out site specific lone worker risk assessments at the out of hours primary care centres (OOH PCCs). The service had implemented appropriate controls at each OOH PCC. All staff had been provided with mobile personal alarms.
- The service had carried out an anonymous survey of operational staff working at the OOH PCCs including questions about lone worker safety. We noted 50% (9 out of 18) of staff took part in the survey and it did not identify any concerns.
- On the day of the inspection, the staff we spoke with were satisfied with safety and security arrangements at the OOH PCCs.
- The service informed us that safety and security arrangements were discussed regularly in staff meetings and no concerns had been raised. Harrow OOH PCC was based on a NHS hospital trust site with on-site security present at all times. The service had stopped offering weekday clinics at the Hounslow OOH PCC and on weekends another hub service was operating at the same time, so the staff were not alone at any time.
- The service had carried out a risk assessment to assess the suitability of the premises at the Harrow OOH PCC. The service had implemented monthly health and safety checks. Harrow OOH PCC was located at another NHS property and the host was responsible for managing the premises and the service had limited control over their environment. However, the service had received assurance from the host that the ventilation had been checked and it was functioning

Are services safe?

properly. The service maintained a log of all maintenance issues which were raised with the host. We saw a portable fan was provided in the reception and waiting area.

Risks to patients

There were systems to assess, monitor and manage risks to patient safety.

- All GPs working in the out of hours primary care centres had access to a paediatric pulse oximeter which could help assess a child patient with presumed sepsis. The paediatric pulse oximeters were kept securely, and the GP was required to request it from the receptionist when needed. We noted the paediatric pulse oximeters were carried in vehicles for home visits.

Appropriate and safe use of medicines

The service had reliable systems for appropriate and safe handling of medical gas cylinders.

- Arrangements were in place to ensure medical gas cylinders carried in vehicles were stored appropriately. The service informed us that oxygen cylinders carried in vehicles were checked on a regular basis and written records of these checks were maintained at the call centre.
- The service had audited antimicrobial prescribing and carried out two disease specific audits to assure prescriptions were given appropriately. For example, the service had carried out an audit to review the use of antibiotics used to treat urinary tract infections (UTIs). The service had reviewed a random sample of 20 patients. The clinical audit had identified that 10% of the cases had not included appropriate clinical justification and 80% of the cases had an antibiotic prescribed for the wrong length of time. The service had developed a comprehensive action plan, which was shared with all clinicians and they were advised to follow relevant and current evidence based guidance, including the National Institute for Health and Care Excellence (NICE) best practice guidelines. The service planned to carry out a repeat audit after six months to ensure continuous monitoring.

Track record on safety

The service had a good safety record.

- There were comprehensive risk assessments in relation to safety issues.
- There were up to date fire risk assessments at the call centre, the Harrow OOH PCC, Hillingdon OOH PCC and the Hounslow OOH PCC. The service had carried out health and safety risk assessments and implemented regular safety checks carried out by a dedicated risk and audit manager to ensure fire safety. Fire drills were carried out at the call centre and table top exercises were carried out at all OOH PCCs.
- Legionella (a bacterium which can contaminate water systems in buildings) risk assessments were carried out at the Hillingdon OOH PCC in September 2018 and the Harrow OOH PCC in July 2016. We saw a water safety audit was carried out in March 2018 at the Harrow OOH PCC. The service informed us that the host had assured them that they would carry out a new legionella risk assessment after the completion of ongoing renovation work at the Harrow OOH PCC. During the previous inspection, we noted the service had appropriate arrangements in place to ensure the management of legionella at the Hounslow OOH PCC.
- On the day of the inspection, the service was unable to provide records to demonstrate that regular water temperature checks had been carried out at the Hillingdon OOH PCC and the Harrow OOH PCC. The service informed us they had requested to access water temperature checks records at the Hillingdon OOH PCC and the Harrow OOH PCC, but due to lack of cooperation, they were still waiting for the response from the hosts responsible for managing the premises. We saw the evidence that the service had made regular efforts to access the safety records. Both OOH PCCs were located at another NHS property and the service had limited control over their environment. However, a day after the inspection, the service informed us they had purchased a thermometer and decided to carry out monthly water temperature checks themselves. The service had shared water temperature records with us which were within the recommended range. The service informed us they had sent water samples for external laboratory analysis and they were waiting for the results.
- We noted the service had taken a number of steps to mitigate and monitor the risks. This helped it to understand risks and gave a clear, accurate and current picture that led to safety improvements.