

Dr Jerome Kaine Ikwueke

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

Inadequate



Are services safe?

Inadequate



Are services effective?

Requires Improvement



Are services caring?

Good



Are services responsive to people's needs?

Requires Improvement



Are services well-led?

Inadequate



Overall summary

We carried out an announced inspection at Dr Jerome Kaine Ikwueke on 22 July 2021. Overall, the practice is rated as Inadequate.

We had previously carried out an announced comprehensive inspection at Dr Jerome Kaine Ikwueke on 9 January 2017. At that time, the practice was rated as Good overall and Good for providing safe, effective, caring, responsive and well led services. The practice was also rated as Good for all six population groups.

Ratings for each key question (22 July 2021)

Safe - Inadequate

Effective - Requires Improvement

Caring – Good

Responsive - Requires Improvement

Well-led - Inadequate

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Dr Jerome Kaine Ikwueke on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a focused inspection to follow up on information of concern we hold about the location.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, considering 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:

Overall summary

- 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 Inadequate overall and requires improvement for all population groups.

We found that:

- There were inadequate systems in place to manage risks associated with emergency situations.
- When things went wrong, the approach to reviewing and investigating causes was insufficient.
- We saw instances of where care and treatment were not delivered in line with evidence-based guidance (for example regarding gaps in monitoring high risk medicines).
- Complaints were handled inappropriately and we did not see evidence of discussion, shared learning or how complaints led to improvements in the quality of care.
- Governance arrangements hindered the delivery of high-quality care (for example regarding staff induction arrangements and arrangements for acting on safety alerts).
- Patient feedback was above local and national averages regarding phone and appointments access. Patients fed back that they could access the right care at the right time.

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

- Establish an effective and accessible system for identifying, receiving, recording, handling and responding to complaints.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

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

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)	Inadequate 

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 Dr Jerome Kaine Ikwueke

Dr Jerome Kaine Ikwueke (also known as Grove Road Surgery) is a GP practice located in the London Borough of Harringey and is part of the NHS Harringey Clinical Commissioning Group (CCG). The practice provides care to approximately 4600 patients and the practice area population has a deprivation score of 2 out of 10 (1 being the most deprived). Grove Road Surgery serves a higher than average number of elderly patients and cares for a diverse population (with approximately 46% of its patients from Black and minority ethnic backgrounds).

The practice holds a GMS (General Medical Services) contract with NHS England. This is a contract between NHS England and general practices for delivering general medical services and is the most common form of GP contract.

The practice is registered with the Care Quality Commission to provide the following regulated activities:

- Diagnostic and screening procedures;
- Maternity and midwifery services and
- Treatment of disease, disorder or injury.

The practice team consists of one male lead GP and two salaried GPs (one female, one male), part time female practice nurse, female health care assistant, female clinical pharmacist, practice manager and an administrative/reception team.

The practice's opening hours are 8:00am to 6:30pm on weekdays with extended hours appointments operating between 6:30pm to 7:30pm on Mondays and Tuesdays.

Patients can also book appointments to be seen at local hub centres between 6:30pm and 8:30pm on weekdays and 8:00am to 8:00pm at weekends.

The practice is located on the ground floor and offers step free access.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations.

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 Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 16 HSCA (RA) Regulations 2014 Receiving and acting on complaints</p> <p>Regulation 16 HSCA (RA) Regulations 2014 - Receiving and acting on complaints</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">The provider did not operate an effective system for identifying, receiving, recording, handling and responding to complaints by service users and other persons in relation to the carrying on of the regulated activities. <p>This was in breach of Regulation 16 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Enforcement actions

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 Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Systems or processes must be established and operated effectively to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users.</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• The provider did not operate effective systems and processes to manage risks associated with emergency situations.• The provider did not operate effective systems and processes for actioning safety alerts.• The provider did not operate effective systems and processes to share learning from significant incidents and to use this information to minimise risks and improve patient safety.• The provider did not operate effective systems and processes to ensure that service users prescribed medicines received appropriate monitoring.• The provider did not operate effective systems and processes to ensure that new staff received an appropriate programme of induction. <p>This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>