

Modality Lewisham

Inspection report

Jenner Health Centre 201-203
Stanstead Road
London
SE23 1HU
Tel: 02034746111

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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?

Good



Are services caring?

Good



Are services responsive to people's needs?

Requires Improvement



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced comprehensive at Modality Lewisham on 2 August 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - good

Caring - good

Responsive – requires improvement

Well-led – requires improvement

Why we carried out this inspection

We inspected the practice because it was newly registered following the merging of three practices. This inspection was comprehensive and covered the key questions, are services safe, effective, caring, responsive and well-led.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing. We interviewed staff remotely in the lead up to our on-site inspection and also on 4 August 2023, following our visit. We spoke with Modality HR managers by video conference on 4 August 2023 and arranged a remote interview with the Modality Operations Manager on 10 August 2023.
- Completing clinical searches on the practice's patient records system on 1 August 2023 (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- Three site visits.

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.

We found that:

- The provider delivered care from three practice locations in buildings managed by NHS Property Services. There were some risks that were not well managed, related to safety risks in the buildings which were managed by another organisation.

Overall summary

- Care and treatment did not always reflect prescribing standards and best practice. Records we reviewed showed a small number of patients had not received monitoring or appropriate follow up, in line with current evidence-based guidance.
- The practice had not met targets for cervical screening and childhood immunisations. However, there were robust recall systems and performance against these targets was continually reviewed and monitored.
- Safety alerts were not always managed effectively to keep patients safe.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- People could not always access care and treatment in a timely way. Although we saw the practice was attempting to improve access, this was not yet reflected in the GP patient survey data or other sources of patient feedback.
- Some recruitment information was unavailable at the time of request, as some staff files were held in multiple locations. Senior HR managers told us staff files were still being migrated from old practice IT systems to the Modality Partnership central staff database.
- Staff provided positive feedback about working at the practice which indicated that there was a good working culture. Learning was shared effectively and used to make improvements.
- Although there were some strong systems and processes to manage risks to patients there were some risks that were not well managed. For example, medicines management processes for monitoring patients with long term conditions, required improvement.

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

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the provider **should**:

- Continue to implement a programme to improve uptake for cervical screening and childhood immunisations.
- Continue to improve processes for collating and storing recruitment and staff files to ensure information is easily accessible to managers.
- Continue to encourage patients to become members of the patient participation group.

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health 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 second CQC inspector and a practice manager specialist advisor who undertook a site visit. A GP specialist advisor spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Modality Lewisham

Modality Lewisham is located in Lewisham, London at;

Modality Lewisham

Jenner Health Centre

201-203 Stanstead Road

London

SE23 1HU

Bellingham Green Surgery

24 Bellingham Green

London

SE6 3JB

South Lewisham Group Practice

50 Coninsborough Crescent,

London

SE6 2SP

The provider is registered with CQC to deliver the Regulated Activities: diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury, family planning and surgical procedures. These are delivered from all three sites.

The practice offers services from three practice sites. Patients can access services at any of the three surgery sites.

The practice is situated within the Southeast London Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 37,000. This is part of a contract held with NHS England.

Modality Lewisham is a self-contained primary care network (PCN).

Modality Lewisham was added as a location to Modality Partnership in April 2019. The Modality Partnership is an organisation operating across Sandwell, Birmingham, Walsall, Wokingham, Hull, Airedale, Wharfedale and Craven, Lewisham and East Surrey, providing NHS services to more than 400,000 patients. The partnership holds a corporate based organisational structure consisting of a national board, an executive divisional board, operational and clinical management groups, as well as management leads within these divisions.

Modality Lewisham is led by a team of 13 GP partners (male and female). The practice management is undertaken by a patient services manager who is overseen by an area manager from the Modality Partnership.

The Jenner Health Centre

There are 8 salaried GPs who work at The Jenner practice. There is a lead practice nurse and HCA who work full time and one part time practice nurse. There is an operations manager who works on site alongside a patient services manager who manages a team of 16 patient services assistants. Two administrators support the practice.

Bellingham Green

There are 3 salaried GPs and 1 GP retainer who work at the Bellingham Green service. Three practice nurses work at the practice

South Lewisham Group Practice

There are 8 salaried GPs who work at South Lewisham Group practice (one of them works remotely). Three practice nurses work full time. There is a Patient Services Manager who manages a team of 16 patient services assistants. One administrator supports the practice team along with 1 referral coordinator.

A Medicines Support Team of 6 PCN clinical pharmacists support the service with safe prescribing and clinical reviews.

The practice is also a training practice providing training and teaching opportunities to trainee GPs.

The practice offers extended access delivered through the OHL GP federation, at a local GP Extended Access hub at the local hospital.

Information published by Public Health England shows that deprivation within the practice population group is in the fifth lowest decile (five out of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 58.5% White, 24.5% Black, 6.7% Asian, 8.4% Mixed, 1.9% Other.

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	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <ul style="list-style-type: none">• Safety alerts were not managed effectively and prescribing relating to these did not always keep patients safe.• The practice was not able to demonstrate that adequate control measures had been put in place to mitigate infection risk. Not all infection control risks identified were acted on.• The systems to manage a medical emergency were not effective.• Patients' needs were not always assessed, and care and treatment was not always delivered in line with current legislation, standards and evidence-based guidance. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The overarching governance framework had not ensured that systems and processes were operating effectively. In particular:</p> <ul style="list-style-type: none">• The practice did not have an effective system for managing the risks to patients' health in relation to the prescribing of certain medicines.• The practice did not have an effective system for managing the risks to service users' health in relation to their long-term conditions.

This section is primarily information for the provider

Requirement notices

- Systems and processes were not properly established for the management and monitoring of health and safety and infection prevention and control.

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