

# Cranford Medical Centre

## Inspection report

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Cranford  
Hounslow  
TW5 9RG  
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[www.cranfordmedicalcentre.co.uk](http://www.cranfordmedicalcentre.co.uk)

Date of inspection visit: 27 April 2022  
Date of publication: 01/07/2022

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 well-led?

Good



# Overall summary

We carried out an announced inspection at Cranford Medical Centre on 27 April 2022. Overall, the practice is rated as Good.

Safe - Requires improvement

Effective - Requires improvement

Well-led - Good

Following our previous inspection on 11 June 2017, 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 Cranford 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 based on enquiries received by CQC*

## 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.

## We have rated this practice as Requires improvement overall

# Overall summary

We found that:

- The practice had effective systems in place to safeguard people from abuse.
- The practice learnt from and monitored events where things went wrong.
- Our searches found some patients prescribed high risk medicines that were overdue monitoring and/or review.
- Recruitment was well managed and organised.
- The practice demonstrated effective care for the needs of its population, in particular use of multi-disciplinary teams to provide holistic services and health promotion to patients.
- Rates of cervical and bowel cancer screening and childhood immunisations were below the expected level. The practice demonstrated taking initiative to improve rates including health promotion, auditing and regular meetings, however the impact of these measures had not yet been seen.
- Some patients with long term conditions had not had appropriate monitoring and/or review in a timely manner.
- Some patients were found to have potential missed diagnosis of diabetes.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- There were adequate policies and processes in place to maintain patient safety.
- Staff demonstrated good knowledge of managing major incidents.
- The practice utilised digital technology to streamline workload and improve patient care.
- The practice actively sought and listened to patient feedback in order to improve.

We found one breach of regulation, the provider **must**:

- Ensure care and treatment is provided in a safe way to patients.

The provider **should**:

- Continue work to improve screening rates for cervical and bowel cancers, and uptake of childhood immunisations.
- Build on processes to appropriately monitor and manage patients who have long term conditions.
- Continue adequate monitoring and risk assessment of emergency medicine stock.
- Continue two-cycle audits to monitor quality of care.

**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 Cranford Medical Centre

Cranford Medical Centre is located in Hounslow at:

24 High Street

Cranford  
Hounslow  
TW5 9RG

Cranford Medical Centre is a GP practice located in the Cranford area of Hounslow, within the North West London Clinical Commissioning Group (CCG). It is part of the Great West Road Primary Care Network.

The practice is located in purpose-built premises. The practice is fully accessible and has disabled parking spaces and an entrance at the rear of the building.

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.

The practice provides services to approximately 7,100 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 female principal GP supported by a salaried GP and GP locums. Patients have a choice of male or female GP.

The practice employs a practice nurse, a health care assistant, and a physician associate. The practice manager is supported by an assistant manager, and a team of administrative and reception staff.

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

The patient population is ethnically diverse and 74% of the population is composed of patients with Asian, Black, mixed or other non-white backgrounds. Information published by Public Health England rates the level of deprivation within the practice population group as five, 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	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 12 CQC (Registration) Regulations 2009 Statement of purpose  Assessments of the risks to the health and safety of service users of receiving care or treatment were not being carried out. In particular: <ul style="list-style-type: none"><li>• Patients on high risk medicine, in particular, spironolactone, had not had blood tests and/or reviews in a timely manner.</li><li>• Some patients had not been appropriately diagnosed with diabetes.</li></ul>