

Anerley Surgery

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 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

CQC carried out an announced comprehensive inspection of Anerley Surgery on 31 October 2018 as part of our inspection programme under Section 60 of the Health and Social Care Act 2008. The inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The practice was rated as inadequate overall with ratings of inadequate for providing safe and well-led services, requires improvement for effective and caring services and good for providing responsive services. As a result of the findings on the day of the inspection, we issued the practice with warning notices for breaches of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) and placed the practice in special measures.

We carried out an unrated inspection on 29 January 2019 to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements as detailed in the warning notices.

This was an announced comprehensive inspection on 26 June 2019 to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements as detailed in the warning notices. The inspection report from our inspection on 31 October 2018 is available on our website.

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 good overall and good for all population groups with the exception of working age people (including those recently retired and students) which we rated as requires improvement.

At this inspection we found:

- The system in place for high risk medicines had improved. We looked at records of patients taking high risk medicines and found they had all been monitored appropriately. The practice had introduced a protocol to monitor high risk drugs and staff followed the protocol for prescribing of high risk medicines. There was a written policy on warfarin prescribing.
- Arrangements for managing safety alerts had improved. The practice had implemented a new process for managing safety alerts and we saw information was communicated and actions were followed up. We saw evidence that staff were able to perform searches.
- The practice acted effectively on tasks raised on the clinical recording system. Staff actioned and completed tasks in a timely way.
- There were improvements in the use of the computer system to support the delivery of safe care and treatment. The provider had arranged staff training on the electronic patient record system to ensure it was used effectively.
- The practice had implemented monthly clinical and non-clinical meetings, which were minuted and distributed amongst all staff. The meetings allowed the discussion and review of patients on high risk drugs, prescribing and reviewing safety alerts to allow staff to provide feedback.
- The practice had obtained a paediatric pulse oximeter. We saw the practice had paediatric defibrillator pads.

The areas where the provider should make improvements are:

- Review and develop information contained within dementia care plans.
- Take action to improve uptake of cancer screening.

I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by the service.

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

Dr Rosie Benneworth BM BS BMedSci MRCGP Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Good 
Working age people (including those recently retired and students)	Requires improvement 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a second CQC inspector and a GP specialist advisor.

Background to Anerley Surgery

Anerley Surgery is in the Penge area of south east London and is run by one GP (female) who works full time at the practice. The practice sits within the Bromley clinical commissioning group (CCG) London under a General Medical Services contract (an agreement between NHS England and general practices for delivering general medical services).

The practice has a list size of 2,600. In addition to the GP who runs the practice, there is a practice manager, a female practice nurse, an administrator and a receptionist. The practice provides 10 GP sessions per week.

The practice is open between 8am and 6.30pm Monday to Friday; with late opening on Wednesdays until 8pm. Appointments are from 9am to 12pm every morning and 4pm to 6.30pm every afternoon except for Thursday afternoons when the practice is open but does not see patients unless it is an emergency.

Outside of these hours, patients are advised to contact the NHS 111 service. The practice provides an online

appointment booking system and an electronic repeat prescription service. The premises are not purpose built but all services are provided from the ground floor of the building, providing ease of access for patients with mobility difficulties. The practice does not have a hearing loop.

The practice is registered with the Care Quality Commission to carry on the regulated activities of maternity and midwifery services, treatment of disease, disorder or injury, family planning, and diagnostic and screening procedures.

The practice has a higher percentage than the national average of people with a long-standing health condition (58% compared to a national average of 54%). The average male life expectancy for the practice is 78 years, and for females 83 years. These compare to the CCG averages of 81 years and 84 years; and the national averages of 79 and 83 years.