

Joydens Wood Medical Centre

Inspection report

111 Summerhouse Drive
Bexley
Kent
DA5 2ER
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Date of inspection visit: 19 November 2019
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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?

Inadequate 

Are services caring?

Requires improvement 

Are services responsive?

Inadequate 

Are services well-led?

Inadequate 

Overall summary

We carried out an unannounced comprehensive inspection at Joydens Wood Medical Centre on 19 November 2019 due to concerns raised by patients and other stakeholders. This was the providers first inspection since registering with CQC in July 2019.

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 Inadequate overall.

We rated the practice as **Inadequate** for providing safe services because:

- The practice did not always have clear systems, practices and processes to keep people safe and safeguarded from abuse.
- The practice did not have effective recruitment systems and processes.
- Risks to patients were not appropriately assessed and any actions required to address or minimise risk, had not been completed.
- The premises were not always fit for purpose and actions from risk assessments were not undertaken, to reduce the risk of fire and legionella.
- Appropriate standards of cleanliness and hygiene were not always met.
- Staff did not always have the information they needed to deliver safe care and treatment.
- The practice did not have appropriate systems for the safe management of medicines.
- The practice did not have an effective system to learn and make improvements when things went wrong.

We rated the practice as **Inadequate** for providing effective services because:

- Care and treatment were not always delivered in line with current legislation, standards and evidence-based guidance.
- There was limited monitoring of the outcomes of care and treatment.
- The practice was unable to demonstrate that staff had the skills, knowledge and experience to carry out their roles.

- Staff did not always work together and with other organisations to deliver effective care and treatment.

We rated the practice as **Requires improvement** for providing caring services because:

- The practice was unable to demonstrate how they made use of feedback from patients.
- The practice did not always respect patients' privacy and dignity.

We rated the practice as **Inadequate** for providing responsive services because:

- The practice did not always organise and deliver services to meet patients' needs.
- People were not always able to access care and treatment in a timely way.
- Complaints were not always used to improve the quality of care.

We rated the practice as **Inadequate** for providing well-led services because:

- Leaders could not demonstrate that they had the capacity and skills to deliver high quality sustainable care.
- The practice did not have a clear vision, supported by a credible strategy to provide high quality sustainable care.
- The practice culture did not effectively support sustainable care.
- The overall governance arrangements were ineffective.
- The practice did not have clear and effective processes for managing risks and identified issues.
- The practice did not always act on appropriate and accurate information.
- The practice did not always involve the public, staff and external partners to sustain high quality and sustainable care.
- There was no evidence of systems and processes for learning, continuous improvement and innovation.

These areas affected all population groups, so we rated all population groups as **Inadequate**

We took urgent enforcement action and served an Urgent Suspension Notice on the service provider's registration in respect of the regulated activities carried out at all registered locations (Joydens Wood Medical Centre and Elmdene Surgery, including the two branch practices at Bean Surgery and Bennett Way Surgery). The urgent

Overall summary

suspension for all registered locations took effect on 26 November 2019. We took this action as we believe that a person will or may be exposed to the risk of harm if we did not do so.

As there are exceptional circumstances in this instance, CQC have considered that placing the practice into special measures would not be appropriate at this time.

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

Population group ratings

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

Our inspection team

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

Background to Joydens Wood Medical Centre

Dr Bhaskar Jyoti Bora is a registered individual who registered with CQC in July 2019, with a registered location at Joydens Wood Medical Centre. Dr Bora is also the registered provider for Elmdene Surgery (with branch practices at Bean Surgery and Bennett Way Surgery). This report relates only to our findings at Joydens Wood Medical Centre,

Dr Bora was formally registered with CQC as part of a registered partnership but due to changes of partnerships and then becoming a single-handed GP provider, there were issues with the location of Joydens Wood Medical Centre being appropriately registered with CQC for a period of two years.

Joydens Wood Medical Centre is located at 111 Summerhouse Drive, Bexley, Kent, DA5 2ER, which is a residential area, and provides primary medical services to 2791 patients. The practice web site address is www.joydenswoodmedicalcentre.nhs.net

The provider is registered to provide the regulated activities: Treatment of disease, disorder and injury, Maternity and midwifery services and Diagnostic and screening procedures.

The practice provides NHS services through a General Medical Services (GMS) contract to 2,791 patients. The practice is part of the Dartford, Gravesham and Swanley Clinical Commissioning Group (CCG).

The practice's clinical team is led by the provider (principal GP) who works one clinical session per week. The principal GP is supported by a long-term male locum GP who provides one clinical session per week – usually a Monday afternoon. Locum GPs provide occasional sessions to cover the provider's absence. A female locum advanced nurse practitioner works at the practice Monday and Wednesday but does not provide services for patients aged under one year of age. A female nurse works at the practice Monday and Wednesday. A female healthcare assistant works at the practice Tuesday and Thursday. There are four administrative staff and an interim practice manager.

The practice has opted out of providing an out-of-hours services. Patients calling the practice when it is closed relate to the local out-of-hours service provider via the NHS 111 service.

The practice catchment area is classed as being within one of the least deprived areas in England. The practice scored 10 on the deprivation measurement scale; the deprivation scale goes from one to 10, with one being the most deprived.

National General Practice Profile describes the practice ethnicity as being 89.9% white British, 5.2% Asian, 2.5% black, 1.8% mixed race and 0.5% other non-white ethnicities. The practice demographics show an average working age population, between the ages of 20 and 49

years and above average population of patients aged 65 years and over. Average life expectancy is 82 years for men and 84 years for women compared to the national average of 79 and 83 years respectively.

This section is primarily information for the provider

Enforcement actions

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity

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

Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Urgent Suspension

Regulated activity

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

Regulation

Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment
Urgent Suspension

Regulated activity

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

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance
Urgent Suspension

Regulated activity

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

Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing
Urgent Suspension

Regulated activity

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

Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed
Urgent Suspension