

# Chet Valley Medical Practice

### **Inspection report**

George House, 40-48 George Lane Loddon Norwich NR14 6QH Tel: 01508520222 www.loddondoctorssurgery.co.uk

Date of inspection visit: 7 June 2023 Date of publication: 07/08/2023

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 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 inspection at Chet Valley Medical Practice on 7 June 2023. Overall, the practice is rated as requires improvement.

Safe – requires improvement.

Effective - requires improvement.

Caring – good.

Responsive - requires improvement.

Well-led - requires improvement.

Following our previous inspection published 19 January 2017, the practice was rated outstanding overall and for all key questions because:

- There was a clear strong leadership structure and staff felt engaged, supported and valued by management. The practice proactively sought feedback from staff and patients, which it acted upon.
- The practice had a robust and comprehensive range of governance arrangements that were regularly reviewed to ensure their effectiveness.

At this inspection, we found that those areas previously regarded as outstanding practice were now embedded throughout the majority of GP practices. While the provider had maintained some of this good practice, the threshold to achieve an outstanding rating at this inspection had not been reached. During this inspection we identified areas of concern and therefore the practice is now rated requires improvement for providing safe, effective, responsive and well-led services and good for providing caring services.

The full reports for previous inspections can be found by selecting the 'all reports' link for Chet Valley Medical Practice on our website at www.cqc.org.uk

#### Why we carried out this inspection.

We carried out this inspection to follow up concerns follow up concerns reported to us.

Outline focus of inspection to include:

- Key questions inspected.
- Areas followed up including 'shoulds' identified in previous inspection.
- Areas of concern that had been reported to us.

#### 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.
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- Completing clinical searches on the practice's patient records system (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.
- A short site visit.
- Staff questionnaires

#### **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:

- Prior to this inspection, the practice had recognised there were areas of improvement needed and had developed a detailed action plan. The new management team which included a GP lead had worked with the Integrated Care Board to address these shortfalls. This included management of patients prescribed high risk medicines and access.
- The GP leaders had developed more effective leadership and had clinical and management oversight of the progress made against a risk register and action plan. Some of the improvements and new ways of working had been newly implemented, and needed to be further embedded to ensure they were safe, effective, and sustained.
- The new systems and processes did not wholly evidence that safe and effective care was always delivered to all patients.
- The improved systems had resulted in staff taking on new and additional roles, which had contributed to some low morale.
- The practice had installed a new computer system which has been installed 3 weeks prior to the inspection, staff told us this had increased the levels of stress they were experiencing and, in some areas, there were backlogs of work or staff shortages.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Not all patients could access care and treatment in a timely way.

We found 2 breaches of regulations. The provider must:

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

In addition, the provider **should**:

- Continue to monitor the system and process to ensure all patients including those with a learning disability are followed up within an appropriate timeframe.
- Continue to encourage patients to attend for NHS health checks.

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

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### 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. In addition, a member of the CQC pharmacy team, a nurse specialist advisor and a second CQC inspector undertook a site visit.

### Background to Chet Valley Medical Practice

Chet Valley Medical Practice

George House

40-48 George Lane

Loddon

Norwich

Norfolk

NR14 6HO

The practice has a dispensary which we visited as part of this inspection.

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.

The practice is situated within the Norfolk and Waveney Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 8932. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices, South Norfolk Healthcare in Partnership (SNHiP) primary care network (PCN).

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the eighth decile (8 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 0.7% Asian, 98.3% White, 0.1% Black, 0.8% Mixed, and 0.1% Other.

The age distribution of the practice population closely shows a larger population of older patients and a lower population of working age people.

There is a team of 7 GPs who provide cover at the practice. The practice has a team of 2 nurse practitioners and 3 nurses who provide nurse led clinics for long-term conditions. The GPs are supported at the practice by a team of reception/administration staff. The practice manager and operations manager provide managerial oversight.

The practice is open between 8am to 6.30 pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided as part of the South Norfolk Healthcare in Partnership (SNHiP) primary care network (PCN). Late evening and weekend appointments available.

Out of hours services are provided by IC24 accessed through the 111 service.

## 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.

### Regulation Regulated activity Diagnostic and screening procedures Regulation 17 HSCA (RA) Regulations 2014 Good governance Family planning services How the regulation was not being met: Maternity and midwifery services • The system and process in place had not ensured all Surgical procedures staff had received appropriate training, at the Treatment of disease, disorder or injury appropriate level for their role. • The practice did not record, investigate or share learning from significant events and complaints. The practice did not always meet their duty of candor responsibilities. • Standard operating procedures were not updated and available for dispensary staff to ensure all medicines were dispensed safely. • The practice did not have a formal approach to record clinical supervision of non-medical prescribers.

## Regulated activity

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

## Regulation

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

#### How the regulation was not being met:

- We found examples of patients who had not received appropriate monitoring or follow up of medicines prescribed within an appropriate time frame. Not all patients who required steroid alert cards had been issued with them.
- Patient medical records did not always contain sufficient detail to evidence safe prescribing and decision making. Not all medicines had been linked to a condition.
- The system and process to manage patient safety alerts had not ensured all patients who may have been affected had been reviewed appropriately.

This section is primarily information for the provider

## Requirement notices

This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.