

Eightlands Surgery

Inspection report

Dewsbury Primary Care Centre
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West Yorkshire
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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?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Eightlands Surgery on 13 November 2018 to follow up on issues in relation to patient access noted at our previous inspection on 11 January 2018, and to review additional improvements since our last inspection. The full comprehensive report on the January 2018 inspection can be found by selecting the 'all reports' link for Eightlands Surgery on our website at . Our inspection team was led by a CQC inspector. The team included a GP specialist adviser and a second CQC inspector.

Our judgement on the quality of care at this service is based 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. The key questions of safe and well led have been rated as requires improvement; whilst the key questions of effective, caring and responsive have been rated as good.

We concluded that:

- The practice had reviewed the arrangements for patient access to the service. New, local rate phone lines had been installed. Patient feedback we received showed that they found the new system more efficient and easier to use.
- Staff were up to date with training. We heard of examples where staff were encouraged and supported to develop.
- The practice carried out quality improvement activity to monitor and review the effectiveness and appropriateness of the care it provided. Care and treatment was delivered according to evidence based guidelines.
- Patient survey data from 2018 showed a higher proportion of patients who described their experience of making an appointment as good, in comparison with similar questions asked in the 2017 survey.

- The practice had implemented regular infection prevention and control audits, and carried out any identified actions.
- Systems for supporting newly appointed staff had been formalised.
- The practice continued to seek the views of patients, via their patient participation group, and by regular in-house surveys.

However, we also found that:

- There were divisions at the senior leadership team level. There were a number of barriers to communication as a result of this.
- The system in place for the recording, review and learning from incidents was not operating effectively.

We rated the practice as requires Improvement for providing safe and well-led services because:

- Communication processes within the practice team were not clear. There was a lack of cohesion in relation to the strategy of the practice.
- The incident reporting system was not operating effectively.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The area where the provider **should** make improvements is:

- Review and improve the processes for collating and analysing verbal complaints.
- Continue to monitor and improve patient experience in relation to access to appointments.

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

Professor Steve Field CBE FRCP FFPH FRCGP Chief Inspector of General Practice

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)	Good 
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 GP specialist adviser and a second CQC inspector.

Background to Eightlands Surgery

Eightlands Surgery is located within Dewsbury Primary Care Centre, Wellington Road, Dewsbury WF13 1HN. Dewsbury Primary Care Centre also hosts another GP practice, as well as some community services. It is located approximately half a mile outside Dewsbury town centre. The practice is situated on the first floor of the shared building. Lift access to the service is available for those patients with mobility difficulties, or wheelchair users. Public transport routes are available to the practice, and car parking facilities, including disabled parking, are on site. The practice provides Personal Medical Services (PMS) under a locally agreed contract with NHS England.

The practice is registered with the Care Quality Commission to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Family planning
- Surgical procedures
- Maternity and midwifery services
- Diagnostic and screening procedures

There are currently 6,701 registered patients on the practice list. The Public Health General Practice Profile shows that approximately 29% of the patient group are of Asian ethnicity; with 2% mixed ethnicity. The level of deprivation within the practice population is rated as three on a scale of one to ten. Level one represents the highest level of deprivation; and level ten the least deprived. People who live in more deprived areas are more likely to have greater need to access health services.

The age/sex profile of the practice is in line with national averages. The average life expectancy for patients at the practice is 77 years for men and 82 years for women, compared to the national average of 79 years and 83 years respectively.

Clinical staff include two GP partners, one male and one female, two female practice nurses, one female health care assistant and one female phlebotomist. Supporting the clinicians is a practice manager, senior administrator and a range of administration, reception and secretarial staff.

The practice is a training practice, which means it supports fully qualified doctors to gain the necessary skills to enter general practice.

One of the GP partners carries out an additional, independent, circumcision service. This is available on a fee-paying basis, and is open to patients not registered at the practice, for children under one year of age.

The practice is open between 8am and 6pm Monday to Friday. Extended hours are available on Monday between 6.30pm and 8pm; and Tuesday and Thursday between 7.30am and 8am. Phlebotomy appointments are available Monday to Friday from 7.30am. Appointments are also available via the local extended access scheme, delivered from a practice within the same building, between 6.30pm and 9.30pm Monday to Friday, and between 9am and 4pm on Saturday, and between 9am and 1pm on Sunday.

Out of hours care is provided by Local Care Direct, which is accessed by calling the practice telephone number, or by calling the NHS 111 service.

When we returned to the practice for this inspection, we checked, and saw that the previously awarded ratings were displayed, as required, on the practice premises and on their website.

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 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 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 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Systems and processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Regulation 17: Good Governance The registered persons had systems and processes in place that operated ineffectively, in that they failed to enable the registered person to assess, monitor and improve the quality of services being provided. In particular:</p> <p>The systems in place for the authorisation of PGDs within the practice were not effective. The system in place for the recording, review and learning from incidents and significant events was not operating effectively. This was because the individuals cited in incidents and events were not always involved in the investigations.</p> <p>Learning from incidents and events was not being shared across the practice team, and we were not assured that all staff, including non-clinical staff, were aware of, and engaged in the reporting process.</p> <p>This was in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>