

Dr Irlam and Partners

Inspection report

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Date of inspection visit: 13 December 2024
Date of publication: 04/03/2024

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 to people's needs?		Requires Improvement	
Are services well-led?		Good	

Overall summary

We carried out an announced comprehensive inspection at Dr Irlam & Partners (Central Surgery) on 13 December 2023. Overall the practice is rated as Requires Improvement.

Safe – requires improvement

Effective - good

Caring - good

Responsive - requires improvement

Well-led - good

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities.

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.
- 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.

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:

- Some patients' care needs were not always reviewed and monitored in line with current legislation and standards.
- Safety alerts were not consistently discussed with patients as recommended.
- Staff had received appropriate training and there were effective health and safety risk assessments.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could not always access care and treatment in a timely way.

Overall summary

- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We found 1 breach of regulations. The provider **must:**

- Improve the documented approach to the management of test results.
- Ensure that all patients received effective treatment and medicine reviews.
- Improve the system to respond to safety alerts from a variety of sources, including The Medicines and Healthcare products Regulatory Agency, (MHRA), and Central Alerting System, (CAS).

The provider **should:**

- Continue to take action to ensure the safe management of the documents inbox.
- Continue with efforts to improve the uptake of cervical screening.
- Progress work with the installation of a new telephony system to improve patient satisfaction relating to access results across all 4 indicators in the National GP Patient Survey.

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

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 Dr Irlam and Partners

- Dr Irlam and Partners, (known locally as Central Surgery), is located in purpose built facilities in Southend on Sea, Essex.
- The provider is registered with CQC to deliver the Regulated Activities: diagnostic and screening procedures, maternity and midwifery services, family planning, treatment of disease, disorder or injury and surgical procedures.
- The practice is situated within the Mid and South Essex Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 8,000. This is part of a contract held with NHS England.
- The practice is part of the Southend East Primary Care Network which is a network of 5 local GP practices.
- Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth lowest decile (4 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 5.5% Asian, 87% White, 3.2% Black, 3.2% Mixed, and 1.2% Other.

There is a team of 2 GP partners, 2 salaried GPs and 3 GP registrars. The practice has 1 practice nurse, supported by 2 associate practitioners. The GPs are supported at the practice by a team of reception, administration, and secretarial staff. The practice manager provides general managerial oversight.

The practice is open between 8.30am 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 locally where late evening and weekend appointments are available. Out of hours services are provided by NHS 111.

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	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment must be provided in a safe way for service users.</p> <p>How the regulation was not being met:</p> <p>We saw that some test results from the 3 months preceding the inspection were still awaiting processing.</p> <p>We found that some patients required further monitoring action to meet best practice guidance for the treatment being provided.</p> <p>Systems for responding to safety alerts were not always effective.</p> <p>This was in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	