

Warrior Square Surgery

Inspection report


Marlborough House 19-21
Warrior Square
St. Leonards-on-sea
TN37 6BG
Tel: 01424434151
www.warriorsquaresurgery.co.uk

Date of inspection visit: 29 July 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?

Requires improvement 

Are services effective?

Inadequate 

Are services caring?

Good 

Are services responsive?

Inadequate 

Are services well-led?

Inadequate 

Overall summary

We carried out an announced comprehensive inspection at Warrior Square Surgery on 29 July 2019 as part of our inspection programme. This was to follow up on breaches of regulations and as part of our schedule of inspection where services placed in special measures will be inspected again within six months. At this inspection we followed up on breaches of regulations identified at a previous inspection on 7 November 2018.

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 effective services because:

- There was limited monitoring and improvement to patient outcomes, particularly in relation to asthma and mental health indicators.
- Actions to ensure improvements as a result of clinical audits were inconsistent and not always clear.
- Cancer screening was lower than average, including in relation to cervical screening.
- Childhood immunisation uptake remained below target.

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

- People were not able to access care and treatment in a timely way.
- The system for dealing with complaints did not always take account of the needs of patients.

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

- Leaders could not show that they had the capacity and skills to deliver high quality, sustainable care.
- While the practice had a clear vision, that vision was not supported by a credible strategy with sufficient focus on quality improvement.
- The overall governance arrangements were ineffective.
- The practice did not have clear and effective processes for managing risks, issues and performance.

- Patient views were not always acted on to improve services.
- There was evidence of some systems and processes for learning, continuous improvement and innovation, however there were a number of areas where improvements had not been sufficient.

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

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

- The practice did not have comprehensive environmental risk assessments and safety checks in place.
- There was insufficient review and oversight of non-medical prescribing.
- Not all incidents were reported or recorded.

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

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

The areas where the provider **must** make improvements are:

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

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements are:

- Take action to improve the identification of carers.
- Improve the recording of patient's smoking status.

This service was placed in special measures in February 2019. Insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall. Therefore, we are taking action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve. The service will be kept under review

Overall summary

and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within six months, and if there is not enough improvement we will move to close the service by adopting our proposal to vary the provider's registration to remove this location or cancel the provider's registration'.

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 adviser, a practice nurse specialist adviser and a practice manager specialist adviser.

Background to Warrior Square Surgery

Warrior Square Surgery is based in Hastings. The practice moved back to their current location at Marlborough House in March 2018, having relocated to a different location following a fire at Marlborough House in 2013. The practice holds a contract to provide general medical services and at the time of our inspection there were approximately 7,800 patients on the practice list. The practice has a slightly higher than average number of children from birth to four years. The practice is located in an area that is considered to be in the most deprived centile nationally. The practice has a higher than average proportion of patients who are unemployed and a higher proportion of patients with a learning disability. The practice has a higher proportion of patients diagnosed with depression.

The practice is run by two GP partners and an executive non-clinical partner. The practice is part of the Hastings and Rother Healthcare Partnership, a group of practices that is in development to become a formal partnership. The GPs are supported by two part time salaried GPs (male) and two regular locum GPs (female). They are supported by a paramedic practitioner (male), a pharmacist (female), two advanced nurse practitioners (female) and three practice nurses (female) and two healthcare assistants (female). A practice manager and deputy practice manager are in post along with a small

team of clerical and reception staff. Additional management functions are provided from the Hastings and Rother Healthcare Partnership in terms of business management and financial management.

The practice is open between 8.30am and 6.00pm Monday to Friday, telephones are open from 8.00am each morning. Extended hours appointments are offered on a Monday and Tuesday evening until 8.00pm and on Saturday mornings. Telephone appointments are also available on a Sunday morning. The practice is the hub for a local extended access service. When the practice is closed patients are advised to call NHS 111 where they will be given advice or directed to the most appropriate service for their medical needs.

For further details about the practice please see the practice website: www.warriorsquaresurgery.co.uk

The practice is registered with CQC to provide the following regulated activities; diagnostic and screening procedures, treatment of disease, disorder or injury, family planning services, maternity and midwifery services and surgical procedures.

The service is provided from the following location:

Marlborough House 19-21, Warrior Square, St Leonards-on-sea, TN37 6BG.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met.</p> <p>There was additional evidence that safe care and treatment was not being provided. In particular:</p> <ul style="list-style-type: none">• The provider had not ensured that training for administrative and reception staff in recognising and acting on the deteriorating patient had been carried out in a timely way.• The provider had not acted to improve the uptake of national screening programmes. <p>This was a breach of regulation 12 (1) of the Health and Social Care Act. (Regulated Activities) Regulation 2014.</p>

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	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>The registered person 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 and safety of the services being provided. In particular:</p> <ul style="list-style-type: none">• The provider could not demonstrate effective governance structures and systems.• The provider did not have an effective programme of clinical and internal review and could not demonstrate that the performance of non-medical prescribers was reviewed.• The provider could not demonstrate effective quality improvement activity within the practice.• The provider could not demonstrate effective reporting of significant events that covered all areas of risk and potential improvement.• The provider could not demonstrate that patient views were acted on to ensure improvements. <p>The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:</p> <ul style="list-style-type: none">• There was no evidence that health and safety risk assessments were undertaken to mitigate all aspects of risk within the practice. <p>This was in breach of Regulation 17 (1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014.</p>