

Meir Park Surgery

Inspection report

Lysander Road
Meir Park
Stoke On Trent
Staffordshire
ST3 7TW
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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

Are services safe?	
Are services well-led?	

Overall summary

We previously carried out an announced comprehensive inspection at Meir Park Surgery on 6 March 2019 as part of our inspection programme. The practice was rated inadequate, placed into special measures and a warning notice in relation to safe care and treatment was issued. We carried out an announced focused inspection at Meir Park Surgery on 30 April 2019 and found that the issues identified in the warning notice had been partially addressed. A follow up comprehensive inspection was carried out on 16 September 2019. We found there had been some improvement. The practice was taken out of special measures and rated requires improvement overall. The full comprehensive reports on the inspections carried out in March, April and September 2019 can be found by selecting the 'all reports' link for Meir Park Surgery on our website at www.cqc.org.uk.

We carried out a short notice announced responsive inspection at Meir Park Surgery on 26 May 2020 in response to concerns raised by the CCG. This was a focused inspection in line with our updated COVID-19 inspection processes. We did not visit the branch site at Weston Coyney Medical Practice as part of this inspection.

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.
- information from the provider and other organisations.

We found that:

- There was an inconsistent approach to medicines management with little clinical oversight.
- The governance arrangements for the safe use of medicines were not embedded and did not provide assurance of safe care and treatment.
- There was no system in place to ensure people received an appropriate medicine review.
- The provider did not demonstrate that people receiving high-risk medicines were appropriately monitored.
- There was no clinical oversight to ensure hospital correspondence was actioned appropriately.

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.

We are considering the appropriate regulatory response to the issues we identified during this inspection. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

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

Dr Rosie Benneyworth BS BM BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) inspection manager and included a GP specialist adviser.

Background to Meir Park Surgery

Meir Park Surgery is located at Lysander Road, Meir Park, Stoke-On-Trent, Staffordshire, ST3 7TW. The practice merged with Weston Coyney Medical Practice in 2017 which is now a branch practice. The branch practice is located at Meir Primary Care Centre, Weston Road, Stoke-on-Trent, ST3 6AB. During this focused inspection we only visited Meir Park Surgery. The practices have good transport links and there are pharmacies located nearby. We visited Meir Park Surgery during our inspection.

The provider is registered with the CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury. These are delivered from both sites.

Meir Park Surgery is situated within the Stoke-on-Trent Clinical Commissioning Group (CCG) and provides services to 6,574 patients under the terms of a General Medical Services (GMS) contract. A GMS contract is a contract between NHS England and general practices for delivering general medical services to the local community.

The practice employs two male GP partners, three regular locum GPs (one male and two female), three practice nurses, two healthcare support workers, a practice manager, a business manager and 10 administrative staff working a range of hours.

The practice area is one of high deprivation when compared with the national average. Demographically the practice has a lower than average population of young patients and a higher older population. For example, 10.9% of patients are aged five to 14 years old compared with the national average of 11.9% and 20.5% of the practice population are 65 years and over compared with the national average of 17.4%. The general practice profile shows that the percentage of patients with a long-standing health condition is 52% which is below the local CCG average of 55% but comparable with the national average of 51%. National General Practice Profile describes the practice ethnicity as being 95.3% white British, 2.7% Asian, 0.7% black, 1.2% mixed and 0.1% other non-white ethnicities. Average life expectancy is 80 years for men and 83 years for women compared to the national averages 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	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment Conditions have been imposed on the provider's CQC registration: 1. The Registered Provider must, within four weeks of this condition taking effect, identify service users currently registered with the practice whereby hospital letters requesting changes in a service user's treatment or medicines have been received, over the previous three months. The Registered Provider must make changes to treatment and medicines in accordance with the instructions contained within the hospital letters. 2. The registered provider must provide to the CQC a report after one month of condition 1 taking effect and subsequently on a three-monthly basis demonstrating the progress made.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance Conditions have been imposed on the provider's CQC registration: 1. The Registered Provider must within ten days, appoint an overall, prescribing clinical lead for Meir Park & Weston Coyney Medical Practice who has been approved by NHS Stoke-on-Trent Clinical Commissioning Group to ensure practice prescribing policies and governance are in place.

This section is primarily information for the provider

Enforcement actions

2. The Registered Provider must, within four weeks, provide a detailed written action plan to the Care Quality Commission specifying timescales for the implementation and monitoring of processes covering the following areas:

- Prescribing of high-risk medicines.
- Prescribing of controlled drugs.
- Prescribing of medicines for long-term conditions.
- Changes in medication following hospital letters.
- Adherence to prescribing policies and guidelines.