

Burnham Surgery

Inspection report

The Burnham Surgery
Foundry Lane
Burnham On Crouch
CM0 8SJ
Tel: 01621782054

Date of inspection visit: 04 January 2021
Date of publication: 28/04/2021

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

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Overall summary

This GP Focused Inspection Pilot (GPFIP) in January 2021, was undertaken in response to concerns we had received about the practice. The inspection consisted of remote reviews of evidence, provided electronically. We based our judgement of the quality of care at this service on what we found as part of the GP Focused Inspection Pilot. We did not rate the practice at this inspection.

We found that:

- On reviewing a random sample of clinical records, patient consultations had not always been undertaken in line with recommended guidance.
- Medicines review were not always completed in line with recognised guidance. On reviewing a random sample of patient records, we found that some patients had not received the appropriate monitoring before medicines were prescribed.

The areas where the provider should make improvements are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Improve the coding and recall of patients with a potential diabetes diagnosis, to ensure they receive the appropriate care and treatment.
- Ensure medicines reviews are undertaken in a timely manner.

As a result of our findings, we asked the practice to take immediate action to ensure patients were safe. We followed this up with the practice and a clinical advisor reviewed the improvements made. We were assured that patients were safe. We will review their systems the next time we inspect, to ensure the new processes are embedded into daily practice.

This report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the COVID-19 pandemic. This was conducted with the consent of the provider.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Not inspected	
People with long-term conditions	Not inspected	
Families, children and young people	Not inspected	
Working age people (including those recently retired and students)	Not inspected	
People whose circumstances may make them vulnerable	Not inspected	
People experiencing poor mental health (including people with dementia)	Not inspected	

Our inspection team

The remote inspection team included a national clinical adviser and was led by a CQC inspector.

Background to Burnham Surgery

Burnham Surgery is located centrally in the village of Burnham on Crouch, Essex. It is in close proximity to the train station and has parking available. The practice is in a privately-owned purpose-built building.

The practice holds a General Medical Services (GMS) contract with NHS England. The GMS contract allows the practice to deliver primary care to the local communities. The practice has a list size of approximately 8,960 patients and provides GP services commissioned by Mid Essex Clinical Commissioning Group (CCG). A CCG is an organisation that brings together local GPs and experienced health professional to take on commissioning responsibility for local health services.

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

The clinical team comprises three GP partners, and one GP. There are six nurses and three healthcare assistants. The clinical team are supported by a business manager and assistant practice manager and a team of receptionists and administration staff.

Appointments are available from 8am and 6:30pm Monday, Wednesday, Thursday and Friday and from 7am and 18:30pm on Tuesdays. Unscheduled out-of-hours and weekend care is provided by a local hub, a service set up by the Clinical Commissioning Group (CCG) and patients who contact the surgery outside of opening hours are provided with information on how to contact the service.

National data indicates that people living in the area are in the eighth most deprived decile of the deprivation scoring in comparison to England.

The practice has a comprehensive website providing information for patients to understand and access services, including useful contacts for specialist support services.

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 Treatment of disease, disorder or injury Family planning services Maternity and midwifery services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had systems or processes in place that operated 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.</p> <p>In particular:</p> <p>The system to monitor and review medicines, including high-risk medicines required improvement and did not always follow guidance. Systems to identify, recall and follow up affected patients in a timely manner could be improved.</p>