

Steeple Bumpstead Surgery

Inspection report


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05/03/2019
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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?	Inadequate 
Are services effective?	Inadequate 
Are services caring?	Good 
Are services responsive?	Requires improvement 
Are services well-led?	Inadequate 

Overall summary

We carried out an announced comprehensive inspection at Steeple Bumpstead Surgery on 26 February 2019. We carried out inspections at the provider's head office with colleagues from the Hospitals directorate on 24 January 2019 and 5 March 2019.

We previously carried out an inspection at Steeple Bumpstead Surgery on 27 July 2017. At that inspection, we rated the practice as good overall, with requires improvement for providing safe services. We did not identify any breaches of regulation at that time, but we identified where the practice should improve, for example by reviewing the regulated activities for which it was registered and improving outcomes for patients.

This inspection was to follow up on areas where we said the practice required improvement as identified in our inspection of 27 July 2017 as well as to provide new ratings.

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.

This practice is now rated as inadequate overall.

We rated the practice as **inadequate** for safe because:

- Checks of equipment and premises were not reliable.
- There was a reliance on clinical locum staff but not a consistent and safe approach to managing absences of these clinicians.
- There had not been a multi-disciplinary meeting involving other healthcare professionals since September 2018, despite this being identified as a required action following concerns raised at the end of 2018.
- Prescription stationery and medicines were not held securely.
- There were no systems for clinical support and supervision of staff. There were no documents to define the prescribing remit of the advanced nurse practitioner.

We rated the practice as **inadequate** for effective because:

- Performance was below average in respect of diabetes, asthma, COPD, cancer and mental health. Identified improvements had not been made following our 2017 inspection.
- Information about patients was not shared with other healthcare professionals at a regular meeting with a view to ensuring continuity of care.
- Information cascades were not effective.
- There was a lack of quality improvement processes in place for example, there had been no clinical audits completed in the last two years.
- The learning and development needs of clinical locum staff were not assessed.

We rated the practice as **requires improvement** for responsive because:

- Feedback in the GP patient survey was in line with or better than averages in relation to access; however, some patients raised concern about accessing appointments.
- There had been occasions where appointments had to be cancelled by the practice at short notice due to a lack of clinicians.

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

- The provider was unaware of some challenges to safety and effectiveness at the practice.
- The provider's vision had not been effectively incorporated into the day to day running of the practice.
- There was limited effective oversight.
- Patients and others were not confident that concerns would be responded to.

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

- Feedback in relation to the care and treatment provided was positive. Patients had trust and confidence in the clinical staff.

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

Overall summary

- Improve processes for ensuring medical equipment is suitable for use for example, to ensure anaphylaxis packs have a tamper evident seal on them.
- Define and make staff and patients aware of the clinical remit of the advanced nurse practitioner.
- Review the space and environment of the dispensary. Ensure staff are aware of who has overall responsibility of the dispensary.
- Consider mechanisms for obtaining patient feedback such as implementation of an in-house patient survey.
- Review the protocol to offer support to patients affected by bereavement.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any

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

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 lead inspector and was supported by a second inspector, a member of the CQC medicines team and GP specialist advisor.

Background to Steeple Bumpstead Surgery

Steeple Bumpstead Surgery is located in purpose-built premises in the village of Steeple Bumpstead. The practice provides GP services for approximately 2500 patients.

The practice is able to offer dispensing services to those patients on the practice list who live more than one mile (1.6km) from their nearest pharmacy. The practice dispensed medicines to the majority of their patients.

The provider is called Provide, which is a Community Interest Company and most of the leadership is delivered at practice level. Provide is a community social enterprise which cares for patients across a wide range of services delivered from multiple sites. They work from a variety of community settings, such as community hospitals, community clinics, schools, nursing homes and primary care settings, as well as within peoples' homes to provide over 50 services to children, families and adults. The service provides services across Essex, Peterborough and Cambridgeshire, as well as the two London boroughs of Waltham Forest and Redbridge.

We inspected the practice as part of the inspection of the provider. This was so that we could consider and review our inspection methodology when we inspect providers such as this, and also to look at the effectiveness of the structures implemented by the provider at the practice.

The practice is open 8am until 6.30pm Monday to Friday. Appointments with a GP can be made on a Monday, Tuesday, Thursday and Friday. On a Wednesday, there are no GPs working at the practice and appointments can be made with the advanced nurse practitioner.

The GPs and advanced nurse practitioner are locum staff, as well as a member of the dispensary team. The GP locums have been working at the practice for a number of years. There is also a practice nurse and a health care assistant employed.

The practice manager works four days a week and they are supported by three receptionists and a medical secretary.

We previously carried out an inspection at Steeple Bumpstead Surgery on 27 July 2017. At that inspection, we rated the practice as good overall, with requires improvement for providing safe services. We did not identify any breaches of regulation at that time, but we identified where the practice should improve, for example by reviewing the regulated activities for which it was registered and improving outcomes for patients.

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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider did not have effective systems to assess, monitor and improve the service nor to assess, monitor and mitigate risks relating to the health, safety and welfare of patients and others as:</p> <ul style="list-style-type: none">• Environmental and equipment audits were not effective. No clinical audits had been completed.• Previously identified underperformance in QOF had not been improved. QOF performance was below average for a number of indicators.• There was not a consistent and safe approach to managing clinical staff absence.• Information about patients was not shared with other healthcare professionals at a regular meeting with a view to ensuring continuity of care.• Systems to ensure the security of medicines and prescription stationery were not effective.• There were no systems for clinical support and supervision of staff.