

Crusader Surgery

Inspection report

Unit 5, 7-8
Crusader Business Park, Stephenson Road West
Clacton On Sea
CO15 4TN
Tel: 01255688884
www.crusadersurgery.com

Date of inspection visit: 05 December 2022
Date of publication: 13/02/2023

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

Overall summary

We carried out an announced inspection at Crusader Surgery on 05 December 2022. Overall, the practice is rated as requires improvement.

The ratings for each key question are:

Safe - Good

Effective – Good

Caring – Requires Improvement

Responsive – Requires Improvement

Well-led - Good

Following our previous inspection on 01 March 2022, the practice was rated requires improvement overall and for safe, effective and responsive key questions, good for caring and inadequate for well-led key questions. As a result of the concerns identified, we issued a Section 29 warning notice on 20 April 2022 in relation to a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This subsequent comprehensive follow-up inspection was carried out to assess compliance with the breaches identified in the warning notice and other concerns identified.

The full reports for previous inspections can be found by selecting the 'all reports' link for Crusader Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection to follow up on breaches of regulation from our previous inspection.

The focus of this inspection included:

- All the key questions.
- The breach of regulations, and 'shoulds' identified in the previous inspection.

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.

Overall summary

- Evidence sent following the 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:

- The practice had been fully engaged with the external support provided by the Integrated Care Board. They had made clear improvements. These improvements had been implemented, embedded and monitored to ensure improvements would be sustained.
- Safeguarding systems were effective, and staff had been appropriately trained.
- There were appropriate standards of cleanliness and hygiene.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm. However, we found some potential missed diagnosis and a few overlooked monitoring aspects within the medicine reviews. The practice acted quickly to address identified issues and reviewed and updated processes to reduce recurrence.
- Health and safety risk assessments reflected the actions taken to improve.
- A revised reporting process had improved the practice ability to ensure patient safety alerts including historical alerts were acted on in a timely manner to keep patients safe.
- Patients received effective care and treatment that met their needs.
- There was a quality improvement programme, that included clinical and administrative audits.
- Staff dealt with patients with kindness and respect however, satisfaction within the national GP survey was low for involving them in decisions about their care.
- There was low satisfaction of patients in the GP national survey regarding access to care and treatment in a timely way.
- Governance systems to manage risk, performance and quality and sustainability were effective.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

Whilst we found no breaches of regulations, the provider **should**:

- Review the frequency of infection control audits in order to identify and act on any issues.
- Continue to monitor historical patient safety alerts with the new reporting process.
- Continue to reduce multiple psychotropic prescribing.
- Review the effectiveness of the work to improve the uptake of childhood immunisation and cervical screening.
- Take steps to always record learning against all significant events documented.
- Review the effectiveness of the work to improve patient satisfaction regarding confidence and trust in the healthcare professional they saw or spoke with including involving them as much as they wanted in decisions about their care and treatment. Also the work to improve access to someone at the GP practice via the telephone, and the overall experience of making an appointment at suitable times.

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 Hospitals and Interim Chief Inspector of Primary Medical Services

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 Crusader Surgery

Crusader Surgery is located North of Clacton-on-Sea at:

Unit 5, 7-8 Crusader Business Park,

Stephenson Road West

Clacton On Sea

Essex

CO15 4TN

The practice has a branch surgery at:

17 North Road

Clacton on Sea

Essex

CO15 4DA

At this inspection we visited the main practice as part of this inspection.

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

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the NHS Suffolk and North East Essex Integrated Care Board (ICB) area) and delivers General Medical Services (**GMS**) to a patient population of about 11,070. This is part of a contract held with NHS England.

The practice is part of a wider network of three GP practices.

Information published by Public Health England shows that deprivation within the practice population group is in the second lowest decile (two 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 1% Asian, 97.5% White, 0.3% Black, 0.2% Mixed, and 3% Other.

The age distribution of the practice population closely mirrors the local averages.

There is a team of five GPs who provide cover at both practices. The practice has a team of six nurses, four healthcare assistants, and a phlebotomist, who provide a range of services including nurse led clinics for long-term conditions at both the main and the branch location. The GPs are supported by primary care network (PCN) staff for example; paramedics, pharmacists, and a care co-ordinator. There is a team of reception/administration staff a practice manager and an assistant practice manager who are based at the main location to provide managerial oversight.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, many GP appointments are telephone consultations, however face to face and pre-bookable appointments are being increased in response to patient feedback. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

Pre-bookable appointments are available to all patients at additional locations within the area, as the practice is a member of a primary care network. Appointments are available Saturdays 9am to 1pm and Sundays 9am to 11am. Out of hours services are provided by 111 outside normal practice core hours.