

Leap Valley Medical Centre

Inspection report

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Downend
Bristol
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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	Requires improvement	
Are services safe?	Requires improvement	
Are services effective?	Requires improvement	
Are services caring?	Requires improvement	
Are services responsive?	Inadequate	
Are services well-led?	Requires improvement	

Overall summary

We carried out this inspection following our annual review of the information available to us, which indicated that there may have been a significant change (either deterioration or improvement) to the quality of care provided since the last inspection. We also followed up on the breaches of regulation 17 HSCA (RA) Regulations 2014, identified at the previous inspection 15 and 16 November 2018. This inspection looked at the following key questions:

Are services Safe?

Are services Effective?

Are services Caring?

Are services Responsive?

Are services Well-led?

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.

At the last inspection in November 2018 we rated the practice as good overall and requires improvement for providing well-led services because: the provider had failed to establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care, in breach of Regulation 17 HSCA (RA) Regulations 2014 and a requirement notice was issued.

At this inspection, we found the provider had taken appropriate action to address the requirement notices from the last inspection.

We have rated this practice as requires improvement overall, with a rating of requires improvement for safe, effective, caring, well-led and inadequate for responsive.

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

- Patient Specific Directions were not managed in line with legal requirements.
- Some items of emergency equipment and medicines held were out of date and had not been replaced.
- There was a backlog in summarising patient records back to November 2018.

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

- Exception rate reporting for some population groups was higher than local and national averages e.g. long-term conditions, including diabetes and COPD.
- The Public Health England target for cervical screening uptake, within the working age people population group had not been met.

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

- Staff did not always treat patients with kindness, respect and compassion.
- Patients expressed concerns about the way some of the reception staff dealt with them whilst trying to access services or book appointments.
- Performance indicators from the national GP survey relating to care and treatment as well as the overall patient experience of the GP practice was below local and national averages.

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

- Patient satisfaction was below average for access to services particularly via the telephone.
- The practice had undertaken actions to make improvements to the telephone system which incurred delays that were out of the control of the practice. The practice continued to work with stakeholders to address issues and continue to make improvements, however, there was limited evidence to demonstrate whether proposed changes had improved patient satisfaction.

The inadequate areas found during inspection impacted on all population groups within the responsive domain, we have therefore rated all population groups as inadequate overall.

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

 The practice had restructured the leadership and management team so that leaders had time to focus on service development and patient needs. They understood the challenges facing them and had improvement plans in place to address them, however

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Overall summary

the leadership and governance arrangements in place were not fully embedded across all locations. This led to safety concerns and inconsistences in record keeping and systems.

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:

- Continue to monitor and improve the uptake of cervical screening for disease prevention.
- Continue to monitor and improve areas of high exception reporting.

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 advisor, Practice Nurse specialist advisor, Practice Manager specialist advisor, and a second CQC inspector.

Background to Leap Valley Medical Centre

The provider operates two locations and a branch surgery; Leap Valley Medical Centre provides a service to over 10,000 patients with approximately 7,000 at the Beaufort Road Downend surgery and approximately 3,000 using the Abbotswood surgery (the branch surgery).

Leap Valley Medical Centre

Beaufort Road

Downend

Bristol BS16 6UG

Abbotswood Surgery

42 Abbotswood

Yate

Bristol BS37 8NG

The practice serves the populations of Downend, Emersons Green, Yate and surrounding areas.

The South West UK Census data (2011) shows 5% of the population are recorded as being from the black or minority ethnic community. Public Health England's national general practice profile shows the practice has a significantly higher than England average group of patients aged 65 or over at 38.8%.

The practice population has low levels of deprivation. The Index of Multiple Deprivation 2015 is

the official measure of relative deprivation for England. The practice population is ranked at decile 10 which is the lowest level of deprivation.

Leap Valley Surgery was purpose built and is leased by the GP partners. The building is set over two floors with patient access to the first floor by lift. It has power assisted door access to the entrance of the building and a large car park with blue badge reserved parking. There is a separate reception area with an automated arrival system and spacious waiting room.

Abbotswood Surgery (branch surgery to Leap Valley) is purpose-built and owned by the partnership. The building is set on the ground floor and has shared parking available.

The practice team includes four GP partners and seven salaried GP's (male and female). GP sessions vacant are covered by regular locum GPs; an executive manager, a business manager and an operational manager; a nurse manager; seven advanced nurse practitioners, three

practice nurses; three healthcare assistants; a phlebotomist and administration staff. All staff in addition to the partners and management team work across all the organisations sites.

The practice is an accredited training practice for GP trainees, foundation year trainees and medical students.

The practice has opted out of providing out-of-hours services to their own patients. Patients can access NHS 111 and out of hours services from information on the practice website.

The practice is registered to provide the following regulated activities:

Family planning

Diagnostic and screening procedures

Treatment of disease, disorder or injury

Surgical procedures

Maternity and midwifery services

The location is shared with other health care providers such as the community nursing team.

Independent providers are also hosted at the premises and where this is in practice leased rooms the patients registered at the practice can access these services (such as chiropody) on a quid pro quo basis.

Further information about Leap Valley Medical Centre can be found at:

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	 Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment How the regulation was not being met: Care and treatment were not provided in a safe way for service users. We found: Patient Specific Directions were not managed in line with legal requirements. Some items of emergency equipment and medicines held were out of date and had not been replaced. There was a backlog in summarising patient records back to November 2018. There were significant constraints on the ability of people to access care and treatment in a timely way using the telephone system. This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good
Family planning services	governance
Maternity and midwifery services	How the regulation was not being met:
Surgical procedures	There was a lack of systems and processes established and operated effectively to ensure compliance with
Treatment of disease, disorder or injury	requirements to demonstrate good governance.
	This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.