

# High Street Surgery

## Inspection report

The Surgery  
High Street  
Lowestoft  
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Date of inspection visit: 17/04/2019

Date of publication: 07/06/2019

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?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



# Overall summary

We previously carried out an announced comprehensive inspection at the practice on 22 October 2014. The practice was rated as requires improvement overall and for providing safe and well led services. The practice was rated as good for providing effective, caring and responsive services. We carried out a focused inspection on 8 October 2015 and the practice was rated good overall and for providing safe services and requires improvement for providing well led services. We carried out an announced comprehensive inspection on 20 September 2017. The practice was rated as inadequate overall, requires improvement for providing safe services, inadequate for providing effective and well led services and good for providing caring and responsive services. As a result of the findings on the day of the inspection, the practice was issued with a warning notice on 13 October 2017 for regulation 17 (good governance) and was placed into special measures for six months. We carried out an announced comprehensive inspection on 12 April 2018. The practice had complied with the warning notice and were taken out of special measures. They were rated requires improvement overall, and for providing safe and well led services and good for providing effective, caring and responsive services. The full comprehensive reports on the 4 October 2014, 8 October 2015, 20 September 2017 and 12 April 2018 inspections can be found by selecting the 'all reports' link for High Street Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

The practice is rated as **requires improvement** overall.

The key questions at this inspection are rated as:

Are services safe? – Requires Improvement

Are services effective? – Requires Improvement

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Requires Improvement

We carried out an announced comprehensive inspection at High Street Surgery on 17 April 2019. This inspection was to follow up on breaches of regulation identified at the previous inspection and to see if improvements made since the practice was taken out of special measures had been maintained.

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 have rated this practice as requires improvement overall. At this inspection we found:

- The required improvements had been made in relation to health and safety risk assessments and the implementation of fire safety recommendations.
- Staff dealt with patients with kindness, compassion and respect and involved them in decisions about their care and treatment.
- A carers lead had been appointed, who organised information and support to carers.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- Improvements had been made to the way the practice was led and managed. The leadership was open, and staff were listened to and involved in service developments. A patient participation group had been established and members were involved in improving the service.

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

- Medicines and Healthcare products regulatory agency (MHRA) alerts were not always monitored to completion.
- There was a cervical screening failsafe system in place, however, not all patients had been recorded on the system.

The practice is rated as requires improvement for providing effective services because two population groups, people with long term conditions and people experiencing poor mental health (including people with dementia) were rated as requires improvement. This was because:

- The exception reporting data for the quality and outcome framework relating to long term condition and mental health indicators, was above the CCG and England averages. Although the practice excepted patients in line with QOF requirements, and some

# Overall summary

patients had had follow up telephone calls, a significant number of patients had not received the interventions. Some performance had declined since our last inspection.

- Evidence based guidance was not always followed; we identified some patients on combinations of medicines which were not recommended.

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

- The practice did not have an effective system for monitoring performance through accurate data, specifically related to the exception rates for the quality and outcomes framework data. This had been identified at previous inspections and although the unverified 2018 to 2019 data showed some exception reporting had reduced, it did not demonstrate a significant improvement. The practice had provided Ardens exception reporting data, although this did not correlate with the QOF exception reporting data. The practice advised they were not able to address this as they could not access the QOF data, however, this had not been acknowledged until we announced our inspection.
- Effective processes were not in place to monitor and improve performance, in relation to childhood immunisation and cervical screening. Although the lead nurse audited the uptake of immunisation and wrote to and telephoned patients, the practice performance was below the World Health Organisation target of 90%.

- Although improvements had been made to prescribing data, for example, the clinical pharmacist had reviewed patients prescribed three different hypnotic medicines, and subsequent audit had identified a decrease in the number of patients prescribed these medicines, the practice data for hypnotic prescribing continued to be significantly above the CCG and England averages.

The areas where the provider **must** make improvements are:

- Ensure care and treatment is provided in a safe way to patients.
- Ensure the care and treatment of patients is appropriate, meets their needs and reflects their preferences.

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

- Continue to engage with the Clinical Commissioning group to improve their prescribing.
- Continue work to improve childhood immunisation and cervical screening uptake rates.

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

Dr Rosie Benneyworth BS BM BMedSci MRCGP

Chief Inspector of General Practice

## Population group ratings

<b>Older people</b>	<b>Good</b> 
<b>People with long-term conditions</b>	<b>Requires improvement</b> 
<b>Families, children and young people</b>	<b>Good</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Good</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Good</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Requires improvement</b> 

## Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser, a practice management specialist adviser and a second CQC inspector.

## Background to High Street Surgery

- The name of the registered provider is High Street Surgery.
- The practice is registered to provide diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.
- The practice has a General Medical Services (GMS) contract with the local Clinical Commissioning Group (CCG).
- There are approximately 12,700 patients registered at the practice.
- The practice area covers the town of Lowestoft and extends into the outlying villages.
- There are three GP partners, (male) and two regular female locum GPs. The practice has three nurse practitioners (all prescribers), four practice nurses a healthcare assistant, two phlebotomists and a clinical pharmacist. The practice worked with four other practices, one of which employed an emergency care practitioner, who worked at the practice one day a week. The practice manager is supported by an assistant practice manager and a practice administrator who lead a team of three medical secretaries and 13 reception and administration staff.
- The practice is open Monday to Friday from 8am to 6.30pm. Pre-bookable appointments with a range of clinical staff, including GPs, nurse practitioners and practice nurses, were available on a Saturday and Sunday between 8.30am and 10.30am, at a nearby practice, as part of the extended access service.
- According to information taken from Public Health England, the patient population for this service has a significantly higher than average number of patients aged 65 to 84 years, and a higher than average number of patients aged over 84 years, compared to the practice average across England. Income deprivation affecting children was significantly above the England average. Income deprivation affecting older people was slightly above the England average. Male life expectancy is 78 years for men, which is below the England average at 79 years. Female life expectancy is 82 years for women, which is below the England average of 83 years.
- An out of hours service is provided locally by Integrated Care 24 through the NHS 111 service.

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

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Diagnostic and screening procedures  
Maternity and midwifery services  
Surgical procedures  
Treatment of disease, disorder or injury

Regulation 9 HSCA (RA) Regulations 2014 Person-centred care

**There was additional evidence that person-centred care was not being provided. In particular:**

- The exception reporting data for the quality and outcome framework relating to long term condition and mental health indicators, was above the CCG and England averages. Although the practice excepted patients in line with QOF requirements, and some patients had had follow up telephone calls, a significant number of patients had not received the interventions. Some performance relating to QOF outcomes had declined since our last inspection.

#### Regulated activity

#### Regulation

Diagnostic and screening procedures  
Maternity and midwifery services  
Surgical procedures  
Treatment of disease, disorder or injury

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

**The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:**

- There was a cervical screening failsafe system in place, however, not all patients had been recorded on the system.
- Medicines and Healthcare products regulatory agency (MHRA) alerts were not always monitored to completion.
- Evidence based guidance was not always followed; we identified some patients on combinations of medicines which were not recommended.