

Briton Street GP Surgery

Inspection report

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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?

Inadequate



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Briton Street GP Surgery on 30 September 2019 as part of our inspection programme.

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 due to concerns in providing safe, effective and well-led services. However, the population groups were rated as good because patients were treated with kindness and respect and were able to access timely care and treatment; except for long-term conditions population group as well as families, children and young people and working age people (including those recently retired and students) population groups which were rated as requires improvement.

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

- The practice stocked emergency medicines which enabled clinicians to respond to most medical conditions they were likely to face and had most equipment to assess patients with possible sepsis. During our inspection, the provider ordered additional emergency medicines as well as equipment to assess possible sepsis.
- The practice had systems which promoted the delivery of high-quality, person-centre care in most areas. However, the system for managing blood monitoring results within the practice was not entirely safe and effective.
- The practice provided care in a way that mainly kept patients safe and protected them from most avoidable harm.

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

- The 2017/18 Quality Outcomes Framework data showed areas of negative variation as well as significant negative variations compared to the local and national averages for the management of patient's conditions.

- The practice demonstrated some awareness of their Quality Outcomes Framework performance and took action to improve the management of patients' clinical care. At the time of our inspection, unpublished data from the 2018/19 QOF year did not demonstrate improvement in the management of patients diagnosed with a long-term condition.
- Since our inspection, the 2018/19 QOF data had been published. Data showed areas where performance had declined; and clinical indicators such as patients diagnosed with Chronic Obstructive Pulmonary Disease (COPD) as well as mental health indicators showed significant decline in performance.
- There were clear responsibilities and roles of accountability to support governance and management in most areas. The practice operated a process for ensuring policies and procedures were reviewed and updated in line with local and national guidance updates. However, some clinical governance arrangements did not assure safe and effective care. The practice was unable to demonstrate that quality improvement activities systematically identified where actions should be taken to improve areas where performance was below local and national averages.

We rated the practice as **good** for providing caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Completed Care Quality Commission comment cards were positive as well as feedback from the Patient Participation Group (PPG). The practice carried out their own internal patient survey which demonstrated improvement in patient satisfaction.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way. Patients as well as members of the PPG we spoke with during our inspection, felt they were able to access appointments when they needed one.

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

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Overall summary

(Please see the specific details on action required at the end of this report).

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

- Ensure availability of equipment to carry out clinical assessments when patients present with an acute illness, or a deteriorating pre-existing condition, particularly where sepsis is suspected.
- Ensure availability of suggested emergency medicines to enable staff to respond to a wider range of medical conditions they might encounter.

- Continue taking action to improve the uptake of childhood immunisation as well as national screening programmes such as cervical screening.
- Continue taking action to improve the appropriate and safe use of antibacterial medicines.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a second CQC inspector.

Background to Briton Street GP Surgery

Briton Street GP Surgery is located at 5 Briton Street, Leicester, Leicestershire, LE3 0AA. The practice is situated in a converted house; providing NHS services to the local community.

Dr Shafiq Shafi and Partners are the providers of Briton Street Surgery and another neighbouring practice both of which are separate locations for the purpose of registration with the Care Quality Commission (CQC). All general medical services (GMS) contracts provided by Dr Shafiq Shafi and Partners are operated as one service with an overarching leadership and governance framework. GMS is a contract between general practices and NHS England for delivering services to the local community. As part of this inspection, we only visited Briton Street GP Surgery.

Dr Shafiq Shafi and Partners are the registered providers at Briton Street GP Surgery, registered with CQC since July 2017 to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning, surgical procedures and treatment of disease, disorder or injury.

Briton Street GP Surgery is situated within Leicester City Clinical Commissioning Group (CCG) and provides

services to 1,810 patients under the terms of a GMS contract. This is a contract between general practices and NHS England for delivering services to the local community.

Practice staff comprises a principle GP partner (male), two GP associates (both male) and a silent GP partner who was not directly involved in the day to day running of the service; however, in the event the principle GP was unable to work then the silent partner would be appointed as clinical lead. The clinical team also includes a practice nurse and a health care assistant. The non-clinical team consists of a practice manager, a deputy practice manager and a team of receptionists.

Briton Street GP Surgery is a teaching practice providing placements for foundation year (FY) one and two doctors (a grade of medical practitioners undertaking a foundation programme which forms the bridge between medical school and general practice training). At the time of our inspection, there was one FY2.

The practice is open between 8am and 6.30pm weekly except on Fridays when the practice is open between 8am and 7.30pm. There are Hub arrangements in place with a neighbouring practice where patients can access appointments between 8am and 8pm Monday to Sunday.

Briton Street GP Surgery is in one of the more deprived area of Leicester. The practice scored two on the deprivation measurement scale; the deprivation scale goes from one to 10, with one being the most deprived. People living in more deprived areas tend to have greater need for health services. National General Practice Profile describes the practice ethnicity as being 64% white

British, 24% Asian, 5% black, 4% mixed and 3% other non-white ethnicities. The practice demographics show the average percentage of people in the 65+ to 75+ year age group were below local and national percentages. The general practice profile shows that 41% of patients registered at the practice have a long-standing health condition, compared to 45% locally and 51% nationally.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>The provider did not establish effective systems to enable staff to identify and assess safety of treatment provided to people who use the service.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• The system for managing test results within the practice was not entirely safe and effective in such it did not enable the provider to ensure test results which prompted alteration of patient's management were acted on. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>