

The Caxton Surgery

Inspection report

Oswald Road
Oswestry
SY11 1RD
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www.caxtonsurgery.co.uk

Date of inspection visit: 28 November 2022
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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?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Good	

Overall summary

We carried out an announced comprehensive at The Caxton Surgery on 28 November 2022 Overall, the practice is rated as Requires Improvement.

Safe – Requires Improvement

Effective - Requires Improvement

Caring - good

Responsive - good

Well-led - good

Following our previous inspection on 8 September 2016, the practice was rated good overall and for all key questions with the exception of responsive, where the practice was rated as outstanding.

At the last inspection we rated the practice as outstanding for providing responsive services because:

- The practice had developed its staff's skillset in order that its clinical staff could deliver care directly at a refuge for domestic abuse patients with highly complex needs.
- The practice had devised a five point Dementia Action Alliance Action plan; including investigating the ways in which the practice physical environment could be improved to be more welcoming and accessible for patients with dementia, which was in progress.
- The practice had identified and liaised with local employers whose employees included 800 people from an ethnic minority group and provided literature in the most appropriate language to meet their needs.

At this inspection, we found that those areas previously regarded as outstanding practice were now embedded throughout the majority of GP practices. While the provider had maintained this good practice, the threshold to achieve an outstanding rating had not been reached. The practice is therefore now rated **good** for providing responsive services.

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

Why we carried out this inspection

We carried out this inspection due to the length of time the practice was previously rated. We assessed all key questions.

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.

Overall summary

- Requesting evidence from the provider.
- A site visit.
- Staff feedback questionnaires.

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:

- Not all patients received effective care and treatment that met their needs.
- The practice had exceeded the 95% WHO target in four of the five indicators for child immunisations.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care. Ninety seven and a half percent of patients who responded to the GP patient survey felt they were involved as much as they wanted to be in decisions about their care.
- Patients could access care and treatment in a timely way. The practice achieved higher than local and national averages for providing responsive services within the national patient survey.
- The practice exhibited an open culture, the leadership team were freely accessible to staff and staff felt included and listened to.

We found a breach of regulations. The provider **must**:

Ensure care and treatment is provided in a safe way to patients

In addition, the provider **should**:

- Continue the work to re-establish the Patient Participation Group
- Develop an effective system for the management of administrative tasks.

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 The Caxton Surgery

The Caxton Surgery is located in Oswestry, Shropshire at:

Oswald Road

Oswestry

Shropshire

SY11 1RD

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The practice is situated within the Shropshire, Telford and Wrekin Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 13,994. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices known as North Shropshire Primary Care Network (PCN) consisting of 6 local practices working at scale.

Information published by Public Health England shows that deprivation within the practice population group is in the sixth decile (6 of 10). The higher the decile, the least deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is, 98% White, 1% Asian, 0.7% Mixed and 0.2% Black.

There is a team of 9 GPs, 3 nurse practitioners, 1 urgent care practitioner, 3 practice nurses, and 2 health care assistants, a clinical pharmacist supported by a practice manager, assistant practice manager, operations manager and a team of reception and administrative staff.

The practice is open between 8.30am to 6pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Patients can access weekday evening and weekend appointments at other locations within the Hub.

More information about the practice is provided on their website at www.caxtonsurgery.co.uk

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Family planning services Maternity and midwifery services Surgical procedures	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• Not all staff had received the appropriate level of safeguarding training required for their role. There were no codes or alerts routinely placed on the records of adult household members of children with safeguarding concerns.• The practice did not have effective systems in place for some processes relating to the safe management of medicines and reviews.• There was no process for ongoing management of historical safety alerts.• There was no formal monitoring of the non-medical prescribers.• Some patients were overdue long-term condition reviews and there was not a robust recall system in place to call patients in for repeat monitoring checks when they were requested by a clinician.• Not all clinicians were working in line with guidance in relation to asthma and diabetes.• Good practice guidance regarding the appropriate authorisation of the Patient Group Directives to administer medicines had not been followed. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>