

# Drs Pearce and Trenholm

## Inspection report

Springmead Surgery  
Summerfields Road  
Chard  
TA20 2EW  
Tel: 0146063380  
[www.springmeadsurgery.co.uk](http://www.springmeadsurgery.co.uk)

Date of inspection visit: 12 and 17 January 2023  
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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

Inadequate



Are services safe?

Inadequate



Are services effective?

Inadequate



Are services caring?

Requires Improvement



Are services responsive to people's needs?

Inadequate



Are services well-led?

Inadequate



# Overall summary

We carried out an announced comprehensive at Drs Pearce and Trenholm on 12 and 17 January 2023. Overall, the practice is rated as inadequate.

Safe - inadequate

Effective - inadequate

Caring - requires improvement

Responsive - inadequate

Well-led - inadequate

Following our previous focused inspection on 28 September 2021, we rated effective good. The ratings from the 2020 inspection carried forward which made the service good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Drs Pearce and Trenholm on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We carried out this inspection to follow up concerns and in response to risk reported to us.

We inspected all key questions:

Safe

Effective

Caring

Responsive

Well led

## 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.

# Overall summary

- A 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:

- Governance systems overall were ineffective, in particular but not limited to medicines management; health and safety; staff training and recruitment; and monitoring of care and treatment provided to patients,
- There was a lack of leadership and staff were not appropriately supported to ensure care and treatment for patients was effective.
- There was limited oversight to ensure patients' needs were assessed and reviewed appropriately and monitored in accordance with guidance.
- Staff did not benefit from regular supervisions and appraisals to ensure they were provided with opportunities to develop and had receive training necessary to carry out their role.
- Patients were unable to access care and treatment in a timely manner, in particular access to face to face appointments was poor; and there were no effective procedures in place to promote continuity of care.
- Staff were inconsistent with treating patients with kindness, respect and compassion. Feedback from patients was negative about the way staff treated people.
- Staff helped patients to be involved in decisions about care and treatment, but this was not consistent.
- The practice did not have clear systems, practices and processes to keep people safe and safeguarded from abuse.
- The practice did not have a system to learn and make improvements when things went wrong. There was a lack of clarity in what constituted a significant event.
- Complaints were not used to improve the quality of care.
- There was no evidence of systems and processes for learning, continuous improvement and innovation.

We identified regulatory breaches within the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 during this inspection. They are Regulation 12 Safe care and treatment; Regulation 13 Safeguarding service users from abuse and improper treatment; Regulation 15 Premises and equipment; Regulation 16 Receiving and acting on complaints; Regulation 17 Good Governance and Regulation 18 Staffing.

We sent a letter of intent of potential enforcement action to the provider outlining our concerns and requested an action plan detailing how they were going to meet these breaches. The provider did not provide an action plan in the set timeframe. We considered further enforcement action and consulted other stakeholders regarding the sustainability of the practice. When a service is rated inadequate overall we usually look to place them in special measures and take high level enforcement action.

During our contact with the provider and external stakeholders it became clear that the practice was unable to continue to operate. The provider made a decision to hand the contract back to the Integrated Care Board and cease operating the service. A closure date was set for 24 February 2023.

We did not take enforcement action, but continued to work with the provider and stakeholders to ensure that all patients registered at the practice were safely transferred to the care of other GP practices.

# Overall summary

The practice duly closed on 24 February 2023 and all patients were registered with another GP practice in a planned way.

**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 and a second CQC 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. There was also a Practice Manager specialist advisor who attended on day 1 of the inspection.

## Background to Drs Pearce and Trenholm

Drs Pearce and Trenholm, also known as Springmead Surgery, is located in Chard at:

Summerfields Road,

Chard,

Somerset,

TA20 2EW

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 Somerset Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 5,700. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices collectively known as the Chard, Langport, Ilminster & Crewkerne (CLICK) Primary Care Network (PCN). PCNs are a key part of the NHS Long Term Plan, with general practices being a part of a network, typically covering 30,000-50,000 patients. These networks then provide the structure and funding for services to be developed locally, in response to the needs of the patients they serve.

Information published by Public Health England shows that deprivation within the practice population group is in the fifth lowest decile (five of 10). The lower the decile, the less deprived the practice population is relative to others.

According to the latest available data, 1.7% of the practice population comes from non-white ethnic groups. The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of 2 GPs who provide cover. The practice has a team of 2 nurses who provide nurse led clinics for long-term condition of use of both the main and the branch locations. The GPs are supported at the practice by a team of reception/administration staff. There is a practice manager and patient services manager.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Out of hours services are provided via the NHS 111 service.