

# St Thomas Road Surgery

## Inspection report

207 St Thomas Road  
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st-thomas-road-surgery-derby](http://www.onemedicalgroup.co.uk/st-thomas-road-surgery-derby)

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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?

Good



Are services well-led?

Requires improvement



# Overall summary

We carried out a comprehensive inspection at St Thomas Road Surgery on 28 October 2020. Due to the impact of the COVID-19 pandemic, the majority of evidence reviewed and staff interviews were undertaken remotely in advance of the site visit on 28 October.

The practice had previously received a comprehensive inspection in February 2020 when it received an overall rating of inadequate. The safe, effective, responsive and well-led domains were rated as inadequate and the caring domain was rated as requires improvement. All population groups were rated as inadequate. The practice was placed in special measures and a warning notice was also issued against the provider.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for St Thomas Road Surgery on our website at

We undertook this comprehensive inspection in October 2020 to check that the provider had completed the action plan they had provided to address the areas identified as inadequate and requiring improvement, and also in relation to the concerns highlighted within the warning notice. This was to determine if they had made sufficient improvements to be taken out of special measures.

Following our inspection in October 2020, the practice is now rated as requires improvement overall. The practice is also rated as required improvement for providing safe, effective and well-led services and for all population groups. It is now rated as good for providing caring and responsive services. The practice is now compliant with the warning notice issued after the previous inspection.

The service is now rated as requires improvement for providing safe services because:

- Whilst safe systems for monitoring patients prescribed high risk medicines had been implemented, there needed to be more in-depth reviews to ensure that historic prescribing was appropriate and in line with guidance.
- Clinical coding in the past had not always been completed effectively and there was a need for consistency to ensure patient safety.

The service is now rated as requires improvement for providing effective services because:

- Some patient records needed an update to reflect more comprehensive care planning, details of medicines reviews, and to ensure that clinical coding was correct.
- The above findings affected all population groups and this means all are rated as requires improvement.
- Unverified data for childhood immunisations and cancer screening was showing an overall improved performance, but further emphasis was required to improve uptake and for this to be reflected in outcomes when these are next published.

The service is now rated as requires improvement for providing well-led services because:

- Recruitment to key posts was essential to provide the managerial and clinical infrastructure on site. At the time of our inspection, this looked to be evolving and it was hoped the team would be at full capacity in the near future. This would also allow the Advanced Nurse Practitioner to be released more to focus on their wider role across the practice and the urgent care centre.
- Some developments at practice level such as the recall system for patients with long-term conditions needed to become embedded, and there was a need to review some patient records in terms of previous coding, care planning, medicine reviews, and compliance with guidance and good record keeping, in order to provide full assurance of a robust and functional governance system.

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

In addition, the provider **should**:

- Continue to audit previous records to ensure coding and other entries are reviewed to ensure that care and treatment is provided in a safe way.
- Continue to closely monitor patient experience and adapt services as appropriate to reflect feedback received.
- Promote and drive the uptake of childhood immunisations and cancer screening programmes with their patients.
- Update the practice website with a greater focus on information on local support services.

# Overall summary

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

<b>Older people</b>	<b>Requires improvement</b> 
<b>People with long-term conditions</b>	<b>Requires improvement</b> 
<b>Families, children and young people</b>	<b>Requires improvement</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Requires improvement</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Requires improvement</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 CQC inspector supported by a GP Specialist Adviser and a second CQC inspector.

## Background to St Thomas Road Surgery

St Thomas Road Surgery is registered with the Care Quality Commission to carry out the following regulated activities - diagnostic and screening procedures, family planning, surgical procedures, maternity and midwifery services, and the treatment of disease, disorder or injury. The practice is situated near to the city centre of Derby at 207 St Thomas Road, DE23 8RJ.

The practice has a contract with NHS Derby and Derbyshire Clinical Commissioning Group (CCG) to provide primary care services via an Alternative Provider Medical Services (APMS), and offers a range of local enhanced services.

The service is one of 11 registered services managed and operated by One Medicare Ltd (the provider). These include urgent care centres, GP practices, and walk-in services. The provider's head office and operations centre is based near Leeds in West Yorkshire.

The practice has approximately 4,265 registered patients. The age profile demonstrates a higher proportion of younger patients, and lower numbers of older patients compared to local and national averages:

- The percentage of people in the 65+ year age group at 4% is below the CCG average of 20.8%, and the national average of 17.4%.

- The percentage of people in the under 18 age group at 34.7% is above the local average of 19.3%, and the national average of 20.6%.

The practice scored one 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.

The National General Practice Profile describes the practice ethnicity as being 48.6% white, 37.6% Asian, 4.3% mixed race, and 5.9% black, with the remaining 3.6% being of other ethnicities.

The practice team is led by an advanced nurse practitioner who also leads the team at the nearby Derby Urgent Care Centre which is another of the provider's registered locations. There is one part-time male salaried GP, and two regular sessional locum GPs. The practice was trying to recruit for a second substantive GP post. There is a practice nurse and an assistant practitioner, and the practice are trying to recruit for a deputy lead nurse role. At the time of our inspection, the practice was utilising locum nurses until substantive recruitment was successful. There is also a practice manager, and a team of five reception/administrative staff. Practice staff receive ongoing support from the wider infrastructure within One Medical Group.

The practice opens Monday to Friday from 8am until 6.30pm with extended hours opening on Monday and Tuesday between 6.30-7.30pm, and opens from 7.30am on Tuesday. The practice also works in collaboration with other local practices to provide a GP extended access scheme until 8pm Monday to Friday, and 8am until noon at weekends.

When the practice is closed, out of hours cover for emergencies is provided by Derbyshire Health United (DHU).

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>The practice had systems or processes in place that operated ineffectively in that they failed to enable the registered person to ensure that accurate, complete and contemporaneous records were being maintained securely in respect of each service user. In particular:</p> <ul style="list-style-type: none"><li>• the accuracy of clinical coding.</li><li>• care planning to reflect the holistic care of the patient.</li><li>• comprehensive medicine reviews being undertaken.</li></ul>