

Wenlock Road Surgery

Quality Report

171 Wenlock Road,
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South Shields,
Tyne and Wear,
NE34 9BP

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Date of inspection visit: 6 September 2017

Date of publication: 09/10/2017

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 service

Good



Are services well-led?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Wenlock Road Surgery on 21 October 2016. The overall rating for the practice was good; but was requires improvement for providing well led services. The full comprehensive report on the October 2016 inspection can be found by selecting the 'all reports' link for Wenlock Road Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 6 September 2017 to review in detail the actions taken by the practice to improve the quality of care.

Overall the practice is still rated as good, but now also good for providing well led services.

Our key findings were as follows:

- Action had been taken to address all of the issues identified at the previous inspection.
- The arrangements for recording and learning from significant events and verbal complaints had been strengthened.
- A more structured approach to clinical audits had been developed, to ensure they were linked to improving outcomes for patients.
- The practice had begun the process for registering the third GP partner within the practice with CQC.

At our previous inspection on 21 October 2016 we said the provider should obtain evidence of all staff's immunity status against vaccine-preventable diseases. During this inspection we found action had been taken to obtain this information from staff's own GP practices.

Professor Steve Field CBE FRCP FFPH FRCGP
Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services well-led?

The practice is rated as good for providing well led services. The practice had taken action to address the concerns raised during our previous inspection in October 2016. They had:

- Taken steps to improve the systems for recording and learning from significant events and verbal complaints.
- Developed a more structured approach to ensure that clinical audits were linked to improving outcomes for patients.
- Begun the process for registering the third GP partner within the practice with CQC.

Good



Wenlock Road Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

a CQC lead inspector. The team included a second CQC inspector.

Background to Wenlock Road Surgery

Wenlock Road Surgery is registered with the Care Quality Commission to provide primary care services. The practice is part of NHS South Tyneside clinical commissioning group (CCG) and operates on a General Medical Services (GMS) contract agreement for general practice.

The practice provides services to around 4,600 patients from two locations:

- 171 Wenlock Road, Simonside, South Shields, Tyne and Wear, NE34 9BP.
- Flagg Court Health Centre, Dale Street, South Shields, Tyne & Wear, NE33 2LS.

We visited the Wenlock Road premises during this inspection.

Wenlock Road Surgery is situated in converted two-story building. Patient services are all on the ground floor. Access to the building is via a ramp. All reception and consultation rooms are fully accessible for patients with mobility issues. There is very limited on-site car parking; however, parking is available close to the practice.

Flagg Court is situated in a purpose-built building, which also accommodates other GP practices and several

community services. All reception and consultation rooms are fully accessible for patients with mobility issues. An onsite car park is available which includes dedicated disabled parking bays.

Wenlock Road Surgery is open at the following times:

- Monday, Tuesday and Friday from 9am to 1pm, then from 3:30pm to 6pm.
- Wednesday from 9am to 6pm.
- Thursday from 9am to 2pm.
- Friday from 9am to 1pm, then from 3:30pm to 6pm
- Alternate Saturdays from 10am to 12:30pm.

Flagg Court is open at the following times:

- Monday 9am to 6pm, then from 6:30pm to 7:30pm
- Tuesday, Thursday and Friday from 9am to 6pm.
- Wednesday from 9am to 2pm.

Appointments are available at Wenlock Road Surgery at the following times:

- Monday, Wednesday, Thursday and Friday 9am to 1:30pm and 3:30pm to 6pm.
- Tuesday 9:10am to 11:50am and 3:30pm to 6pm.
- Extended hours appointments are available 10am to 12:30pm on alternate Saturday mornings.

Appointments are available at Flagg Court at the following times:

- Monday 9am to 1pm and 1:30pm to 6pm or, 9:30am to 3pm and 3:30pm to 7.30pm alternate weeks.
- Tuesday and Wednesday 9:30am to 12:50pm and 3:30pm to 6pm.
- Thursday and Friday 9am to 1pm and 1:30pm to 6pm.
- Extended hours appointments are available at 6:30pm to 7:30pm on alternate Monday evenings.

The telephones are answered by the practice during their opening hours. This information is also available on the

Detailed findings

practice's website and in the practice leaflet. The service for patients requiring urgent medical care out of hours is provided by the NHS 111 service and Vocare, which is locally known as Northern Doctors Urgent Care Limited.

The practice consists of:

- Three GP partners (all male) – at present only two are registered with CQC, although there is an application in progress to add the third partner to the registration.
- Two practice nurses (both female)
- Seven non-clinical staff including a practice manager and six staff who undertake reception and administrative duties.

The age profile of the practice population is broadly in line with the CCG averages. Information taken from Public Health England placed the area in which the practice is located in the second most deprived decile. In general, people living in more deprived areas tend to have greater need for health services.

Why we carried out this inspection

We undertook a comprehensive inspection of Wenlock Road Surgery on 21 October 2016 under Section 60 of the

Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report following the inspection in October 2016 can be found by selecting the 'all reports' link for Wenlock Road Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Wenlock Road Surgery on 6 September 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care.

How we carried out this inspection

During our visit we:

- Spoke with a range of staff (GP partner, practice nurse, practice manager, member of the administration team).
- Looked at information the practice used to manage the service.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

At our previous inspection on 21 October 2016, we rated the practice as requires improvement for providing well led services as some arrangements, including systems to assess, monitor and improve the quality and safety of the service were not satisfactory.

These arrangements had significantly improved when we undertook a follow up inspection on 6 September 2017. The practice is now rated as good for providing well led services.

Governance arrangements

At our previous inspection we found arrangements were not in place to enable lessons to be learned from significant events and verbal complaints were not managed.

During this inspection we saw the system for reporting and recording significant events had been improved. A policy and detailed flow chart was available for staff to follow. Staff told us they would inform the practice manager of any incidents and there was a recording form available. The staff we spoke with gave examples of issues they had raised and we saw these had been recorded on the significant event log. We reviewed the significant event log and supporting records and minutes of meetings where they were discussed. We saw evidence that lessons were shared and action was taken to improve safety in the practice. For example, following one incident staff received training on the documents and processes in relation to end of life care.

We reviewed the complaints schedule and saw that verbal and written complaints were now recorded and investigated. We found all complaints had been dealt with appropriately.

During our previous inspection we found that clinical audits were not effectively linked to patient outcomes. The practice had taken action since the last inspection and one of the GP partners had taken the lead for clinical audit. Two audits were in progress; antibiotic prescribing, selected because prescribing rates were higher than local and national comparatives. One cycle had been completed, learning sessions held for clinicians and a second cycle was planned for later in the year. The second audit was in relation to a new approach to managing chronic obstructive pulmonary disease (CoPD) for patients; this was selected due to the higher prevalence of the disease across the patient list.

When we inspected in October 2016 we found that the governance arrangements did not support a comprehensive understanding of the performance of the practice. For example, the practice's Quality and Outcomes Framework (QOF) performance was not reviewed at practice meetings. During this inspection we reviewed practice meeting minutes and saw QOF performance was a standing agenda item. Staff we spoke with were well informed about the practice's performance and had plans in place to address any gaps.

At our previous inspection the practice had two GP partners registered with CQC but wanted to add a third partner. We were told the practice had sought advice on registering correctly but had not completed the process.

During this inspection we found the practice had begun the process to register the additional partner. Relevant checks had been carried out, a notification to add the partner had been submitted and the application was ready to be submitted once confirmation of the new partner's Disclosure and Barring Service (DBS) status was received.