

Canvey Village Surgery

Inspection report

391 Long Road
Canvey Island
SS8 0JH
Tel: 01268510520
www.canveyvillagesurgery.com

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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?	Requires Improvement	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced comprehensive inspection at Canvey Village Surgery on 22 November 2023. Overall, the practice is rated as requires improvement.

Safe – requires improvement

Effective – requires improvement

Caring - good

Responsive – requires improvement

Well-led – requires improvement

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities

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:

- 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.
- A site visit.
- Conducting staff interviews via video conferencing and face to face.
- Staff 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:

- Some patients' care needs were not always reviewed and monitored in line with current legislation and standards.
- Safety alerts were not consistently discussed with patients as recommended.
Staff had received appropriate training and there were effective health and safety risk assessments.
- Some patients with long term conditions were not always reviewed in line with current legislation and standards to ensure they received the appropriate care.

Overall summary

- Cervical screening uptake was below national target.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice performance for the access indicators in the national GP survey for 2020, 2021 and 2022 was below the local and national average and this had further declined in 2023. Although some action to improve access was ongoing, this was yet to be reflected in improved patient feedback.
- There were a range of governance issues that required improvement around the management and oversight of people receiving treatment for some high-risk medicines and long-term conditions.
- There was no programme of clinical or non-clinical audits to improve patient care.
- Staff had received appropriate training and there were effective health and safety risk assessments.
- Staff spoke positively about leaders and felt supported.
- The practice had achieved 100% take up for 3 of the 5 Child Immunisation indicators.

We found 1 breach of regulations. The provider **must**:

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

We also found that the provider **should**:

- Continue with efforts to seek and act on patient feedback and embed learning to improve the patient experience.
- Continue with efforts to complete the recording of staff vaccinations.
- Continue to monitor and improve cervical screening rates.

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 Health Care

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 Canvey Village Surgery

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

The practice is situated within the Mid and South Essex Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 4,000. This is part of a contract held with NHS England.

The practice is part of The Canvey Island Primary Care Network which is a network of 6 local GP practices.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth lowest decile (4 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 0.9% Asian, 97% White, 0.9% Black, 1% Mixed, and 0.2% Other.

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 1 lead GP and 2 locum GPs. The practice has a team of 1 advanced nurse practitioner and 1 practice nurse. There is a team of administrative and reception staff, led by the practice manager. In addition there is a pharmacist, an emergency care practitioner and a healthcare assistant who are employed by the primary care network to work at the practice.

The practice is open between 8 am to 6.3 pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by a local provider, where late evening and weekend appointments are available. Out of hours services are provided by NHS111.

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 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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance <ul style="list-style-type: none">• There were a range of governance issues that required improvement around the management and oversight of people receiving treatment for some high-risk medicines and long-term conditions.• There was no programme of clinical or non-clinical audits to improve patient care.• Although some action to improve access was ongoing, this was yet to be reflected in improved patient feedback.