

Drs Carr and Davies

Inspection report

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Date of inspection visit: 03/01/2019
Date of publication: 29/01/2019

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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced comprehensive inspection at Drs Carr and Davies, known as the Crown Surgery on 3 January 2019 as part of our inspection programme.

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 have rated this practice as good overall and good for all population groups.

We rated the practice as good for providing safe, effective, caring and responsive services because:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We rated the practice as requires improvement for providing well-led services because:

- The practice did not have clear and effective processes for managing risks, issues and performance.

The areas where the provider **must** make improvements are:

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

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

The areas where the provider **should** make improvements are:

- Refine the complaints process.
- Review and update the cleaning schedule.
- Ensure the emergency equipment is easily accessible in the case of an emergency.

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

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

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, and a practice manager specialist advisor.

Background to Drs Carr and Davies

Drs Carr and Davies, known locally as the Crown Surgery is a rural practice situated in the village of Eccleshall in Staffordshire.

The practice is registered with the Care Quality Commission (CQC) as a partnership provider. The practice holds a Personal Medical Services (PMS) contract with NHS England and is part of the NHS Staffordshire and Surrounds Clinical Commissioning Group. Car Parking, is available at this practice.

At the time of our inspection the practice was caring for 7800 patients. The practice is registered to undertake minor surgery. The practice has a dispensary within the building and has dedicated GP support and oversight.

The practice area is one of less deprivation when compare with local and national averages.

The practice is a partnership made up of two male and one female partners. The practice also has one salaried GP and two advanced nurse practitioners; two practice nurses and a phlebotomist. The practice manager and business support administrator are supported by eight receptionists, five dispensing staff, two secretaries, and and one cleaner.

The practice is open between 08.00 and 6.30pm Monday to Friday. Extended hours through the local hub arrangements are in place until 8.pm daily. When the surgery is closed the out of hours care is provided by Staffordshire Doctors urgent Care Ltd.

Further information can be found on the practice website: www.crownsurgery.org.uk

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>How the regulation was not being met...</p> <p>The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks related to the health, safety and welfare of service users and others who may be at risk. In particular:</p> <p>{cke_protected_1}• There was no oversight of all safety alerts and action taken in response to these.</p> <ul style="list-style-type: none">• Appropriate action had not been taken in response to the safety alert on blank plug sockets, which required these to be removed.• Appropriate action had not been taken in response to the safety alert on blind stops.• <p>There were limited systems and processes that enabled the registered person to evaluate and improve their practice in respect of processing of information obtained throughout the governance process. In particular:</p> <p>{cke_protected_2}• There was no suitable mechanism to ensure that all clinical staff were involved in practice meetings or able to give or receive feedback for the purposes of continually evaluating and improving services.</p> <ul style="list-style-type: none">• Share the learning from significant event and complaint reviews with the whole staff team.• There was limited evidence of a comprehensive programme of quality improvement.

This section is primarily information for the provider

Requirement notices

The practice had not ensured the competence of staff employed in advanced roles by audit of their clinical decision making.

This section is primarily information for the provider

Enforcement actions

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. We took enforcement action because the quality of healthcare required significant improvement.