

Longfleet House Surgery

Inspection report

56 Longfleet Road
Poole
Dorset
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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?

Requires improvement



Are services responsive?

Requires improvement



Are services well-led?

Inadequate



Overall summary

We carried out an inspection at Longfleet House Surgery in September 2017. The overall rating for the practice was inadequate and the practice was placed into special measures. Following the inspection two warning notices were served which related to regulations 12 Safe care and treatment and 17 Good governance of the Health and Social Care Act 2008. A requirement notice was served for regulation 12 Safe care and treatment.

We carried out a focused inspection in November 2017 to check whether the practice had met the warning notices. We deemed the warning notices to be met at this inspection.

We carried out an announced comprehensive inspection at Longfleet House Surgery on 16 May 2018, to follow up on the requirement made at our inspection in September 2017. We deemed the requirement notice to be met, but found other areas of concern, notably:

- Shortfalls in the provision of training deemed as necessary by the practice.
- The availability of nursing staff was limited to a set number of days per week.
- The practice was unable to demonstrate fully that appropriate recruitment checks had been carried out for all staff who worked at the practice.
- There were risks of delays in reviewing of patient test results when a GP was absent.

This service was placed in special measures September 2017 and has remained in special measures as insufficient improvements were made.

These reports can be found by selecting the 'all reports' link for Longfleet House Surgery

on our website at www.cqc.org.uk.

We carried out an unannounced comprehensive inspection at Longfleet House Surgery on 30 January 2019.

At this inspection we followed up on breaches of regulations identified at a previous inspection on 16 May 2018.

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 requires improvement overall.

We rated the practice as **requires improvement** for providing safe services because:

- We found that all required information was available, apart from evidence of satisfactory conduct in previous employment for one of the permanent members of staff.
- Blood glucose monitoring machines were last recorded as having control testing carried out in May 2018. Practice policy and best practice guidance recommends at least quarterly testing. The practice were signed up to the clinical commissioning groups system for testing with control liquids, to ensure readings were accurate.
- There were not records available to demonstrate that weekly testing of fire alarms had been carried out.
- At this inspection in January 2019 we found that there were still no overarching health and safety risk assessments. However, shortfalls identified at our previous inspection had been addressed.
- The practice had safeguarding information leaflets; the information was aimed at healthcare professionals and may not have been relevant for patient need. The same information was also on the practice's website. We were provided with documentation after the inspection which showed that a gas safety check had been carried out in February 2019.
- There were shortfalls in Legionella management. We found that water temperatures and bacteria analysis had been carried out. However, the practice could not fully demonstrate that all risks had been minimised as far as possible. Records related to weekly flushing through of little used outlets were incomplete.

We rated the practice as **requires improvement** for providing effective services because:

- All training deemed necessary by the practice had been completed, apart from one member of staff who required infection control and basic life support training; one member of staff who requires infection control training; and one member of staff who required basic life support training. We saw that this had been planned for.
- The locum practice nurse works two days a week and was able to carry out wound dressings, blood tests, BPs

Overall summary

checks and aspects of long term condition reviews. They were not able to carry out cervical screening, but arrangements were in place for patients to attend a sister practice if needed. Reception staff said at present there was a waiting list for cervical screening, but did not give a figure. They were aware of the work that the locum nurse could undertake.

- Some performance data continued to be below local and national averages. The overall trend was one of improving performance, but staffing arrangements did not allow for practice monitoring of the outcomes of care and treatment.

We rated the practice as **requires improvement** for providing caring services because:

- The practice did not address feedback from patients in a proactive manner.

We rated the practice as **requires improvement** for providing responsive services because:

- The service offered was limited due to the skills and competencies of staff available.

The practice had not made adequate improvements since our previous inspections. Therefore, the practice remains rated as **inadequate** for providing well-led services because:

- The practice had experienced staff leaving and had not been able to recruit into these roles, partly due to national shortages of skilled staff. There were shortfalls in the provision of management hours to enable good governance of the practice which potentially impacted on risk management processes.
- The registered manager was also responsible for other GP practices and therefore had other responsibilities in addition to overseeing Longfleet House Surgery, this had impacted on governance arrangements for the practice.
- There were shortfalls in reviewing policies and procedures to ensure information was accurate and relevant, for example the business continuity plan.
- The business continuity plan was last reviewed in March 2018, but had not been reviewed to take account of staff leaving the practice.

These areas affected all population groups so we rated all population groups as **requires improvement**, apart from people with long-term conditions, which was rated as **inadequate** due to no sustained improvement in monitoring outcomes for patients.

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).

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

- Review staff recruitment files to ensure they have all the required information.
- Review records related to equipment calibration, fire alarm testing and Legionella management so they are complete.
- Review information contained in safeguarding leaflets and on the practice website, so it is relevant for patients.
- Continue to ensure that staff training is kept up to date.
- Review arrangements for providing cervical screening uptake.
- Continue to work on monitoring and improving outcomes for patients.

This service was placed in special measures in September 2017. Insufficient improvements have been made such that there remains a rating of inadequate for well led. Therefore, we are taking action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve. The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within six months, and if there is not enough improvement we will move to close the service by adopting our proposal to vary the provider's registration to remove this location or cancel the provider's registration

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

Overall summary

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

Population group ratings

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

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 Longfleet House Surgery

The practice is situated in the town of Poole in Dorset in a purpose-built practice building that is privately owned. The provider is Longfleet House Surgery and is registered to provide the following regulated activities:

- Diagnostic and screening procedures
- Surgical procedures
- Treatment of disease, disorder or injury

Longfleet House Surgery is working closely with another practice and are sharing staff for practice manager hours.

The current patient list is approximately 3,700 and covers a diverse age group, with a larger than average percentage of elderly patients aged 80 years and over.

There are two GP partners at the practice who do not routinely work at the practice and two salaried GPs. All GPs are male. Patients are able to see female GPs at another GP practice which Longfleet House Surgery

works closely with. There is a regular locum practice nurse who works two days a week. The practice is in the process of recruiting to their vacant practice nurse's positions.

In addition, there is a practice manager who works one and half days a week at the practice. There is also a team of reception and administration staff.

The practice is supported by Integral Medical Holdings Ltd (IMH) who also provides personnel and training services to the practice.

Out of hours services are provided for patients by using the NHS 111 service.

The practice provides regulated activities from:

56 Longfleet Road,
Poole,
Dorset.
BH15 2JD.

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 Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular we found: There were shortfalls in the provision of management hours to enable good governance of the practice. There were shortfalls in reviewing policies and procedures to ensure information was accurate and relevant, for example the business continuity plan. The business continuity plan was last reviewed in March 2018, but had not been reviewed to take account of staff leaving the practice. This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.