

The Cambridge Practice

Inspection report

Aldershot Centre for Health
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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		Good	
Are services safe?		Good	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Good	

Overall summary

We carried out an announced inspection at The Cambridge Practice in Aldershot, Hampshire on 8 September 2021.

Following our previous inspection in July 2019, the practice was rated Requires Improvement overall with two key questions (the provision of safe and well-led services) rated as Requires Improvement. The remaining key questions (the provision of effective, caring and responsive services) were rated as Good.

At this inspection (September 2021), we found improvements had been made and the provider is now compliant with the regulations. We have re-rated this practice as Good overall and Good for all population groups, specifically we have rated the practice as:

- Safe - Good
- Effective – Good
- Well-led - Good

The full reports for previous inspections can be found by selecting the ‘all reports’ link for The Cambridge Practice on our website at www.cqc.org.uk

Why we carried out this inspection

Given reported breaches of regulation from the July 2019 inspection, we issued a requirement notice for Regulation 17 ‘Good governance’ and for Regulation 19 ‘Fit and proper person employed’.

We carried out an announced inspection on 8 September 2021 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection in July 2019.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing remote clinical searches on the practice’s patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit to the main site (Aldershot Centre for Health)
- Discussions with practice staff and two patients

Our findings

We based our judgement of the quality of care at this service on a combination of:

Overall summary

- 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:

- The practice had made significant improvements since our previous inspection in July 2019.
- Systems had been strengthened to ensure safeguarding registers were monitored effectively. Regular reviews of the registers were carried out to ensure all the relevant information had been recorded appropriately and safeguarding arrangements protected patients from avoidable harm.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm, including associated risks to the COVID-19 pandemic.
- The practice was able to demonstrate staff had the skills, knowledge and experience to carry out their roles. Staff members were appraised annually and received appropriate supervision and training.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Continuous monitoring of practice procedures, clinical outcomes and clinical registers was in place to ensure improvements were maintained. However, further improvement was required for some long-term conditions and cervical screening uptake.
- The practice had various channels of communication and engagement with people who used the service. However, feedback from the patient participation group highlighted the practice hadn't taken some of the groups feedback onboard.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care. The practice now had an effective governance system in place, was well organised and actively sought to learn from previous inspections, performance data, complaints, incidents and feedback.

We saw several areas of outstanding practice including:

- The practice supported patients to live healthier lives through a targeted and proactive approach to health promotion and prevention of ill health. This included, designated workstreams and staff members to manage and coordinate health promotion for older people, people experiencing poor mental health, younger people and those with long-term conditions. This included the introduction of a framework referred to as a House of Care for a coordinated service model which enabled patients with long-term conditions to work together with clinicians to determine and shape the support needed to enable patients to live well with their condition. We also saw the practice had worked with other practices within the Primary Care Network, Clinical Commissioning Group and Integrated Care System to review health promotion post COVID-19. This included changes in patient behaviour as a result of the pandemic and lockdown restrictions.

Overall summary

- The practice had continued to demonstrate a culture of community wellbeing to ensure equality for patients when accessing health care. For example, additional engagement with the local care homes, the Nepalese community, people with a learning disability, military veterans and other identified cohorts of vulnerable patients throughout the pandemic.

Whilst we found no breaches of regulations, the provider **should**:

- Continue to monitor and review diabetes related clinical outcomes and hypertension related clinical outcomes.
- Continue to monitor and increase and cervical screening uptake.
- Further improve patient engagement and communication processes through re-engagement with the patient participation group.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

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 Care Quality Commission (CQC) lead inspector. They spoke with staff using video conferencing facilities on 2 September 2021 and the lead inspector undertook a site visit to the practice on 8 September 2021. The inspection team also included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews on 31 August 2021 without visiting the location.

Background to The Cambridge Practice

The Cambridge Practice was formed in April 2018 following a merger of two local practices in Aldershot. They have a patient list size of approximately 22,500 and are part of the Frimley Clinical Commissioning Group. (A CCG is responsible for planning and designing local health services in a specific geographic area. They do this by 'commissioning' or buying health and care services). The practice is also a member organisation of the federation of North East Hampshire practices, known as SALUS. In July 2019, the practice also became part of the Aldershot Primary Care Network.

The main practice site is located within Aldershot Centre for Health and is co-located with several other providers and stakeholders. The branch site is a converted residential property to the south of Aldershot town and approximately three miles from the main site.

The practice addresses are:

- Main site - Aldershot Centre for Health, Hospital Hill, Aldershot, GU11 1AY
- Branch site - 276 Lower Farnham Road, Aldershot, GU11 3RB

The practice website is: <https://cambridgepractice.co.uk/>

The provider is registered with CQC to deliver the following Regulated Activities from both sites:

- Diagnostic and screening procedures
- Family planning services
- Maternity and midwifery services
- Surgical procedures
- Treatment of disease, disorder or injury

The practice has five partners (four GP partners and one managing partner), a clinical pharmacist and two Physician Associates. The practice is registered as a training practice for doctors who are training to become GPs. At the time of the inspection there were three trainee GPs working at the practice.

The nursing team consists of three advanced nurse practitioners, one nurse practitioner, six practice nurses and four health care assistants. At the time of the inspection, there was one nursing student on a 12 week placement at the practice.

The day-to-day operations are overseen by the executive manager (who was also a partner), an operations manager and eight team leaders, who support a team of 51 administration, secretarial and reception staff across both practice sites.

According to national statistics, approximately 15% of the registered population are from black and minority ethnic groups, which includes a large Nepalese community. The practice is also located in an area of moderate to low deprivation with pockets of high deprivation within the practice area boundary. There are a higher number of young patients aged four and under and a lower number of older patients aged 65 and over, compared with local and national averages. There is a higher incidence of patients with a long-standing health condition compared to local and national data and a higher than average number of patients employed (or in full time education).

The practice is open between 8am and 6.30pm, Monday to Friday. Appointments are offered from 8.30am to 12.50pm every morning and afternoon clinics start at 1.40pm with the last appointment at 6.20pm daily. Extended hours appointments are for Monday and Wednesday evenings and Tuesday and Thursday mornings are due to recommence at the end of September 2021. Additional extended hours were available via the GP federation between 6.30pm and 8pm Monday to Friday and 8.30am to 12pm on Saturdays at the practice and at other GP surgeries in the local area.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments have been via telephone consultations. If a clinician decides a patient requires a face-to-face appointment, an appointment is made.