

# The Community Practice

## Inspection report

Canvey Island Primary Care Centre  
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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?

Requires Improvement



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 Community Practice on 29 November 2021 Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe - Requires Improvement

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

This was the first time that this practice has been inspected.

## **Why we carried out this inspection**

This was a comprehensive inspection undertaken as part of our inspection programme.

## **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 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

## **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:

# Overall summary

- The practice did not always provide care in a way that kept patients safe and protected them from avoidable harm. We found that not all medicines reviews were carried out in line with guidance. We also found that safety alerts had not been acted upon.
- The practice system for acting on patient safety alerts needed strengthening
- The practice system for identifying patients with a possible diagnosis of diabetes needed strengthening.
- The practice performance for the prescribing of anti-microbials needed strengthening.
- The uptake for cervical screening and some childhood immunisations needed improvement.
- Patients received effective care and treatment that met their needs. The patient records that we reviewed remotely demonstrated that care pathways and protocols were managed well.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care. We saw that staff at the practice worked closely with the palliative care team so that patients at end of life received the best care possible.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. 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-centred care. The vision of the practice was to be at the heart of the local community and staff were involved in projects led by the local community.

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

- Improve the process for all medicines reviews in line with guidance.
- Improve the process for acting on patient safety alerts in line with guidance.
- Improve the process for identifying and coding patients with a possible diagnosis of diabetes.
- Continue to improve performance for the prescribing of anti-microbials.
- Continue to improve the uptake of cervical screening.
- Continue to improve the uptake of childhood immunisations.

**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

## 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 The Community Practice

The Community Practice is located in Canvey Island, Essex in purpose-built premises which are shared with a number of other healthcare providers, including two other GP practices, district nurses, palliative care nurses, phlebotomy, ultrasound team and others.

The provider began carrying out regulated activities on 1 October 2019, but due to administrative delays, they registered with CQC on 29 July 2021.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the Castle Point and Rochford Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of about 6,500. This is part of a contract held with NHS England.

The practice is part of a wider network of six local GP practices which is called a Primary Care Network (PCN). The offices of the PCN are located in the same building as the practice.

Information published by Public Health England shows that deprivation within the practice population group is in the fourth lowest decile (four 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 97.2% White, 0.9% Black, 0.9% Mixes 0.8% Asian 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.

The practice has one full-time GP who is supported by regular locums. There are two advanced nurse practitioners, a practice nurse, a pharmacist and a healthcare assistant. The clinical team is supported by a team of reception and administrative staff. The practice manager provides managerial oversight of the practice.

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 were telephone consultations. However, the practice remained open throughout the pandemic and offered face to face appointments when necessary.

Extended access at weekends is provided by a separate provider at two local surgeries. Patients are directed to NHS 111 for healthcare outside of practice opening hours.