

Regent Square Group Practice

Inspection report

8-9 Regent Square
Doncaster
South Yorkshire
DN1 2DS

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www.regentsquaregrouppractice.nhs.uk

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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?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an inspection of this service due to the length of time since the last inspection. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions: safe, effective and well led.

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:

- The practice had not always implemented systems and processes in areas such as recruitment and training, infection prevention and control, patient confidentiality and medicines management to keep people safe and safeguarded from abuse.

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

- Patients received effective care and treatment that met their needs.

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

- The governance arrangements did not always operate effectively and the provider did not have clear and effective processes for managing risks, issues and performance.

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

- Ensure care and treatment is provided in a safe way to patients.

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

- Review and improve staff access to practice policies and procedures.
- Review and improve staff training in preparation for major incidents.
- Continue with plans to obtain a DBS check for one member of staff.
- Continue with plans for non-clinical staff appraisals.
- Review and improve systems to monitor staff training.
- Staff are clear of their roles and responsibilities, for example non-clinical staff do not act as chaperones.

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 CQC lead inspector. The team included a GP specialist advisor and an inspection manager.

Background to Regent Square Group Practice

Regent Square Group Practice is located on 8-9 Regent Square, Doncaster, DN1 2DS.

The practice is situated in a large refurbished building. The surgery has good transport links and there is a pharmacy located nearby.

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

Regent Square Group Practice is situated within Doncaster Clinical Commissioning Group (CCG) and provides services to 10,134 patients under the terms of a general medical services (GMS) contract.

The practice has three partners (male) who registered with the CQC in 2011. The practice also employs three

salaried GPs (female) a practice manager and an assistant practice manager, three practice nurses, three health care assistants and several administration staff. The practice is part of Doncaster Federation.

The National General Practice Profile states that 89% of the practice population is from a white background with a further 6% of the population originating from Asian origin. Information published by Public Health England, rates the level of deprivation within the practice population group as four, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 82 years compared to the national average of 79 years. Female life expectancy is 81 years compared to the national average of 83 years.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met...</p> <p>Not all of the people providing care and treatment had the qualifications, competence, skills and experience to do so safely. In particular:</p> <ul style="list-style-type: none">• Not all staff had not received fire safety and safeguarding training. <p>The provider had not used risk assessments about the health, safety and welfare of people using their service to make required adjustments. These adjustments may be to premises, equipment, staff training, processes, and practices and can affect any aspect of care and treatment. In particular:</p> <ul style="list-style-type: none">• Two healthcare assistants shared a room to deliver a phlebotomy service. An appropriate risk assessment had not been carried out to ensure discussions about care treatment and support only take place where they cannot be overheard. <p>The provider had not done all that was reasonably practicable for the proper and safe management of medicines. In particular:</p> <ul style="list-style-type: none">• Not all Patient Group Directives were up to date.• Appropriate risk assessment had not been carried out to identify a list of emergency medicines that are not suitable for a practice to stock. <p>This was in breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

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.