

The Highlands Practice

Inspection report

102 Highlands Road
Fareham
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Date of inspection visit: 27 July 2022
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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?

Good



Are services responsive to people's needs?

Requires Improvement



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced inspection at The Highlands Practice on 27 July 2022. Overall, the practice is rated as Requires Improvement.

Safe - Requires Improvement

Effective - Requires Improvement

Caring - Good

Responsive - Requires Improvement

Well-led – Requires Improvement

The provider of this service has changed since our previous inspection on 7 May 2019 where we rated the service Good overall and for all key questions. This inspection in July 2022 is the first under the provider's new registration, which incorporates two branch practices, Jubilee Surgery and Whiteley Surgery since the merger in October 2021.

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

Why we carried out this inspection

This inspection was a comprehensive risk-based inspection undertaking a site visit and remote clinical searches to review:

- *Safe, Effective, Caring, Responsive, Well-led domains*
- *Risks identified in relation to patient access through complaints to CQC.*

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 facilities
- 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 all three sites

Our findings

Overall summary

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 found that:

- The practice provided care that did not always keep patients safe. In particular, high-risk medicine monitoring; unclear medicine review records and actioning safety alerts.
- Patients did not always receive effective care and treatment that met their needs. In particular, outstanding monitoring of patients with long-term conditions.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. However, patients could not always access care and treatment in a timely way.
- Governance processes were in place but oversight of risk management to patient safety and providing effective services was not always fully embedded.

We found breaches of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, supervision and appraisal necessary to enable them to carry out their duties.
- Establish effective systems and processes to enable person-centred care for people using the services.

The provider **should** also:

- Implement new ways for patients to access appointments at the practice.
- Improve the uptake of cervical cancer screening to eligible patients.
- Continue to respond to complaints in a timely way and maintain a full audit trail of correspondence relating to all complaints.

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector and a CQC team 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. A member of the CQC medicines optimisation team conducted additional clinical searches and records review as part of this inspection.

Background to The Highlands Practice

Since its merger in October 2021, the practice is now based across three sites with one main location and two branch sites located as follows:

- The Highlands Practice

102 Highlands Road

Fareham

Hampshire

PO15 6JF

- Jubilee Surgery

High Street

Titchfield

Hampshire

PO14 4EH

- Whiteley Surgery

Yew Tree Drive

Fareham

Hampshire

PO15 7LB

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

The practice offers services from the main practice and the two branch surgeries. Patients can access services at any site. The merger of the three surgiers occurred in October 2021 and is otherwise known locally as Sovereign Health Partnership.

The practice is situated within the Hampshire and Isle of Wight Integrated Care Board (ICB) and delivers General Medical Services (GMS) to a patient population of approximately 39,000. This is part of a contract held with NHS England.

The practice's clinical team who provide cover across the three sites consists of 14 partners, four salaried GPs, five advanced nurse practitioners, eight practice nurses, seven health care assistants and two clinical pharmacists. The administration team is led by a managing director and consists of a practice manager, human resources (HR) manager, two patient service managers, 44 patient service administrators and 12 business support administrators.

Information published by UK Health and Security Agency (UKHSA) shows that deprivation within the practice population group is in the second highest decile (nine of 10). The higher the decile, the less deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 95.2% White, 1.8% Asian, 1.8% Mixed, 0.4% Black and 0.8% Other.

The age distribution of the practice population closely mirrors the local and national averages.

The practice and branch sites are open between 8am to 6:30pm Monday to Friday. The practice offers a range of appointment types including 'book on the day', telephone consultations, face to face and home visiting. Extended access is provided at The Highlands Practice site, where Saturday morning appointments are available. The practice is part of a local 'hub' extended access scheme in South East Hampshire where Tuesday and Thursday evening appointments are available as well as weekends at Portchester Health Centre and Forton Medical Centre. Out of hours services are provided by another provider, which patients can access via NHS 111.

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 were not being met. The provider must send CQC a report that says what action they are 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 9 HSCA (RA) Regulations 2014 Person-centred care</p> <p>How the regulation was not being met:</p> <p>The practice did not have effective systems and processes to ensure person centred care, for example:</p> <ul style="list-style-type: none">• Not all patients with long term conditions, specifically asthma, chronic kidney disease and hypothyroidism, had received the required monitoring in line with national guidance. <p>This was in breach of Regulation 9(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>How the regulation was not being met:</p> <p>The service was not ensuring that persons employed by the provider were receiving such appropriate support, training, professional development, supervision and appraisal as necessary to enable them to carry out the duties they were employed to perform. In particular:</p> <ul style="list-style-type: none">• There were gaps in mandatory training for clinical and non-clinical staff. <p>This was in breach of Regulation 18(1) 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 were not being met.

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> <ul style="list-style-type: none">• The provider was unable to demonstrate that appropriate therapeutic monitoring of patients prescribed high-risk medicines was being carried out consistently when prescribing.• There was evidence that the process for managing safety alerts was not being followed appropriately to ensure patients were protected from harm. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>