

# Old Mill Surgery

## Inspection report

Marlborough Road  
Nuneaton  
CV11 5PQ  
Tel: 02476382554  
[www.oldmill.gpsurgery.net](http://www.oldmill.gpsurgery.net)

Date of inspection visit: 11 January 2023  
Date of publication: 21/04/2023

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 comprehensive inspection at Old Mill Surgery on 11 January 2023. Overall, the practice is rated as good.

Safe - good

Effective - good

Caring - good

Responsive - good

Well-led - good

Following our previous inspection on 21 November 2017, the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Old Mill Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We carried out this inspection to follow up concerns reported to us.

Key questions inspected are services safe, effective, caring, responsive and well-led.

## How we carried out the inspection/review

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- 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
- information from the provider, patients, the public and other organisations.

We found that:

# Overall summary

- Patients mainly received effective care and treatment that met their needs. Processes were in place to monitor patients' health in relation to the use of medicines including high risk medicines. However, patient records did not always contain sufficient documentation to reflect their review or consultation. Immediately following the inspection, we were informed the practice had revised the medicine review protocol to include guidance on documentation.
- Safety alerts were received by the practice. A review of the patient record system found some patients required a review when prescribed a combination of medicines. The practice immediately contacted these patients and invited them in for a review.
- Learning from significant events was evident. Actions were put in place to prevent recurrences.
- Staff had received training to manage patients with long term conditions. Annual reviews were in place to check their health and medicines needs were being met.
- The practice was slightly below the minimum target set by the UK Health Security Agency (UKHSA) for 3 out of 5 childhood immunisations. Specific clinics were in place twice a week to improve the uptake.
- The published cervical cancer screening data showed that the practice had not met the target of 80% set by the UK Health and Security Agency. The practice had taken actions to improve the uptake of cervical screening.
- Feedback from patients through the GP Patient Survey and the NHS Friends and Family Test was generally positive regarding the care and treatment they received.
- The practice was suitable to meet the needs of patients with all services accessible on ground level.
- Actions had been taken during the COVID-19 pandemic to keep people safe.
- The practice had taken actions to ensure patients could access care and treatment in a timely way. This included changes to the telephone system and a capacity and demand analysis. Additional staff members had been recruited to support call taking at busy times.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care. However, we found areas where clinical oversight was not carried out effectively, which impacted on areas such as medicines management

We found 1 breach of regulations. The provider **must**:

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

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

- Continue to take measures to improve the uptake of childhood immunisations and cervical screening.
- Continue to identify and support patients who were carers.
- Continue to take measures to improve patient satisfaction with access to the practice by the telephone.

**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 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 Old Mill Surgery

Old Mill Surgery is located in Nuneaton at:

Marlborough Road

Nuneaton

CV11 5PQ

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

The practice is situated within the NHS Coventry and Warwickshire Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 12,900. This is part of a contract held with NHS England.

The practice is a member of the Nuneaton and Bedworth primary care network (PCN) that enables them to work with other practices in the area to deliver care.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fifth lowest decile (5 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 88% White, 9% Asian, 1% Black and 1% Mixed.

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

The practice is led by two GP partners, 1 male and 1 female and employs 2 salaried GPs, 1 male and 1 female and 2 clinical pharmacists, 1 male and 1 female. The nursing team consists of 2 nurse practitioners, 4 practice nurses and a health care assistant all female. There is a practice manager who leads a team of reception and administration staff known as patient service advisors.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the primary care network, where late evening and Saturday appointments are available.

When the practice is closed, out of hours services can be accessed via the NHS 111 service.

## 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	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Family planning services	<b>How the regulation was not being met:</b>
Maternity and midwifery services	We looked at the clinical records of 5 patients who had received a medicine review. For 4 of these patients, we found the provider recorded medicine reviews had been conducted without documenting the outcomes from the review and without addressing required monitoring or changes to treatment that should have been identified during a comprehensive review.
Surgical procedures	We conducted a remote review of the clinical system for patients prescribed a disease-modifying anti-rheumatic drug (DMARD) and found for 3 patients out of 11 patients were having blood tests arranged via the hospital, but the provider was not routinely recording that these indicated it was safe to continue prescribing the medicines.
Treatment of disease, disorder or injury	We found 28 patients were prescribed a combination of a medicine used to treat those who have had a stroke to reduce their chances of having a further one, and a medicine used to reduce stomach acid. A safety alert issued in 2014, advised that these medicines should not be prescribed together as the medicine used to reduce the chance of having a stroke was made less effective. We reviewed 5 patients and found there was no documentation of a discussion regarding the risk of these medicines in the patients record.
	This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.