

Newtown Surgery

Inspection report

147 Lawn Avenue
Great Yarmouth
Norfolk
NR30 1QP
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<https://www.enmp.co.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

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Newtown Surgery on 4 March 2019 as part of our inspection programme. Our inspection team was led by a CQC inspector and included a GP specialist advisor and a practice manager specialist advisor.

We previously inspected the practice in October 2014 and rated the practice as good overall and outstanding for providing well-led services.

Our judgement of the quality of care at this service is based 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.

I have rated this practice as good overall and requires improvement for providing safe services.

This means that:

- People were generally protected from avoidable harm and abuse and that legal requirements were met.
- Patients had good outcomes because they received effective care and treatment that met their needs.
- The practice was fully engaged with reviewing and monitoring the clinical service they offered and used this information to make changes and improvements in care. For example, the practice regularly reviewed data from the Clinical Commissioning Group and used this to drive improvement within the practice.
- Patients were supported, treated with dignity and respect and were involved as partners in their care.
- People's needs were met by the way in which services were organised and delivered. For example, the practice had engaged with the local food bank charity and completed several health events.
- The leadership, governance and culture of the practice promoted the delivery of high quality person-centred care.
- The practice encouraged continuous improvement and innovation. For example, the practice had a diverse skill mix within the practice and encouraged staff to undertake further education such as nurses undertaking prescribing courses and phlebotomists training to become a Health Care Assistant.
- Staff reported they were proud to work within the practice.

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

We found out of date medicines in the emergency medicine kit. The practice did not stock atropine, an emergency medicine recommended for practices that fit coils. At all sites, the practice kept glucagon in the emergency kit; it was not refrigerated, and the date of when it was taken out of the fridge was not recorded, nor was the new expiry date. After the inspection, the practice sent an updated protocol for the management of the emergency kit.

We rated the practice as **outstanding** for providing effective services for older people because:

- The practice had led a pilot to identify and care for older patients at risk of rapid decline or crisis. A multidisciplinary team meeting (MDT) was held weekly to discuss patients and support required and included a lead GP, a community matron, social services care co-ordinator and a social isolation link worker. In the first four months, 37 patients were referred, 14 received support, 13 were still receiving support, nine were being assessed and one patient was declined. The pilot had been extended to another local practice.
- Each care home had a named GP who was supported by a paramedic which had enabled to the practice to respond to urgent need in a timely manner and the practice told us this had helped reduce admissions to hospital from 64 in 2017/18 to 33 in 2018/19.

We rated the practice as **outstanding** for providing responsive care for people whose circumstances make them vulnerable because:

- The practice had a Homeless Care Service, which included an outreach service at the Salvation Army, street work and multidisciplinary team working based from the local housing trust. Services included immediate access for homeless patients. The practice had 81 homeless patients on their practice list. The practice had helped to find housing for 20 patients and were working with agencies to get a further 18 re-housed. Some of these patients were in prison, however the practice kept them on their list to actively follow up once released. The practice held regular events to gain money for 'kip bags' which included items such as sleeping bags and a toothbrush and had purchased 22 of these for the Salvation Army. The practice had a system whereby if a patient presented as

Overall summary

homeless, a member of staff was allocated to fully assess their needs and signpost them to a clinician if required, offer food vouchers and assist with emergency accommodation and housing needs.

- The practice had established in-house Hepatitis C clinics and TB clinics which were also open to patients outside of the practice list. For the Hepatitis C clinic, 28 patients had attended, 18 of which had been discussed at a specialist meeting, ten had been started on treatment and six had finished treatment. The remaining patients were awaiting starting treatment or had not engaged.
- The practice held a Christmas Stocking campaign where patients and staff brought toys for children and essential items for people in need. The practice originally donated 200 stockings and due to the success, were able to fill another 250.
- The practice held a 'start my week' campaign which identified 12 people over the age of 50 who did not belong to an activity or group to make friends and become more active. The outcomes were positive for patients recently bereaved, carers and visually impaired patients joining groups. The practice facilitated this by visiting the local library with the group to identify groups in the local areas, such as walking football, crafts, singing groups and others.

We saw another area of **outstanding** practice:

- The practice had life connectors at each site who were able to refer patients to local charities, groups and

external agencies. The practice had 140 agencies they could refer to. The practice had run a pilot for this role which was successful and had been rolled out across the CCG and recognised nationally. The practice were able to give examples where this had been positive in securing housing, reducing emergency calls and reducing social isolation for patients.

We found the provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

We found the provider **should**:

- Review the system for coding carers and the support provided to them.
- Continue to embed the plan to improve outcomes relating to the Quality and Outcomes Framework, particularly for outcomes relating to diabetes, COPD and mental health.
- Embed the action plan to improve the uptake of health checks for patients with a learning disability.

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

Dr Rosie Benneyworth BS BM BMedSci MRCGP

Chief Inspector of General Practice

Population group ratings

Older people	Outstanding	
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	Outstanding	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC inspector and included a GP specialist advisor and a practice manager specialist advisor.

Background to Newtown Surgery

- The name of the registered provider is East Norfolk Medical Practice. The practice address is Newtown Surgery, 147 Lawn Avenue, Great Yarmouth, Norfolk, NR30 1QP.
- There are two branch surgeries; Caister Health Centre, West Road, Caister-on-Sea, Great Yarmouth, Norfolk, NR30 5AQ and The Lighthouse, Howard Street South, Great Yarmouth, Norfolk, NR30 2PT.
- East Norfolk Medical Practice is also the provider for Nelson Medical Practice, however we did not inspect this site as part of our inspection as this service is registered separately.
- There are approximately 25,100 patients registered at the practice.
- The practice is registered to provide the regulated activities of diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.
- The practice has a General Medical Services (GMS) contract with the local Clinical Commissioning Group (CCG).
- The practice has 14 GP partners, (four male and 10 female) who hold managerial and financial responsibility for the practice. The nursing team includes two nurse practitioners, six practice nurses, five healthcare assistants, four phlebotomists, one pharmacist, three registrars and three physician associates. There is a management team in place of seven staff who support the managing partner. There is a team of reception and administration staff. In total, East Norfolk Medical Practice employs 107 staff across four sites.
- The practice is a training practice for GP registrar. (A GP registrar is a qualified doctor who is training to become a GP). At the time of our inspection, there were three GP registrars.
- The practice website is www.enmp.co.uk
- The practice opening hours are:
 - Newtown Surgery- 8am-6.30pm Monday to Friday
 - Caister Surgery- 8.30am-6pm Monday to Friday
 - The Lighthouse- 8.30am-6.30pm Monday to Friday, 6.30pm-8pm Wednesday to Friday, 8.30am-12pm Saturday and Sunday.
- When the practice is closed, Integrated Care 24 provides the out of hours service; patients are asked to call the NHS 111 service to access this service, or to dial 999 in the event of a life-threatening emergency.
- According to data from Public Health England, the practice has a below average number of patients aged 60 to 84 compared to the CCG average, and an above average number of patients aged 20 to 49 compared to the national and CCG average. Male and female life expectancy is in line with the England average at 78

years for men and 81 years for women. Income deprivation affecting children is 26%, which is above

the England average of 20% and the CCG average of 22%. Income deprivation affecting older people is 21% which is in line with the England average of 20% and the CCG average of 18%.

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	Regulation 17 HSCA (RA) Regulations 2014 Good governance The systems and processes in place to monitor the expiry dates of the emergency medicines was ineffective as we found out of date medicines. The practice did not stock atropine and did not have a risk assessment for this.
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	