

# Bluebell Surgery

#### **Inspection report**

Bluebell Surgery **Jack Andrews Drive** Colchester CO4 9YN Tel: 01206 855222 www.bluebellsurgery.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?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Requires improvement	

## Overall summary

We carried out an announced comprehensive inspection at Bluebell Surgery on 5 March 2019 as part of our inspection programme.

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 and requires improvement for all population groups.

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

- The practice did not have clear systems and processes to keep patients safeguarded from abuse. There was no clarity regarding who at the practice was the safeguarding lead.
- Health and safety, fire safety and safeguarding systems to manage risk were not in place or up to date.
- Appropriate standards of cleanliness and hygiene were being met. A lead for infection control had not been appointed and the annual audits and monitoring stated within their policy had not been carried out.

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

• Patients received care and treatment that met their needs however, the practice had not audited the services they provided adequately, to be assured patient outcomes were improved.

We rated the practice as **good** for providing caring services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- · However, the practice had not formally identified patients that were carers to ensure they had access to the care and support they needed.

We rated the practice as **good** for providing responsive servicesbecause:

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The practice listened to their patients and organised and delivered services to meet their patients' needs.
- Patients could access care and treatment in a timely

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

- The practice lacked regular clinical oversight, to ensure care and treatment was well-led.
- The GP lead had the skills to deliver high-quality sustainable care however, did not have work time capacity for consistent oversight of all clinical and managerial work.

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

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

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

- Improve the identification of carers to enable this group of patients access to the care and support they need.
- Improve the uptake of patients for the national cancer screening programme in particular, those in relation to breast and bowel screening.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

#### Population group ratings

Older people	Requires improvement
People with long-term conditions	Requires improvement
Families, children and young people	Requires improvement
Working age people (including those recently retired and students)	Requires improvement
People whose circumstances may make them vulnerable	Requires improvement
People experiencing poor mental health (including people with dementia)	Requires improvement

#### Our inspection team

Our inspection team was led by a CQC lead inspector and included a GP specialist adviser.

### Background to Bluebell Surgery

Bluebell Surgery is situated on the outskirts of Colchester, Essex. The practice holds a General Medical Services contract with the NHS. There are approximately 3800 patients registered at the practice.

The practice is registered as an individual provider practice owned by a single GP. The GP employs a part-time regular locum female GP and a male salaried GP. They are supported by two practice nurses, a practice manager, and three administrative and reception members of staff. Staff members work a range of hours including full and part-time.

The practice is registered to provide the following regulated activities: diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures, and treatment of disease, disorder or injury.

The patient profile for the practice has an above-average working age population, between the ages of 20 and 49 years and fewer than average children, teenagers and older patients, aged over-50. The locality deprivation level was seven. Deprivation is scored from one to ten with one being the lest deprived and ten the most.

The practice had opted out of providing 'out of hour's' services to their own patients which is now provided by Care UK, an 'Out of hours' healthcare provider. Patients can also contact the NHS 111 service to obtain medical advice if necessary.

This practice has not been inspected by the Care Quality Commission since the new individual provider was registered.

## 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
Family planning services	governance
Maternity and midwifery services	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Surgical procedures	How the regulation was not being met:
Treatment of disease, disorder or injury	There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.
	In particular, we found:
	<ul> <li>The practice did not have nominated consistent leadership to keep patients safeguarded from abuse.</li> <li>Not all systems to manage health and safety, fire safety, and safeguarding risks were in place, reviewed or updated.</li> <li>An infection control lead had not been appointed and the annual audits and monitoring stated within their policy had not been carried out.</li> </ul>
	This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.