

Oakfield Surgery

Inspection report

Oakfield Road
Aylesbury
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Date of inspection visit: 24 June 2022
Date of publication: 15/07/2022

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?		Good	
Are services effective?		Requires Improvement	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Good	

Overall summary

We carried out an announced inspection at Oakfield Surgery in Aylesbury, Buckinghamshire on 24 June 2022. Overall, the practice is rated as Good.

- Safe: Good
- Effective: Requires improvement
- Caring: Good
- Responsive: Good
- Well-led: Good

The practice has not been inspected under their current registration with the Care Quality Commission (CQC). Previously, the practice was registered as Dr Sajid Zaib and managed as a “GP single hander”. This is a term used within primary care when a GP operates their own practice without any other GP partners and was inspected in November 2018. At the inspection in November 2018 the practice was rated Good overall and Good for all five key questions. The full reports for previous inspections can be found by selecting the ‘all reports’ link for Oakfield Surgery on our website at www.cqc.org.uk.

In April 2020, the practice amended their CQC registration and became a GP partnership (a GP partnership is an agreement between two or more individuals). The GP partnership became the new registered provider of services delivered from Oakfield Surgery.

Why we carried out this inspection

This inspection was the first comprehensive inspection under the new CQC registration.

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 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 site visit
- Discussions with patients, practice staff and the patient participation group

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 and
- Information from the provider, patients, the public and other organisations.

We have rated this practice as **GOOD** overall

Overall summary

We found that:

- There were systems in place to monitor high-risk medicines and monitoring of patients with long-term conditions. However, a clear audit trail of recording that blood test monitoring had been completed was not always maintained. Where issues were identified, the practice reviewed the patients and immediately implemented action plans in place to mitigate any potential risks.
- Staff encouraged and supported patients to be involved in monitoring and managing their own health.
- Although there were some strong systems to manage risks to patients, there were some risks that were not well managed; for example, patients with chronic kidney disease had not received effective or timely monitoring with appropriate follow-up in accordance with current national guidance.
- 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.
- There was a strong focus on continuous learning and improvement at all levels of the organisation. This included supporting the next generation of staff in primary care, for example GP Registrars.
- The practice demonstrated a willingness to learn and improve. This included learning from our clinical searches and findings from the inspection.

We saw areas of outstanding practice:

- Patient satisfaction was significantly higher when compared to local and national averages. Feedback received from patients was very positive and described a caring and person-centred service that had been maintained throughout the COVID-19 pandemic. Multiple examples were provided by staff and patients to demonstrate a caring approach to patients. The most recent results of the GP patient survey were significantly higher than the local CCG and national averages in respect of access to appointments. Feedback received from patients as part of the inspection process was very positive in terms of access to appointments and that access had been maintained throughout COVID-19.
- Whilst the practice continued to deliver services throughout the pandemic, the practice, was a key stakeholder in the set up and provision of the local mass vaccination centre. This was a collective effort commended by the Secretary of State and the local MP for running the largest vaccination centre for Buckinghamshire. This included tackling health inequalities within the local community including visits to mosques, community centres and homeless shelters. In recognition for the additional COVID-19 work, the lead GP was awarded a Fellowship Award, invited to a Royal garden party on behalf of NHS England and formally nominated for COVID-19 honours awards. The vaccination centre was also formally nominated for the national vaccine centre of the year award.

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

- Establish effective systems and processes to ensure person centred care.

The provider **should** also:

- Maintain a clear audit trail of checking blood test results in patients' records before issuing repeat prescriptions for high risk medicines and patients with long-term conditions.
- Continue to improve the uptake of cervical screening.

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

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead Inspector and included a GP Specialist Advisor. The Inspector undertook interviews on 20, 22, 24 and 27 June 2022 and a site visit to the practice on 24 June 2022. The GP specialist advisor spoke with staff using video conferencing facilities and completed clinical searches and records reviews on 22 June 2022 without visiting the practice.

Background to Oakfield Surgery

Oakfield Surgery is a GP practice located on Oakfield Road on the outskirts of the Aylesbury town centre. The practice provides general medical services to approximately 5,600 patients.

The practice is part of the Buckinghamshire Clinical Commissioning Group (CCG). (A CCG is responsible for planning and designing local health services in a specific geographic area. They do this by 'commissioning' or buying health and care services).

The practice is also part of a wider network of GP practices, this is known locally as the Maple Bucks Primary Care Network (PCN) and comprises of three GP practices collaboratively working together for a combined population of 43,000 patients.

Services are provided from one location:

- Oakfield Surgery, Oakfield Road, Aylesbury, Buckinghamshire HP20 1LJ

The practice website is:

- www.oakfieldsurgery.co.uk

The provider is registered with CQC to deliver the following Regulated Activities:

- Diagnostic and screening procedures
- Family planning services
- Maternity and midwifery services
- Surgical procedures
- Treatment of disease, disorder or injury

Information published by the UK Health Security Agency (UKHSA) shows the age distribution of the registered patients is largely similar to the national averages. The practice population also includes a proportion of patients from the boating and canal community based at the nearby marina. This has an impact on screening and recall programmes.

Further information published by UKHSA shows that deprivation within the practice population group is in the second highest decile (nine 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 83% White, 10% Asian, 3% Black, 3% Mixed, and 1% Other.

There are three GPs at the practice who are supported by two GP Registrars. The practice is a training practice for GP Registrars. GP Registrars are qualified doctors who undertake additional training to gain experience and higher qualifications in general practice and family medicine.

The nursing team consists of a practice nurse and a health care assistant. The practice also accesses a clinical pharmacist, two pharmacy technicians, a social prescriber, a physiotherapist and a mental health practitioner through the local PCN agreement.

A practice manager and a small team of reception and administrative staff undertake the day to day management and running of the practice.

The practice has core opening hours between 8am and 6pm, Monday to Friday. Patients can also access pre-bookable early morning appointments between 7.30am and 8am every weekday morning. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

When the practice is closed out of hours services are provided by FedBucks GP out of hours service which patients can access via the NHS111 service.

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	<p>Regulation 9 HSCA (RA) Regulations 2014 Person-centred care</p> <p>The practice did not 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 chronic kidney disease and hypothyroidism, had received the required monitoring in line with national guidance. <p>This was in breach of Regulation 9 (1, 2 & 3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	