

Spring Street Surgery

Inspection report

The Bourne Hall Health Centre
Chessington Road, Ewell
Epsom
Surrey
KT17 1TG
Tel: 02083941362
www.springstreetsurgery.co.uk

Date of inspection visit: 30 Apr 2019
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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 had previously carried out an announced comprehensive inspection at Spring Street Surgery in July 2018. The overall rating for the practice was inadequate and it was placed into special measures. The practice was rated as inadequate in safe, effective and well-led, and good in caring and responsive. The full comprehensive report on the July 2018 inspection can be found by selecting the 'all reports' link for Spring Street Surgery on our website www.cqc.org.uk

At the July 2018 inspection we found that the provider had not:

- Ensured care and treatment was provided in a safe way to patients.
- Ensured patients were protected from abuse and improper treatment.
- Established systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensured persons employed in the provision of the regulated activity received the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out the duties.
- Ensured specified information was available regarding each person employed and where appropriate, persons employed were registered with the relevant professional body.

There were also areas where the provider **should** make improvements by:

- Considering ways to identify more patients who are carers and strengthen ways in which they can be supported.
- Reviewing ways to increase uptake for cervical screening.
- Reviewing meeting structures for non-clinical staff and the frequency of attendance of clinical staff to ensure greater shared learning.
- Reviewing how information is displayed for patients who wish to make a complaint.

We carried out an announced inspection at Spring Street Surgery on 30 April 2019. This was to confirm the practice had carried out their plan to make the improvements required as identified at our previous inspection on 18 July 2018. We found that the practice had made significant improvements.

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 for providing safe care.

We have rated this practice as **requires improvement** for providing safe care because:

- Patient Safety Alerts were not always recorded as being actioned appropriately.
- Fridge Temperatures had not been recorded on several days throughout December 2018 and this had not been checked, actioned or raised as a significant event.
- Significant events were being appropriately recorded and actions taken but outcomes were not centrally recorded or dated.
- Staff recruitment files held the appropriate information with the exception of one locum GP file we reviewed.

We have rated this practice as good overall and good for all population groups.

We rated the practice **good** for providing effective, caring, responsive and well-led care because:

- The practice had reviewed all of their QOF data and could show evidence that their performance had significantly improved, including reducing the number of patients that were exception reported.
- Patient Group Directives had been reviewed and were up to date and signed by the appropriate staff members.
- Staff had received the appropriate training for both safeguarding vulnerable adults and children.
- Policies and procedures, including those for safeguarding, had been streamlined and held appropriate information which was easy for staff to find.
- Staff had received an appraisal and all mandatory training was up to date.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

Overall summary

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- There was a clear leadership structure and staff felt supported by management.
- Staff worked well together as a team and all felt supported to carry out their roles. There was a strong team ethos and culture of working together for a common aim.
- The practice had increased the number of carers on their register.
- The practice had increased the uptake of cervical screening.
- The practice had reviewed the meeting structure and staff informed us these were informative and allowed for open discussions.
- The complaints procedure was on display in the reception area and on the practice website.

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

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

This service was placed in special measures in July 2018. The practice has made significant improvements and is now rated good overall and for effective, caring, responsive and well-led and requires improvement for safe. I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by the service. The service will be kept under review and will be inspected within 12 months to ensure improvements are sustained.

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

Population group ratings

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

Our inspection team

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

Background to Spring Street Surgery

Spring Street Surgery is situated in the village of Ewell and provides a range of primary care services to approximately 6,600 patients.

Spring Street Surgery is run by three GP partners (two male and one female) and three salaried GPs. Two practice nurses, a health care assistant, a part time clinical pharmacist, a team of administrative staff and a practice manager, also support the practice.

The practice provides clinics for particular patient groups. These include flu, antenatal care, cervical screening, minor surgery, childhood and adult immunisations

Services are provided from one location:

The Bourne Hall Health Centre, Chessington Road, Ewell Epsom Surrey, KT17 1TG

<http://www.springstreetsurgery.co.uk>

Opening hours are Monday to Friday 8am until 6pm.

Extended hours are 6.30pm to 8.20pm, on alternating Monday and Thursday evenings. (These are pre-bookable appointments only with either a GP or a health care assistant).

The practice is part of a federation of GP practices that offer evening appointments until 9pm and weekend appointments 9am until 1pm. These appointments are run from various locations in Leatherhead, Epsom and on the Downs.

Patients (birth to 16 years) are also able to attend a children's clinic run by the federation Monday to Friday from 4pm to 8pm run from separate locations.

The practice is registered to provide the following regulated activities:

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

During the times when the practice was closed 6pm until 8am, the practice had arrangements for patients to access care from an Out of Hours provider.

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 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>The service provider had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <ul style="list-style-type: none">• Record and monitor the action taken from significant events to prevent further occurrences and ensure improvements are made as a result.• Review the required actions from Safety Alerts and record the action and date completed.• Review the locum recruitment information to ensure appropriate information is recorded. <p>The service provider had failed to ensure the proper and safe management of medicines. In particular:</p> <ul style="list-style-type: none">• Not ensuring fridge temperatures were checked to ensure they are within the required temperature range.