

# Church Lane Surgery

## Inspection report

Church Lane  
Braintree  
Essex  
CM7 5SN  
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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

Are services safe?	
Are services effective?	
Are services responsive?	
Are services well-led?	

# Overall summary

Church Lane Surgery was previously inspected in August 2018 and received a rating of inadequate overall. We found the practice was inadequate for providing safe, effective, caring responsive and well-led services. As a result, we issued a requirement notice for regulation 12, safe care and treatment and a warning notice for regulation 17, good governance, to ensure the practice made appropriate improvements.

We carried out an announced focused inspection at Church Lane Surgery on 19 December 2018. The focused inspection was to review whether the provider had made improvements and was compliant with the warning notice. We also looked at the governance arrangements and the leadership of the practice. The practice was not rated at this inspection.

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.

## **This was an unrated focused inspection.**

We previously found that:

- There were not clear responsibilities, roles and systems of accountability to support good governance and management.
- The practice system to ensure safeguarding was managed effectively needed to be improved for example they did not hold accurate registers of patients where concerns had been raised or hold regular safeguarding meetings with external agencies to share concerns.
- The systems for managing correspondence, referrals, pathology results and patient notes was ineffective and did not ensure these were managed in a timely manner.
- The system for monitoring uncollected prescriptions was not effective.
- Outcomes for the Quality and Outcomes Framework were significantly lower than local and national averages. Not all patients were receiving annual monitoring in a timely manner.

- There were limited structures, processes or systems at the practice that identified clinical accountability. There was a lack of clinical and non-clinical meetings to discuss issues, learning or to receive feedback from staff.
- There was a lack of system in place to demonstrate review of staff competencies.
- You were unable to demonstrate that staff receive appropriate appraisal to enable you to be assured that staff are able to carry out the duties for which they are employed.
- There was some evidence of clinical audit, however this was limited and was not used as a tool to drive improvements in the practice.

At this inspection we found that:

- The practice had established clearer responsibilities, roles and systems of accountability to support good governance and management. Staff we spoke with on the day of the inspection told us leaders were approachable and responsive to their needs.
- The practice had strengthened their system to ensure safeguarding was managed effectively. They had implemented a system to review registers of patients' where concerns had been raised to ensure they were accurate. The practice had established systems to share and monitor safeguarding concerns with external agencies.
- The systems for managing correspondence, referrals, pathology results and patient notes had improved, we found these were routinely managed in a timely manner.
- The practice had implemented a system for monitoring uncollected prescriptions to ensure they were monitored effectively. Staff we spoke with on the day understood their roles and responsibilities to monitor uncollected prescriptions.
- The practice had created systems to monitor Outcomes for the Quality and Outcomes Framework performance however the practice told us it had not been possible to effectively implement these systems due to unplanned changes in the clinical workforce. Therefore, when we viewed unverified data from the first nine months of the year, we found there had not been an improvement in their quality outcomes. The practice was aware of their performance and the new leadership team had recently implemented revised action plan to improve this.
- There were structures, processes and systems at the practice that identified clinical accountability. The

# Overall summary

practice had implemented clinical and non-clinical meetings to discuss issues, learning and to receive feedback from staff. We reviewed meeting minutes and found that they were well attended and shared amongst all practice staff.

- There was a system in place to demonstrate review of staff competencies. Staff had received appropriate appraisal to ensure they were able to carry out the duties for which they were employed.
- The practice had implemented a plan to ensure clinical audits were carried out regularly and used as a tool to drive improvements in the practice.

Overall, we found that the practice had complied with the warning notice, however, further improvements were required to improve the monitoring of patients with health conditions that were subject to the Quality and Outcomes Framework.

Whilst we found no breaches of regulations, the provider **should:**

- Improve systems and processes in place to monitor Quality and Outcomes Framework performance.

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

**Professor Steve Field** CBE FRCP FFPH FRCGP Chief  
Inspector of General Practice

## Population group ratings

**Older people**

**People with long-term conditions**

**Families, children and young people**

**Working age people (including those recently retired and students)**

**People whose circumstances may make them vulnerable**

**People experiencing poor mental health (including people with dementia)**

## Our inspection team

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

## Background to Church Lane Surgery

Church Lane Surgery is located in Braintree and is part of the Mid Essex Clinical Commissioning Group. The practice is managed by the provider organisation Virgin Care Services Limited who took over the contract in July 2016. The company currently manages 18 primary care services across the country, including GP practices, walk in centres and urgent care centres. The practice has a Alternative Provider Medical Services (APMS) contract with the NHS.

- There are approximately 12,000 patients registered at the practice.
- The practice provides services from Braintree College, Church Lane, Braintree, CM7 5SN
- The provider is registered to provide the following regulated activities; diagnostic and screening procedures, family planning, maternity and midwifery and treatment of disease, disorder or injury.
- The provider employs a number of locum GPs at the practice, an advance nurse practitioner, and a health care assistant. The clinicians are supported by an administration and secretarial team.

- The practice is open from Monday to Friday between the hours of 8am and 6.30pm.
- On evening, weekends and bank holidays out of hours care is provided by IC24, another healthcare provider. This can be accessed by patients dialling 111.
- The practice has a slightly higher elderly population than the national averages with 33% of the practice list aged over 65 years compared to the national average of 27%.
- The practice population is in the seventh decile for deprivation, which is on a scale of one to ten. The lower the decile the more deprived an area is compared to the national average.
- Ethnicity based on demographics collected in the 2011 census shows the patient population is predominantly white British with; 1.4% mixed, 1.7% Asian, 1% black.