

Park View Surgery

Inspection report

87 Beverley Road
Hessle
HU13 9AJ
Tel: 01482648552

Date of inspection visit: 13 May 2021
Date of publication: 08/07/2021

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?

Good



Are services caring?

Requires Improvement



Are services responsive to people's needs?

Requires Improvement



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced inspection at Park View Surgery on 13 May 2021. Overall, the practice is rated as Requires improvement.

The ratings for each key question are

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

Following our previous inspection on 14 and 31 January 2020 the practice was rated Requires Improvement overall and for all key questions but Good for providing effective and caring services:

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Park View Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on:

- breaches of regulations identified in previous inspection

How we carried out the inspection/review

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
- 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 short site visit

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.

Overall summary

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

We found that:

- Patients received effective care and treatment that met their needs.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.

We found breaches of regulations and the areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Ensure effective systems and processes to ensure good governance are embedded and monitored.

Also, the provider **should**:

- Review the system that identifies patients who are also carers to help ensure that all patients on the practice list who are carers are offered relevant support if appropriate.

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	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 advisor, a CQC Inspection Manager and a second CQC inspector who undertook a site visit.

Background to Park View Surgery

Park View Surgery is located in Hessle at:

87 Beverley Road

Hessle

HU13 9AJ

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the East Riding of Yorkshire Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of about 3843. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices (Harthill Primary Care Network).

Information published by Public Health England report deprivation within the practice population group as 8 on a scale of 1 to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

The proportion of the practice population in 65 to 84-year age group is similar to the local CCG and above the England average and in the 85+ year age group is similar to the local CCG and above the England average. The proportion of the practice population in the under 18 years age group is similar to the local CCG and England average.

Male life expectancy is 80.1 years compared to the local CCG average of 79.9 and England average of 79.3. Female life expectancy is 82.5 years compared to the local CCG average of 83.5 and England average of 83.2.

The practice has one male GP who works full time. There are two long term locums, both male.

There is one practice nurse and one associate practice nurse, both female and work part-time. There is a Practice Director/Lead Nurse who is training as an advanced nurse practitioner and a team of administration/reception staff.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations.

Extended access is provided locally by Push Doc, where late evening and weekend appointments are available. Out of hours services are provided by other providers in the area.

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 Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <p>The registered persons 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">• Not all staff had completed safeguarding training to the appropriate level.• Not all staff had completed appropriate infection prevention and control training.• Not all patients on high-risk medicines had received appropriate monitoring. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care</p> <p>How the regulation was not being met:</p> <p>Some systems and processes in place were ineffective in that they failed to enable the registered person to evaluate and improve their practice in respect of the processing of the information obtained throughout the governance process. In particular:</p>

This section is primarily information for the provider

Requirement notices

- Learning from complaints and significant events was not maximised
- Breaches of confidentiality had not been reported appropriately.

This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.