

Briton Street GP Surgery

Inspection report

5 Briton Street Leicester LE3 0AA Tel:

Date of inspection visit: 07 July 2021, 08 July 2021, 15 July 2021 and 19th July 2021

Date of publication: 27/08/2021

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	Good	
Are services safe?	Requires Improvement	
Are services effective?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced inspection at Briton Street GP Surgery on 15 July 2021. Overall, the practice is rated as Good.

The ratings for each key question are:

Safe - Requires Improvement

Effective - Good

Well-led - Good

Following our previous inspection on 30 September 2019, the practice was rated requires improvement overall. Safe was rated as inadequate, effective and well-led were rated as requires improvement and caring and responsive were rated as good.

The full reports for previous inspections can be found by selecting the 'all reports' link for Briton Street GP 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 the areas of improvement identified at the last inspection and the ratings awarded in the safe, effective and well-led key questions. We reviewed the breach of regulation which had been identified at the last inspection in relation to good governance and to check the provider had made the improvements we said should be made in relation to managing test results. We inspected the key questions of safe, effective and well-led at this inspection.

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
- · 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:

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Overall summary

- 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 and good for all population groups.

We rated safe as requires improvement because:

- We saw that systems had improved around the practice's process for managing medical emergencies.
- We saw evidence of systems to support monitoring for some high-risk medicines however we found that not all monitoring of medicines was up to date at the time of our inspection. During our inspection, the provider took action in response to the issues we identified.
- Remote searches of the practice clinical system also highlighted potential missed diagnoses of patients with diabetes and chronic kidney disease.
- Although medication reviews had been completed, they were not always structured formal medication reviews and we found evidence of some patients who were prescribed combinations of medicines which were not advised.

We rated effective as good because:

- The practice could demonstrate current performance for Quality outcomes framework (QOF) data was higher than local and national averages in relation to treatment for people with long term conditions.
- The practices could demonstrate that uptake for cervical screening was above the 80% target rate.
- Unverified data provided by NHS England in relation to childhood immunisations showed improvements in uptake.

We rated well-led as good because:

- A system had been implemented to manage test results.
- A new management structure had been implemented at the practice which included new systems and processes to monitor quality and performance.

We found a breach of regulation 17 in relation to good governance. The provider must:

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

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	Requires Improvement	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Requires Improvement	
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 two CQC inspectors who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Briton Street GP Surgery

Briton Street GP Surgery is located at 5 Briton Street, Leicester, Leicestershire, LE3 0AA. The practice is situated in a converted house; providing NHS services to the local community. Dr Shafiq Shafi and Partners are the providers of Briton Street GP surgery and another neighbouring practice; both of which are separate locations for the purpose of registration with the Care Quality Commission (CQC). Patients could access services and appointments at both sites.

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

Briton Street GP surgery is situated within the Leicester City Clinical Commissioning Group (CCG) and has a patient list of around 1,860 patients under the terms of a GMS contract.

The practice staffing comprises of a principal GP partner (male), two GP associates (male) and a silent GP partner who was not directly involved in the day to day running of the service. The clinical team also includes a long-term locum nurse and a healthcare assistant. The non-clinical team consists of a practice manager, a deputy manager and a team of receptionists and administration staff.

Information published by Public Health England shows that deprivation within the practice population group is in the fourth lowest decile (four 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 64% White, 24% Asian, 5% Black, 4% Mixed and 3% Other.

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. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or another neighbouring surgery.

Extended access is provided locally by another practice within the Primary Care Network (PCN), where late evening and weekend appointments are available. Out of hours services are provided by DHU where patients were asked to obtain appointments through 111.

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 Surgical procedures Treatment of disease, disorder or injury Family planning services Maternity and midwifery services	 Regulation 17 HSCA (RA) Regulations 2014 Good governance We found not all monitoring of medicines was up to date at the time of our inspection. There were some patients who were highlighted as potential missed diagnoses with diabetes and chronic kidney disease. There were not always structured formal medication reviews completed for patients and we found evidence of some patients who were prescribed combinations of medicines which were not advised in previous safety alerts. There were outstanding pathology results which required action at the time of our inspection. There was no formal process for clinical supervision within the practice.