

The Central Surgery

Inspection report

Brooksby Drive
Oadby
Leicester
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Date of inspection visit: 7 March 2022
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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?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Requires Improvement 

Overall summary

We carried out an announced inspection at The Central Surgery on 7 March 2022. Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led – Requires Improvement

We last inspected on 27 October 2016, the practice was rated Good overall and for all key questions:

The full reports for previous inspections can be found by selecting the ‘all reports’ link for The Central 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 potential risks relating to access.

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:

- what we found when we inspected
- information from our ongoing monitoring of data about services and

Overall summary

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

We have rated this practice as Good overall

We found that:

- The practice had been through a very difficult time during the last 18 months. In addition to the challenge arising from the COVID-19 pandemic, the practice partnership had reduced from four GPs to one (due to personal reasons and relocation out of the area) and had amicably separating from a merger with another practice due to differing patient needs. The remaining partner and staff team have worked hard to ensure services continued.
- Under challenging circumstances the principal GP showed strong leadership, with clear evidence of innovation. Through participation in the General Practice Improvement Leads Scheme the practice was working to deliver a more sustainable service going forward, focussing on capacity and demand, skill mix and signposting.
- We found systems in place to keep patients safe and protect them from avoidable harm, including support for some of the practices most vulnerable patients and systems to learn from incidents and complaints.
- The practice had implemented additional measures to safeguard patients and staff from the risk of COVID-19 infection and had secured funding to help refurbish the premises.
- The practice had effective systems for supporting patients to live healthier lives, this included active signposting and specialist support available.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- However, what was not always clearly demonstrated during the inspection was the evaluation of the impact of changes, clear systems for monitoring of performance and potential risks.
- Our review of clinical records found patients on medicines which needed regular review due to potential risks received follow up and monitoring. However, we did identify some areas where improvements were needed in particular the follow up of medicine safety alerts to minimise the risks to patients taking them.
- Our review of clinical records found patients with long term conditions received follow up although in some cases this was not always provided in a timely way.
- The practice was not consistently meeting national targets for all child immunisations and cervical cancer screening programmes.
- Staff received support and training for their roles. Supervision of non-medical prescribers was in place but did not extend to formal reviews of consultations and prescribing.
- The practice was involved in improvement activities.
- Information from patients gave mixed feedback about access to appointments.

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

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

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

- Follow up staff vaccinations where not in line with recommended government guidance.
- Maintain effective systems for ensuring staff training is completed in a timely manner.
- Improve uptake of cervical screening and child immunisations.

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

Overall summary

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 CQC lead inspector 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 The Central Surgery

The Central Surgery is located in Leicestershire at:

Brooksby Drive

Oadby

Leicester

LE2 5AA

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

The practice is situated within the East Leicestershire and Rutland Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of approximately 8,800 patients. This is part of a contract held with NHS England.

The practice is part of the Oadby and Wigston Primary Care Network (PCN). PCNs are groups of GP practices that work together to address local priorities in patient care.

The practice population is more affluent relative to others. Information published by Public Health England shows that that the practice is in the ninth decile out 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 62% White, 32% Asian, and 6% black and other minority ethnic.

The practice team consists of a principal GP, two salaried GPs, two locum GPs, three Advanced Nurse Practitioners (ANPs) (two of which are locum ANPs), a pharmacist, two practice nurses, one healthcare assistant (HCA) and a phlebotomist. Non-clinical staff include three managers (an Operations Manager, a Human Resource Manager and a Compliance and Governance Manager) supported by a team of administrative, reception and IT staff.

Through local working arrangements the practice had access to additional staff to support their patients including, a Mental Health facilitator, PCN pharmacist, social prescribers and first contact physiotherapists.

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 this is arranged.

When the practice is closed, patients can access the local Urgent Care Centre in the evenings and at weekends 8am to 8pm. The local Out of Hours Service can be accessed through NHS 111.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance The registered person had systems or processes in place that operating ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular: • Systems in place did not ensure older relevant Medicine and Healthcare Products Regulatory Agency (MHRA) alerts were consistently acted on. • Governance arrangements showed a lack of performance and risk monitoring in order to demonstrate improvements from actions taken. • Non-medical prescribers did not receive formal audits of their prescribing and consultations. • There was limited patient involvement and feedback in changes relating to the service. This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.