

St Thomas Road Surgery

Inspection report

St Thomas Road
Featherstone
Pontefract
WF7 5HE
Tel: 01977801363

Date of inspection visit: 06 October 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?		Requires Improvement	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Good	

Overall summary

We carried out an announced comprehensive inspection at St Thomas Road Surgery on 5 and 6 October 2022. Overall, the practice is rated as Good.

Safe - Requires Improvement

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Following our previous inspection in January 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 Doctors David Geoffrey Roberts and Deborah Ann Wakefield on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this comprehensive inspection due to the length of time since the last inspection.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting some staff interviews using video/telephone 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 to the surgery.
- Speaking with patients and reviewing their feedback.

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.

We found that:

- 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 service had systems in place to manage risk so that if safety incidents occurred, they were investigated and any learning from them was shared and used to improve the service and prevent the recurrence of similar issues.
- Safeguarding systems, processes and practices had been developed, implemented and communicated to staff.
- Staff informed us that they had access to policies, procedures and guidance relevant to their role and responsibilities, including clinical protocols and guidance.
- The provider had appropriate clinical equipment in place to enable the effective assessment of patients. The provider also had the necessary equipment and medicines available to deal with medical emergencies including emergency resuscitation equipment.
- Infection prevention and control was appropriately managed to help safeguard people from COVID-19 and healthcare associated infections.
- There were processes in place to coordinate, monitor and respond to the clinical needs of presenting patients.
- Quality and performance was routinely monitored.
- Patients spoken with had a positive view of the care and treatment they had received.
- The provider had an effective governance system in place that enabled ongoing monitoring and scrutiny of the operation and performance of the services provided.
- There were effective communication systems in place to facilitate information sharing across the organisation.
- Staff told us that the management team was approachable, and that they felt well supported.

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

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

In addition, the provider **should**:

- Make improvements to increase the uptake of cervical screening.
- Formalise clinical supervision practices for non-medical prescribers.
- Improve the quality of medicine reviews to ensure that details of discussions and decisions are recorded, and whether specific monitoring requirements have been checked.

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

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, and a second CQC inspector. The team also 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 St Thomas Road Surgery

St Thomas Road Surgery is located in Featherstone at:

St Thomas Road

Featherstone

Pontefract

West Yorkshire

WF7 5HE

This site was visited as part of our inspection.

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

The practice is situated within the Wakefield District Health & Care Partnership, of the NHS West Yorkshire Integrated Care Board. St Thomas Road Surgery delivers Personal Medical Services as part of a contract held with NHS England. The practice delivers care to a patient population of 6,360.

The practice is part of a wider network of GP practices as part of Wakefield North. This comprises a partnership of GP practices who work together to improve patient care within their locality.

Information published by Public Health England shows that deprivation within the practice population group is in the second lowest decile (two 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 98% White, 1% Asian, and 1% Black/Mixed/Other.

There are three GP partners and one salaried GP. There is one nurse practitioner partner, two practice nurses and two healthcare assistants. Other clinical resource is provided to the practice from their primary care network (PCN), this includes a clinical pharmacist, a pharmacy technician, a community paramedic, and a patient care coordinator. Supporting these clinical staff is a reception and administration team led by a practice manager and assistant practice manager. The practice is accredited to provide placements to support Foundation Year Two doctors.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including urgent, book on the day, telephone consultations, online consultations, advance appointments and home visits. Appointments can be booked in person, on the telephone, online and via NHS 111.

Other extended access is provided for patients, where late evening and weekend appointments are available at other practices in the Wakefield area. Appointments for these services are available 3:30pm to 9:30pm Monday to Friday, 9am to 4pm Saturdays, and 9am to 1pm Sundays. Out of hours services are provided by Local Care Direct Limited.

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	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">Processes were not in place to ensure that patients with long-term conditions or in receipt of high-risk medicines had been monitored or reviewed in line with requirements.Patients with long-term conditions had not been coded correctly within their records.Processes had not been put in place to ensure that patient safety alerts and updates had been effectively assessed or actioned. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>