

Braithwell Road Surgery

Inspection report

Maltby Service Centre
Braithwell Road
Maltby
Rotherham
South Yorkshire
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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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Braithwell Road surgery on 1 August 2019.

At this inspection we followed up on breaches of regulations identified at a previous inspection on 17 December 2018.

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 have rated this practice as requires improvement overall.

We rated the practice as **requires improvement** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe.

There were some areas that had been addressed since the last inspection and improvements were seen in the following areas:

- The safe management of medicines requiring refrigeration.
- The safeguarding policy and procedure was updated.
- Safeguarding training
- The children at risk register had been reviewed.
- Systems to check clinical staff registration.
- Systems for checking immunisation status for all staff including GPs.
- Systems for monitoring patients on high risk medicines.
- Systems to support the requirements of the duty of candour.
- Systems for monitoring curtains in consultation rooms are cleaned in line with current national guidance.

We rated the practice as **requires improvement** for providing well-led services because:

- Whilst the practice had a clear vision and strategy there was a lack of monitoring by the provider to ensure objectives were achieved.
- The overall governance arrangements were not always effective.
- The practice did not have effective processes for managing risks.

There were some areas that had been addressed since the last inspection and improvements were seen in the following areas:

- Management of health and safety, staff training, recruitment and storage of medicines.
- Systems and processes for learning and continuous improvement.

We rated the practice as **good** for providing effective and caring and responsive services because:

- Improvements were seen in the monitoring of the outcomes of care and treatment.
- Improvements were seen in the provision and monitoring of training and the practice was able to show that staff had the skills, knowledge and experience to carry out their roles.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- There were high levels of patient satisfaction with the service.

These areas affected all population groups, so we rated all population groups as good, with the exception of people whose circumstances make them vulnerable, which was rated as requires improvement for provision of effective services and overall.

The areas where the provider **must** make improvements are:

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

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements are:

- Implement plans for reception staff training for their role in the management of patients with severe infections such as sepsis.
- Review and improve systems for GP involvement in monitoring prescribing in the practice.
- Review and improve provision of annual reviews for patients with a learning disability..

Overall summary

- Review and develop a practice specific duty of candour policy.
- Review and improve the whistle blowing procedure incorporating the NHS Improvement Raising Concerns (Whistleblowing) Policy and identify a Freedom to Speak Up Guardian in relation to this policy.
- Review and improve patient engagement.
- Review and improve provider involvement in the monitoring and oversight of the practice.

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	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Requires improvement	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC lead inspector.
The team included a GP specialist adviser.

Background to Braithwell Road Surgery

The provider, Dr Chandra Raolu, registered with the CQC in June 2017. He had been one of the partners in the previous provider partnership for the service.

The location, Braithwell Road Surgery, is situated within a purpose-built surgery in a building known as Maltby Services Centre in Maltby, Rotherham. This centre was built in 2008 and provides accommodation for Local Authority offices, leisure facilities and NHS services. The surgery operates over two floors, but all the patient facilities are on the ground floor.

There is a principle male GP and the practice employs a regular male locum GP who was previously the salaried GP. The nursing team comprises of one nurse practitioner, a practice nurse and a health care assistant. There is a practice manager and administration and reception teams.

The practice reception hours are 8am to 6.30pm, Monday to Friday. Surgery times are 8am to 6.30pm Monday to Friday.

Longer appointments are available for those who need them and home visits and telephone consultations are available as required.

Extended hours services are accessed via the practice for pre-bookable evening appointments 6.30pm to 8.30pm and Saturday and Sunday morning appointments provided at local hub surgeries or via NHS 111.

The practice provides General Medical Services (GMS) for 3,356 patients in the NHS Rotherham Clinical Commissioning Group (CCG) area.

The practice has a higher than average number of patients over the age of 65. The National General Practice Profile states that 98.2% of the practice population is from a White background with a further 1.8% of the population originating from Asian, black, mixed or other non-white ethnic groups. Information published by Public Health England, rates the level of deprivation within the practice population group as three, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 77 years compared to the national average of 78 years. Female life expectancy is 81 years the same as the national average.

The practice provides the following regulated activities:

- Diagnostic and screening procedures
- Treatment of disease, disorder or injury
- Family planning
- Maternity and midwifery services

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 the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services 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> <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">• The provider had failed to ensure they were receiving safety alerts and were acting on these as required to minimise risk. <p>This was in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>