

Laburnum Surgery

Inspection report

Laburnum Medical Group
14 Laburnum Terrace
Ashington
NE63 0XX
Tel: 01670813376

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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		Inadequate	
Are services safe?		Inadequate	
Are services effective?		Inadequate	
Are services caring?		Requires Improvement	
Are services responsive to people's needs?		Good	
Are services well-led?		Inadequate	

Overall summary

This practice is rated as inadequate overall. (Previous rating May 2019 – requires improvement, but inadequate for the effective key question.)

The key questions are rated as:

Are services safe? – Inadequate

Are services effective? – Inadequate

Are services caring? – Requires improvement

Are services responsive? – Good

Are services well-led? - Inadequate

The service was inspected on 16 July 2015. Following this inspection, a report was issued identifying a failure to comply with Regulation 19 (fit and proper persons employed). The provider took action to address the breach of regulation.

The service was inspected on 05 and 08 June 2018. Following this inspection, a report was issued identifying a failure to comply with Regulations: 17 (good governance); 18 (staffing); 19, (fit and proper persons employed).

The service was inspected on 18 and 22 February 2019. Following this inspection, a report was issued identifying a continuing failure to comply fully with Regulation 17 (good governance). The provider had taken action to address the breaches of regulations 18 and 19, and most aspects regulation 17. However, we identified additional concerns at this inspection.

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 and other organisations.

We have rated this practice as inadequate overall.

We have rated the practice as inadequate for providing safe services, because the practice did not have effective and reliable systems and processes for:

- Assessing, monitoring, managing and recording risks to patient safety.
- Keeping their safeguarding procedure up-to-date.
- Keeping patients safeguarded from abuse.
- Ensuring the appropriate and safe management of medicines.
- Responding to safety alerts.
- Making sure their records, systems and processes supported the practice to learn, when things went wrong.
- Making sure individual care records were maintained in line with current guidance.
- Sharing information with other agencies, to enable them to deliver safe care and treatment.

We have rated the practice as inadequate for providing effective services because:

Overall summary

- The practice was able to demonstrate they had a more structured approach to quality improvement activities, and clinical and prescribing audits had been carried out, to review the effectiveness and appropriateness of the care provided. However, we were not assured the provider's arrangements were effective or reliable, because they had failed to identify and address the concerns we found during this inspection.
- The practice had improved outcomes for patients with mental health needs. However, some patients had not received effective care and treatment that met their needs. There had been an increase in the number of patients with diabetes who were exception-reported. While the practice had complied with the Quality Outcome Framework exception rules that at least three reminders should be sent to patients, the practice had not always followed up those patients who failed to respond to these recall letters. Some patients' immediate and ongoing needs had not been fully assessed, or appropriately reviewed and, for some patients, action had not been taken to ensure their needs were being met.
- The practice's childhood immunisation uptake rates were below the World Health Organisation (WHO) national target of 95% (the recommended standard for achieving herd immunity) and below the minimum target of 90%.
- The practice's cervical screening rate, at 68.1%, was below the Public Health England programme target of 80%.

Although staff actively tried to support patients to live healthier lives, it was not always clear how they did this, from the sample of patients' medical records we looked at.

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

- Data from the most recent National GP Patient Survey of the practice, indicated that patient satisfaction levels, in relation to how staff treated them, were lower than both the local clinical commission group and national averages. Also, the arrangements for identifying carers were not effective as the number of patients on the practice's carers' register was low.

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

- The practice organised and delivered services to meet their patients' needs.
- Patients could access care and treatment in a timely way.

We have rated the practice as inadequate for providing well led services because:

- The delivery of high-quality care was not assured by the practice's leadership and governance arrangements, and we found evidence of new, as well as continuing, breaches of the regulations.
- The concerns we found during this inspection had not been identified in the practice's new quality framework, under-mining its credibility as an effective means of driving forward improvements at the practice.
- There were weaknesses in the practice's governance arrangements, which had led to failures to proactively identify and address issues of concern as they arose.
- Risks and issues were not always identified promptly and dealt with appropriately. There were gaps in the practice's audit arrangements, resulting in a lack of oversight about the effectiveness and safety of some of the practice's systems and processes, and quality of care and treatment.
- The practice's governance arrangements were not always effective in maintaining and improving the quality of patient care.
- The practice's systems for identifying, capturing and managing risk and issues, were not always effective.
- There was some evidence of systems and processes for learning and continuous improvement. However, improvements were not always identified. Action to introduce improvements were reactive, rather than proactive.

In addition to the above, we found that:

Overall summary

- Effective processes were in place to keep the premises safe and free from the risk of infection.
- Staff reported leaders were approachable and that the team worked very well together.
- Services were tailored to meet the needs of individual patients. They were delivered in a flexible way that ensured choice and continuity of care.
- The practice could demonstrate an overall improved Quality and Outcomes Framework (QOF) performance for 2018/19. In addition, the provider had also improved their performance for some of the cancer indicators.
- Overall, the practice could demonstrate that staff had the skills, knowledge and experience to carry out their roles.
- Patients could access care and treatment in a timely way.

This service was placed in special measures in September 2018 and May 2019. In this third inspection, in October 2019 we found that insufficient improvements have been made such that there remains an overall rating of inadequate. As we found insufficient improvements had been made, we took action in line with our enforcement procedures and cancelled the provider's registration.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Inadequate 
People with long-term conditions	Inadequate 
Families, children and young people	Inadequate 
Working age people (including those recently retired and students)	Inadequate 
People whose circumstances may make them vulnerable	Inadequate 
People experiencing poor mental health (including people with dementia)	Inadequate 

Our inspection team

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

Background to Laburnum Surgery

Laburnum Surgery provides care and treatment to approximately 2,445 patients of all ages, based on a Primary Medical Services (PMS) contract. The practice is part of NHS Northumberland clinical commissioning group (CCG) and covers Ashington and the surrounding areas. The practice has one location which we visited as part of the inspection:

- Laburnum Surgery, 14 Laburnum Terrace, Ashington, Northumberland, NE63 0XX.

Information taken from Public Health England placed the area in which the practice is located in the second most deprived decile. This shows the practice serves an area where deprivation is higher than the England average. In general, people living in more deprived areas tend to have a greater need for health services. The practice has fewer patients under 18 years of age, and more patients over 65 years of age, than the England averages. The percentage of people with a long-standing health condition is above the England average, and the percentage of patients with caring responsibilities is below the England average. National data shows that 1.6% of the population are from an Asian background.

The practice is located on a main street, in a row of shops, and has been established for over 85 years. The premises have been adapted over the years and, provide patients who have mobility needs with access to ground floor treatment and consultation rooms. The practice team consists of: two GP partners who work part-time (one female and one male); a practice nurse (vacant), a practice manager; and a small team of administrative and reception staff. A locum nurse practitioner (female) was also in post at the time of our visit.

When the practice is closed, a message on the telephone answering system redirects patients to out of hours or emergency services, as appropriate. The service for patients requiring urgent medical attention out of hours is provided by the NHS 111 service and Vocare Limited, known locally as Northern Doctors Urgent Care Limited.

Enforcement actions

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	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider did not have effective arrangements in place to assess, monitor and improve the quality and safety of the services provided.</p> <p>The provider did not have effective arrangements in place to assess, monitor and mitigate risks relating to the health, safety and welfare of service users.</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	

Regulated activity	Regulation
Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider did not have effective arrangements in place for providing patients with safe care and treatment.</p>
Diagnostic and screening procedures	
Family planning services	
Maternity and midwifery services	
Surgical procedures	

Regulated activity	Regulation
Diagnostic and screening procedures	<p>Regulation 13 HSCA (RA) Regulations 2014 Safeguarding service users from abuse and improper treatment</p> <p>The provider did not have effective arrangements in place to safeguard patients from the risk of abuse.</p> <p>The provider did not have effective systems and processes that were operated effectively to prevent abuse.</p> <p>The provider did not use their systems and processes to help make sure the relevant authorities were made aware of a potential safeguarding concern.</p>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	