

# Roseheath Surgery Ltd

## Inspection report

Roseheath Drive  
Halewood  
Liverpool  
L26 9UH  
Tel: 01512443255

Date of inspection visit: Not applicable  
Date of publication: 05/07/2021

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 well-led?

Good



# Overall summary

We carried out an announced focused review of Roseheath Surgery Ltd on 14 June 2021. Overall, the practice is rated as Good.

Following our previous inspection on 6 November 2019, the practice was rated Good overall and Requires Improvement for providing Well-led services. We also rated the population group working age people (including those recently retired and students) as Requires Improvement.

The full reports for previous inspections can be found by selecting the 'all reports' link for Roseheath Surgery Ltd on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this review

We carried out this review to assess if the provider had addressed the Requirement Notice issued at the last inspection which indicated that systems and processes needed to be in place to ensure Patient Group Directives (PGDs) were appropriately authorised.

At the last inspection we rated the population group working age people (including those recently retired and students) within the Effective key question as Requires Improvement and advised the provider that they Should continue to work towards improving cervical cancer screening uptake as the screening data was not meeting the national coverage target. At this review we assessed the action the provider was taking to address this.

At the last inspection we advised the provider that they Should identify a Freedom to Speak Up Guardian and ensure that staff are familiar with who this is and their contact details. At this review we assessed the action the provider was taking to address this.

This review focussed only on evidence relating to the previous breach to regulations and other recommendations made following our last inspection. Therefore it only updated the ratings for the well led key question and working age population group. All other key question and population group ratings remain the same as following the previous inspection.

## How we carried out the review

This focused review was a follow-up review of information without undertaking a site visit. 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 reviews differently. This review was carried out in a way which enabled us not to spend time on site.

This included:

- Speaking with the practice using video conferencing
- Requesting evidence from the provider
- Reviewing action plans sent to us by the provider

## Our findings

We based our judgement of the quality of care at this service on a combination of:

# Overall summary

- what we found when we reviewed the service
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

**The practice continues to be rated as Good overall. The practice is now rated as Good for providing Well-led services and Good for the population group working age people (including those recently retired and students).**

We found that:

- The provider had taken action to ensure that the issues identified at the last inspection had been addressed.
- Improvements had been made to the system for ensuring that Patient Group Directives (PGDs) were appropriately authorised.
- There had been an improvement to the uptake of cervical screening, however uptake had been affected by the Covid 19 Pandemic. The provider had a clear action plan for continuing to improve attainment in this area.
- The provider had identified Freedom to Speak Up Guardians and staff had received training to ensure they were aware of how to report any concerns about the operation of the service.

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

- Continue to work towards improving cervical cancer screening uptake.

**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

<b>Older people</b>	<b>Not inspected</b>	
<b>People with long-term conditions</b>	<b>Not inspected</b>	
<b>Families, children and young people</b>	<b>Not inspected</b>	
<b>Working age people (including those recently retired and students)</b>	<b>Good</b>	
<b>People whose circumstances may make them vulnerable</b>	<b>Not inspected</b>	
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Not inspected</b>	

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and reviewed evidence submitted by the provider.

## Background to Roseheath Surgery Ltd

Roseheath Surgery Ltd is located in Halewood, Liverpool at:

Roseheath Drive

Halewood

Liverpool

Merseyside

L26 9UH

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

Roseheath Surgery Ltd is an independent practice which works collaboratively with other practices within the Maassarani Group of General Practices. Roseheath Surgery Ltd is situated within the NHS Knowsley Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 2583. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices that covers the Halewood and Huyton areas.

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. The National General Practice Profile states that 95% of the practice population is from a white background. The majority of patients are within the 15 – 44 years age group.

At the practice there are three part-time GPs, a part-time advanced nurse practitioner, a full-time practice nurse, a part-time assistant nurse practitioner, a part-time health care assistant and a part-time pharmacist. The practice is supported by reception and administrative staff and a practice manager. The service is also supported by operations, communications and quality assurance managers from the Maassarani Group of General Practices.

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 an appointment at the practice.

Extended access is provided at the practice on a Wednesday evening between 6.30pm and 8pm. Extended access and out of hours services are provided by contacting 111.