

# Poplar House Surgery

## Inspection report

Durham Avenue  
Lytham St. Annes  
FY8 2EP  
Tel: 01253722121

Date of inspection visit: 20 April 2022  
Date of publication: 12/05/2022

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?

Good 

# Overall summary

We carried out an announced inspection at Poplar House Surgery on 20th April 2022. Overall the practice is rated as Good.

The key question ratings are as follows:

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

This is the first time this practice has been inspected under its current CQC registration.

## Why we carried out this inspection

This inspection was a comprehensive inspection to check the provider was complying with the regulations under the Health and Social Care Act 2008. We inspected all five key questions to determine if the service is safe, effective, caring, responsive and well led.

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Lancashire and South Cumbria. To understand the experience of GP Providers and people who use GP services, we asked a range of questions in relation to urgent and emergency care. The responses we received have been used to inform and support system wide feedback.

## 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 remotely using video conferencing
- Speaking with the PPG chair remotely via the telephone
- 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 shorter site visit
- Further communications for clarification

## Our findings

# Overall summary

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 Good overall**

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm, however some staff had not completed the appropriate safeguarding training for their role.
- 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.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of personalised care and support.
- The practice had identified areas for improvement and produced business development and recovery plans to ensure continuous improvement.

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

- Review the coding of patients with chronic kidney disease and ensure the management of patients on high-risk drugs is being completed in accordance with recommended best practice guidelines.
- Continue to support staff to complete outstanding training as identified on practice training records.
- Formalise systems to monitor the prescribing competence of non-medical prescribers.
- A log of significant events and safety alerts should be established to help track progress and actions taken. Ensure all necessary actions are completed on receipt of medicines safety alerts.
- The practice should continue to develop their audit regime.
- The practice should review and put measures in place to improve their breast cancer screening uptake levels.

**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

## 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 the lead GP using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Poplar House Surgery

Poplar House Surgery is located in Lytham St Annes at:

St Annes Health Centre

Durham Avenue

Lytham St Annes

FY8 2EP

The practice is situated in a modern purpose-built health centre. The building is accessible for people who use wheelchairs and services for patients are located on the ground floor. There is one reception point, a health promotion area, patient information boards, a large seating area, toilet facilities (which provide access for disabled people), a hearing loop system, digital display screens (providing public health information) and electronic check in screens located in the reception area. There is also an on-site pharmacy located next to the patient seating area.

There is one wing within the building which is dedicated to Poplar House Surgery. This wing has 11 consulting rooms located on the ground floor which are used by four GPs, two health care assistants and two practice nurses. One of the rooms is also used for minor surgery and the other two are not currently in use. There are seven rooms upstairs. Two rooms are used by the practice management team, three rooms are assigned to the administration team, one is used to store records and one room is used by the secretaries. There are also two store rooms and one disabled access toilet.

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

The practice is situated within the Blackpool Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 6,882. This is part of a contract held with NHS England.

The practice is part of a wider network of six GP practices called a primary care network (PCN) in the Lytham St Annes area. The nearest practice to Poplar House Surgery is Parcliffe Medical Centre which is co-located in the same health centre.

Information published by Public Health England shows that deprivation within the practice population group is in the fifth lowest decile (5 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 1.2% Asian, 97.4% White, 1% Mixed, and 0.4% Other.

The age distribution of the practice population did not mirror the local and national averages. There are more older patients over 85 (3.7% compared with 2.1% nationally and 3.4% locally) registered at the practice and less younger people under 18 (14.9% compared with 20.2% nationally and 17.2% locally).

There is a team of four GPs who provide cover at the practice. This number includes two GP partners (one male and one female) and two regular locum GPs (both male). The practice also employs two practice nurses and two health care assistants. The GPs are supported by a practice management team and reception/administration staff. This includes a practice manager, an assistant practice manager, a pharmacy technician, five receptionists, two medical secretaries, a notes summariser and four administration staff. The practice team also benefit from other roles that are funded by the primary care network. For example, a first contact physiotherapist, a psychological wellbeing practitioner, two social prescribers and two clinical pharmacists (one of whom acts as a lead).

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 a choice of appointment time.

The practice is open from 8am to 6.30pm Monday to Friday. Extended access appointments are provided outside of normal GP practice hours by the Fylde Coast Integrated Urgent Care Service, where late evening and weekend appointments are available. The service offers pre-bookable and same-day routine primary care appointments with a range of clinicians including GPs, nurses and health care assistants.

The out of hours service is provided by Fylde Coast Medical Service.