

# Gordon Street Surgery

## Inspection report

The Surgery  
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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?

Requires improvement



Are services well-led?

Good



# Overall summary

We previously inspected Gordon Street Surgery on 4 December 2017 and rated it as inadequate. The practice was placed into special measures. We carried out a follow up inspection on 24 July 2018 as part of our inspection programme for services rated as inadequate and placed into special measures to confirm that the practice met the legal requirements in relation to the breaches in regulations that we had identified. During the July 2018 inspection we found the practice had met the legal requirements and was rated as requires improvement in providing a responsive and well led service and therefore rated as requires improvement overall. The full comprehensive report on the 4 December 2017 and 24 July 2018 inspections can be found by selecting the 'all reports' link for Gordon Street Surgery on our website at

We completed an announced comprehensive inspection at Gordon Street Surgery on 5 August 2019 as part of our inspection programme for services rated as requires improvement to ensure that the issues identified had been addressed in particular:

- Develop the staff training matrix to include all in-house training, document the clinical staff competency checks undertaken.
- Maintain blood thinning medicine monitoring and prescribing in line with the practice protocol.
- Develop a system to help identify vulnerable adults and Improve clinical practice in coding patients' medical conditions on the electronic system.
- Patient paper record security system improvements.
- Further develop the significant event system and continue to improve the practice carer register numbers.
- Improve the uptake on the monitoring of long-term condition patients with diabetes and the uptake of cervical and bowel cancer screening.

At this inspection, we found that the provider had satisfactorily addressed or had made progress in most of the issues identified in the July 2018 inspection.

**We have rated this practice as requires improvement overall.**

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

- There were gaps found in the recruitment records for locum staff and in records of staff vaccination and immunity histories.

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

- The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines.
- The practice understood the needs of its population and tailored services in response to those needs. There was evidence of a number of projects and services the practice had been involved with to ensure patients' needs were met.
- However, the practice needed to continue to improve the uptake of the service offered to patients for the monitoring and management of long-term conditions improvements in cervical cancer screening uptake, diabetes and asthma reviews.

**We rated the practice as good for providing a caring service because:**

- Changes had been implemented based on patient feedback for example, the reception front desk was now managed by one reception staff member without telephone responsibilities to improve the patient face to face experience at the practice.
- In February 2019 a patient satisfaction report for extended hours provision at Gordon Street Surgery showed that patients who responded to the questionnaire were either satisfied or very satisfied with their appointment and the care and support received from the doctor.
- Only 0.6% of registered patients were electronically coded as being a carer although this had improved since the last inspection in July 2018 from 36 to 61 patients on their carer register.

**We rated the practice as requires improvement providing a responsive service because:**

# Overall summary

- Although the practice had acted on the National GP survey findings and implemented a number of changes, the impact of these changes had yet to achieve positive patient feedback.
- The practice had made improvements to its complaint policy and procedures were in line with recognised guidance, trend analysis and learning was derived from these incidents.

## **We rated the practice as good for providing a well led service because:**

- The practice had clear systems to manage risk so that safety incidents were less likely to happen. When incidents did happen, the practice learned from them and improved their processes.

## **The areas where the provider must make improvements as they are in breach of regulations are:**

- Ensure specified information is available regarding each person employed.

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

- Continue to improve the identification of carers.
- Review the practice infection prevention and control policy with reference to communicable diseases.
- Develop, seek and gather patient views to a larger scale to gain feedback on the responsiveness of the service provided to patients.
- Implement strategies to improve the uptake for cervical and cancer screening programmes and for the monitoring and management of long-term conditions.

## **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>Requires improvement</b> 
<b>People with long-term conditions</b>	<b>Requires improvement</b> 
<b>Families, children and young people</b>	<b>Requires improvement</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Requires improvement</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Requires improvement</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Requires improvement</b> 

## Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser, practice nurse specialist adviser and a practice manager specialist adviser.

## Background to Gordon Street Surgery

Gordon Street Surgery is registered with the Care Quality Commission (CQC) as a partnership provider and holds a General Medical Services (GMS) contract with NHS England and provides a number of enhanced services to include childhood vaccination and immunisation schemes and joint injections. A GMS contract is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract. The practice is part of the NHS East Staffordshire Clinical Commissioning Group (CCG).

The practice is located in a purpose-built level access building. The practice has a population of around 10,400 patients and is within the third most deprived decile when compared with both local and national statistics. The practice has slightly more patients aged between 20 and 39 than the England average. This could increase the demand for more flexible appointment times. The practice had a comparable percentage of patients with a long-term condition (LTC) with the local and England average. The percentage of unemployed patients that used the practice was slightly higher than that of CCG and England averages. These factors could increase demand for health services and impact on the practice.

- The practice staffing comprises:

- Three GP partners
- One advanced nurse practitioner (ANP).
- Two practice nurses and three health care assistants.
- One practice manager, one assistant to the practice manager.
- Two reception team leaders
- Reception staff team
- A medical secretary
- A live-in caretaker.
- A cleaner.

The practice opening hours are 8am until 6pm Monday to Friday. From the hours of 8am and 8.30am, a telephone message advises patients to call the surgery's mobile number in the event of an emergency. The practice provides a walk-in service for one hour in the afternoon. The practice has opted out of providing an out of hours care provision. Out of hours care is provided by Staffordshire Doctors Urgent Care Limited. Between the hours of 6pm and 8am, patients are advised to call NHS 111.

Following a national government initiative from 1st September 2018 extra appointments are offered across the whole of East Staffordshire, including evening and weekend appointments. The requirement is for practices to provide an additional 30 minutes for every 1,000

patients per week. Each appointment will be between 10 and 15 minutes, which means there are four to six appointments available per hour. Additionally, a new online digital service is available on Sunday mornings where appointments are offered with a GP via the Q

Doctor App. All practices across East Staffordshire are participating in this extended access. Further information can be found at; [www.eaststaffscg.nhs.uk/your-health/extended-primary-care-services](http://www.eaststaffscg.nhs.uk/your-health/extended-primary-care-services).

Further information about the practice can be found at: [www.gordonstreetsurgery.co.uk](http://www.gordonstreetsurgery.co.uk)

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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p><b>How the regulation was not being met.</b></p> <p>The registered person had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed in particular:</p> <ul style="list-style-type: none"><li>• We saw gaps in the recruitment records for locum GP staff and in records of staff vaccination and immunity histories.</li></ul>