

# Newnham Walk Surgery

## Inspection report

Wordsworth Grove  
Cambridge  
Cambridgeshire  
CB3 9HS

Tel: 01223 366811

[www.newnhamwalksurgery.nhs.uk](http://www.newnhamwalksurgery.nhs.uk)

Date of inspection visit: 31 Jan 2019

Date of publication: 06/03/2019

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?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

**This practice is rated as Good overall.** At the previous inspection in October 2015 the practice were rated as good overall.

The key questions at this inspection are rated as:

Are services safe? – Requires Improvement

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out an announced comprehensive inspection at Newnham Walk Surgery on 31 January 2019 as part of our inspection programme.

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 concluded that:

- Patients were able to access care and treatment in a timely way and the practice achieved higher performance than both the CCG and England average for access through the GP National Patient Survey.
- Quality Outcomes Framework data was generally in line with, or above, local and national averages. Exception reporting data was generally lower than both the CCG and England averages.
- Data from Public Health England showed the practice performance for cancer screening was mixed; for breast and bowel screening the practice was in line with CCG and national average but for cervical screening uptake was lower than the CCG and England averages.
- Staff we spoke with were positive about working at the practice and the leadership and management team.
- The practice had a number of links and regular contact with a variety of support groups and services such as eating disorder clinics, university medical services and Improving Access to Psychological Therapies.
- The practice employed a GP Psychotherapist who held two morning clinics at the practice each week.

- The practice assessed and responded to the needs of their population groups.
- Patients we spoke with were positive about the practice, the services offered and the care and treatment delivered at the practice.
- The practice's performance in the GP National Patient Survey was higher than CCG and England averages.

However, we also found that:

- Some legal requirements were not met.
- The practice's process for managing patient safety alerts was not always effective.
- The practice did not have complete oversight of all high-risk medicine monitoring prior to prescribing.
- The practice's prescribing of co-amoxiclav, cephalosporins and quinolones was higher than the CCG and England averages.
- The practice had only identified approximately 0.2% of their practice patient list as carers, following out inspection; following our inspection, the practice reviewed their carers register and found they could identify approximately 0.7% of their patients as carers.
- The practice did not have an active patient participation group, there was a group of patients who were in contact by email, but this was not regular.

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

- The practice's process for managing patient safety alerts was not always effective.
- The practice did not have complete oversight of all high-risk medicine monitoring prior to prescribing.

The practice was rated as **good** for providing effective services overall and to all population groups apart from working aged people which was rated as requires improvement for providing effective services.

The practice was rated as **requires improvement** for providing effective services to working aged people because:

- The practice's uptake of cervical screening was lower than both the CCG and England averages and significantly lower than the 80% national target rate set by Public Health England. Following our inspection, the practice took some action to try and improve uptake.

We rated the practice as **good** for providing caring, responsive and well-led services.

# Overall summary

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

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

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

- Continue to identify ways to encourage and improve the number of eligible patients attending for cervical screening.
- Review the carers register to ensure it is accurate and appropriate for the practice population.

- Continue to develop and encourage patient participation at the practice.
- Continue to monitor the prescribing levels of co-amoxiclav, cephalosporins and quinolones.
- Complete actions identified in the recent infection prevention and control audit.

**Details of our findings and the evidence supporting our ratings are set out in the evidence**

**tables.** **Professor Steve Field** CBE FRCP FFPH FRCGP Chief Inspector of General Practice

## 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)	Requires improvement	
People whose circumstances may make them vulnerable	Good	
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 and practice manager specialist adviser.

## Background to Newnham Walk Surgery

Newnham Walk Surgery provides General Medical Services to approximately 15,727 patients and is situated in central Cambridge, Cambridgeshire.

The practice has a team of eight GPs meeting patients' needs. Four GPs are partners meaning they hold managerial and financial responsibility for the practice. In addition, there is one nurse practitioner, three practice nurses, one health care assistant. The practice manager is supported by a team of reception and administration staff. Newnham Walk surgery is a training practice and a GP registrar provided clinics throughout the year. Medical students also attended the practice for training.

Appointments are available from 7am to 6pm Tuesdays, Wednesdays and Thursdays, and from 8am to 6pm on Mondays and Fridays. The practice offers a branch surgery at a location in central Cambridge. This provides alternate access to medical services for patients who

worked in central Cambridge, students or those patients who were shopping in the city and operated on a daily basis from Monday to Friday from 9am to 4pm with a GP and a nurse offering appointments. We did not visit this location as part of our inspection.

Outside of practice opening hours a service is provided by another health care provider, Herts Urgent Care, by patients dialling the national 111 service. Details of how to access emergency and non-emergency treatment and advice is available within the practice and on its website.

The practice demographic differs from the CCG and England average due to a much higher proportion of working aged people. The practice is in close vicinity to Cambridge University and supports a large number of their students. The practice has a much lower proportion of patients aged 65 and above.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <ul style="list-style-type: none"><li>• The practice's process for managing patient safety alerts was not always effective.</li><li>• The practice did not have complete oversight of all high-risk medicine monitoring prior to prescribing.</li></ul> <p>This was in breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>