

Abbey Road Surgery

Inspection report

63 Abbey Road
Waltham Cross
EN8 7LJ
Tel: 01992654004
www.abbeyroadsurgery.org.uk

Date of inspection visit: 12 January 2024
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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

Good



Are services responsive to people's needs?

Requires Improvement



Overall summary

We carried out a targeted assessment of Abbey Road Surgery on 12 January 2024 without a site visit. Overall, the practice is rated as good. We rated the key question of responsive as requires improvement.

Safe –good – carried forward from previous inspection

Effective – good – carried forward from previous inspection

Caring – good – carried forward from previous inspection

Responsive – requires improvement

Well led – good – carried forward from previous inspection

Following our previous inspection in February 2019, the practice was rated good for safe, effective, caring, responsive and well led. At this inspection, we rated the practice requires improvement for providing responsive services.

The full reports for previous inspections can be found by selecting the 'all reports' link for Abbey Road Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this assessment as part of our work to understand how practices are working to try to meet demand for access and to better understand the experiences of people who use services and providers.

How we carried out the review

This assessment was carried out remotely. It did not include a site visit.

The process included:

- Conducting an interview with the provider and members of staff using video conferencing.
- Reviewing patient feedback from a range of sources
- Requesting evidence from the provider.
- Reviewing data we hold about the service
- Seeking information/feedback from relevant stakeholders

Our findings

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 found that:

Overall summary

- Patient satisfaction relating to telephone access had remained below local and national averages in the national GP patient survey since 2018.
- The provider had completed in house patient reviews on access with slightly higher positive results seen.
- Services did not always meet the needs of individual people and were not always delivered in a way to ensure continuity of care.
- Patients could not always access care and treatment in a timely way and appointments were not always easily accessible in a way that suited a patient's individual need.
- Complaints were not always used to improve the quality of care.

We found one breach of regulations. The provider must:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and reviewed documents provided by the provider off site.

Background to Abbey Road Surgery

Abbey Road Surgery is located in Broxbourne Hertfordshire at:

63 Abbey Road

Waltham Cross

Broxbourne

EN8 7 LJ

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

The practice is situated within the Hertfordshire and West Essex Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 9615. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices in Broxbourne Alliance primary care network.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth lowest decile (4 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 5.3% Asian, 65.8% White, 15% Black, 5.2% Mixed, and 8.7% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more working age patients than older and young patients.

There is a team of 4 GP partners and 2 salaried GPs who provide cover at the practice. The practice has a team of 2 nurses who provide nurse led clinics for long-term condition of use of both the main and the branch locations. The GPs are supported at the practice by a team of 1 healthcare assistant, 6 pharmacists, 6 social prescribers, 2 mental health pharmacists, 2 physiotherapists, 1 health and wellbeing coach and 16 reception/administration staff. The practice manager provides managerial oversight.

The practice is open between 8.30 am to 6.30 pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by Broxbourne Alliance primary care network, where late evening and weekend appointments are available.

Out of hours services are provided by NHS 111.

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 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 |
|--|--|
| Surgical procedures Treatment of disease, disorder or injury Maternity and midwifery services Diagnostic and screening procedures Family planning services | <p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>There were no systems or processes that enabled the registered person to seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services. In particular:</p> <ul style="list-style-type: none">• Patient survey data collected in-house was not a true reflection of the patient list size to gain an overall accurate patient satisfaction experience.• There was additional evidence of poor governance. In particular:<ul style="list-style-type: none">• The provider did not always offer appointments and choice that met the patient needs.• Staffing levels did not safely support the demand for appointments and required review.• There was a consistent downward trend for patient satisfaction and no clear action plan to address how this would be improved.• It was not clear how patient complaints were used to improve practice or how learning from complaints was shared. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> |