

Cricklade Surgery

Inspection report

113 High Street
Cricklade
Swindon
Wiltshire
SN6 6AE
Tel: 01793 750645
www.crickladesurgery.nhs.uk

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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 effective?

Requires improvement



Are services well-led?

Good



Overall summary

This practice is rated as Good overall. (Previous inspection August 2016 – Good)

We carried out an announced focused inspection at Cricklade Surgery on 1 October 2019. We carried out an inspection of this service following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a change to the quality of care provided since the last inspection.

This inspection focused on the following key questions:
Effective and well-led.

Because of the assurance received from our review of information we carried forward the ratings for the following key questions: Safe, caring and responsive.

The key questions are rated as:

Are services effective? Requires Improvement

Are services well-led? Good

As part of our inspection process, we also look at the quality of care for specific population groups; Older People, People with long term conditions, Families, children and young people, working age people (including those recently retired and students, People experiencing poor mental health (including people with dementia). The concerns identified within effective affected all people which led to a rating of requires improvement for all population groups.

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.

At this inspection we found improvements were required in the following areas:

A significantly higher number of patients had been excepted from clinical reviews compared to local and

national averages. (Exception reporting is the removal of patients from QOF calculations where, for example, the patients decline or do not respond to invitations to attend a review of their condition or when a medicine is not appropriate.) There was no programme of clinical audit or quality improvement to enable improvements to be made in care and treatment.

Data showed that improvements needed to be made in prescribing practices.

We also found:

- Systems were in place to ensure clinicians remained up to date with current best practice.
- The practice encouraged involvement in care and treatment decision making. For example, through treatment escalation plans and long-term chronic conditions self-management plans.
- Patient feedback was very positive about the care and treatment received.
- Ongoing support and work with carers had resulted in the practice achieving the platinum award from Cares Support Wiltshire.
- There was a stable leadership team which was inclusive and responsive to staff feedback.
- The leadership team had fully engaged with the local primary care network to drive improvements within the practice.

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

- Assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity.

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

- Continue to improve uptake of cervical screening to ensure public health targets are met.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector.
The team included a GP specialist adviser.

Background to Cricklade Surgery

Cricklade surgery is located at 113 High Street, Cricklade, North Wiltshire SN6 6AE. The practice serves Cricklade, a small town in North Wiltshire, and surrounding villages and has approximately 2,800 registered patients. There is a branch surgery in the village of Aston Keynes, Ashton Keynes Village Hall, Ashton Keynes SN6 6NT and is four miles from the main site. During the inspection we did not visit the branch site.

The practice is registered with the CQC in respect of the following regulated activities: Diagnostic and screening procedures; Maternity and midwifery services; Surgical procedures and Treatment of disease, disorder or injury. The practice is a dispensing practice and dispenses medicines to 45% of their registered patients.

Cricklade Surgery is a single-handed GP practice. The GP employs a regular locum GP, for one day a week, who also covers for any absence of the main GP. The practice team consists of two practice nurses, a health care assistant, a business manager and an operations manager who are supported by administrative and dispensary teams.

When the practice is closed, out of hours services are provided by Medvivo which patients can access via NHS111.

Further information about the practice can be found at .

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance How the regulation was not being met... The provider had failed to assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity. Specifically: • There were no systems and processes to carry out regular completed audits of the service to improve quality of care. • Information relating to exception reporting was not accurate and had not been analysed to ensure appropriate action had been taken. • Prescribing practices were not in line with best practice.