

# The Surgery Chorley

## Inspection report

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Tel:  
[www.thesurgerychorley.co.uk](http://www.thesurgerychorley.co.uk)

Date of inspection visit: 18 December 2023  
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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 responsive to people's needs?

Requires Improvement



Are services well-led?

Good



# Overall summary

We carried out unannounced inspections at The Surgery Chorley and the branch site at Leyland Surgery on 18 December 2023. Overall, the practice is rated as Requires Improvement.

Safe – Requires Improvement

Effective - Good

Caring – Good (carried forward from previous inspection)

Responsive - Requires Improvement

Well-led - Good

The previous inspection was undertaken on 22 October 2022, when the practice was rated good in all key questions and good overall.

The full reports for previous inspections can be found by selecting the 'all reports' link for The Surgery Chorley on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was carried out in response to concerns raised to CQC about issues including culture, staffing, workflow and access. We undertook an unannounced inspection and looked at the key questions; Safe, Effective, Responsive and Well-led.

## How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews.
- Requesting written feedback from staff and patients.
- 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.
- Inspection visits to both sites.

## 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.

# Overall summary

## **We have rated this practice as Requires Improvement because;**

- Systems to ensure medications remained safe to use were not always effective; we identified expired medications and equipment.
- Emergency medications and equipment were not organised in a way to enable staff to access the items quickly in the event of a medical emergency.
- At the time of inspection the practice had not adhered to their policy to keep prescription paper safely secured. There was a risk that such paper may have been misappropriated.
- Maintaining staffing levels was a challenge.
- Patients could not always access care and treatment easily and in a timely way.
- Feedback from patients from a range of sources indicated that patients were dis-satisfied with access to the practice by telephone and found it challenging to secure an appointment.
- The National GP patient survey painted a deteriorating picture.

We found one breach of regulation. The provider **must**:

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

In addition, the provider **should**:

- Improve staffing levels within the practice.
- Implement initiatives to improve the workplace culture and staff retention;
- Promote knowledge of freedom to speak up options.
- Implement responses to improve patient surveys and feedback;
- Take action to improve access to appointments;
- Take action to improve access by telephone;
- Consider the security implication of unsecured clinical rooms at both sites.
- Take action to improve screening and immunisation uptake.

**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 Healthcare**

## Our inspection team

Our inspection team was led by a CQC lead inspector and included a supporting inspector, a senior primary medical service specialist operations manager, an operations manager and a regulatory co-ordinator. These staff undertook site visits at the Surgery Chorley and Leyland Surgery and looked at records, the environment and spoke with staff. The team also included a GP specialist advisor who spoke with staff on site and completed clinical searches and records reviews of the patient electronic system.

## Background to The Surgery Chorley

The Surgery Chorley is located at:

Ann James House

32-34 St. Thomas's Road

Chorley

PR7 1HR

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury. The provider has a branch site at Leyland Surgery which was also visited as part of this inspection.

The practice is situated within the NHS Lancashire and South Cumbria Integrated Care Board (ICB) and delivers General Medical Services (GMS) to a patient population of 10,117. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called the Chorley Together Primary Care Network (PCN) with 6 other local practices.

Information published by Public Health England indicates that both The Surgery Chorley and Leyland Surgery are located in areas which are ranked 5 out of 10 on the deprivation index, 10 being the most deprived and 1 being the least deprived.. According to the latest available data, the ethnic make-up of the practice is 94.4% white, 2.8% Asian, 0.6% black, 1.6 mixed and 0.6% other. The age distribution of the practice is similar to national averages; 22% of patients are under 20, 60% are aged 20-69 and 17% are aged over 70 years. There are slightly more females than males registered at the practice.

Staff at The Surgery Chorley also work at the branch site at Leyland Surgery. There is a team of 5 GPs who provide cover across both sites. They also have a team of 1 practice nurse and 5 long term locum practice nurses, 3 advanced care practitioner, 1 trainee advanced care practitioners, one trainee nurse associate, two health care assistants and one clinical pharmacist. The GPs are supported at the practice by a team of reception/administration and care navigation staff and 2 practice managers provide managerial oversight.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended and increased access is provided through arrangements with neighbouring primary care networks and GP practices. Late evening appointments are available from 6.30pm to 8pm every Monday to Friday and weekend appointments are available every Saturday between 9am and 5pm Out of hours services are accessed by contacting NHS 111 and through an arrangement with an out of hours 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
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 12 CQC (Registration) Regulations 2009 Statement of purpose</p> <p><b>Care and treatment must be provided in a safe way for service users</b></p> <p><b>How the regulation was not being met:</b></p> <ul style="list-style-type: none"><li>• Systems to ensure medications remained safe to use were not achieved effectively as we identified expired medications and equipment.</li><li>• Emergency medications and equipment were organised in a way that made accessing them difficult in the event of a medical emergency.</li><li>• At the time of inspection the practice had not adhered to their policy to keep prescription paper safely secured. There was a risk that such paper may have been misappropriated.</li></ul> <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>