

Cricklade Surgery

Inspection report

113 High Street
Cricklade
Swindon
SN6 6AE
Tel: 01793750645
www.crickladesurgery.nhs.uk

Date of inspection visit: 06 May 2022
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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 safe?

Good 

Are services effective?

Good 

Are services responsive to people's needs?

Inspected but not rated 

Are services well-led?

Requires Improvement 

Overall summary

We carried out an announced inspection at Cricklade Surgery on 06 May 2022. Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe - Good

Effective - Good

Well-led – Requires Improvement

Following our previous inspection on 31 March 2021, the practice was rated Requires Improvement overall for providing safe services.

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

Why we carried out this inspection

This inspection was a focused follow-up inspection to review:

- *Safe, Effective and Well-led domains*
- *Breaches of regulations and ‘shoulds’ identified from the previous inspection*
- *Aspects of Responsive domain with the ratings carried forward from the previous inspection*

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing remote 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
- A short site visit

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 Good overall

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Patient feedback overall was positive, including access to services.
- Staff had the skills, knowledge and experience to carry out their roles. There was a system in place to monitor compliance with staff training. Staff were encouraged and supported to develop their skills and knowledge.
- The way the practice was led and managed promoted the delivery of person-centre care.
- Governance processes were in place but oversight of risk management was not always fully embedded.
- Quality improvements had been made against the action plan from the last inspection.

We found breaches 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 Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

Our inspection team was led by a CQC lead inspector and supported by a second CQC inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Cricklade Surgery

Cricklade Surgery is located in Cricklade, Swindon at:

113 High Street Cricklade Swindon Wiltshire SN6 6AE

The practice has a branch surgery at:

Ashton Keynes Village Hall Ashton Keynes Wiltshire SN6 6AE

The branch location was open one day a week on a Wednesday. We did not visit the branch location as part of this inspection.

The practice is a dispensing practice and dispenses medicines to approximately 45% of their registered patients.

The practice is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

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

The practice is situated within the Bath and North East Somerset, Swindon and Wiltshire Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to an approximate patient population of 3,100. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices under North Wiltshire Border (PCN), which consists of six GP practices.

Information published by Public Health England shows that deprivation within the practice population group is in the second highest decile (nine 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 97.8% White, 1% Asian, 0.9% Mixed, 0.2% Black, and 0.1% Other.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

The practice is open on Mondays to Fridays 8.30am to 6.30pm. The dispensary is open on Mondays to Fridays 8.30am to 6.00pm.

Extended access is provided locally by Improved Access, a Wiltshire-wide initiative where local practices offer increased availability of services and appointments in the evenings and weekends. The appointments are available on Mondays to Fridays, weekends and bank holidays 6.30pm to 8.00pm. Out of hours services are also provided by Medvivo, which patients can access via NHS 111.

Further information can be found at www.crickladesurgery.nhs.uk

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 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems or processes that enabled the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of the service users and others who may be at risk. In particular:</p> <ul style="list-style-type: none">• There was evidence that care pathways and protocols within records for patient medicine reviews were not always followed in line within national guidance.• There were gaps in the process for coding patient records to reflect care and treatment received.• There was lack of oversight for assessing, monitoring and mitigating the various risks arising from the undertaking of regulated activities. In particular, COVID-19.• There were gaps in the induction procedures to ensure training and guidance was available for locum and temporary staff.• The system for monitoring fridge temperatures was not sufficient to ensure that medicines were being stored in line with the manufacturer's guidance. <p>This was in breach of Regulation 17(2)(b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>