

# Prospect Surgery

## Inspection report

The Health Centre  
20 Cleveland Square  
Middlesbrough  
TS1 2NX  
Tel: 01642210220  
[www.prospectsurgery.nhs.uk](http://www.prospectsurgery.nhs.uk)

Date of inspection visit: 18 November 2021  
Date of publication: 17/12/2021

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

Inspected but not rated



# Overall summary

We carried out an announced unrated review at Prospect Surgery on 18 November 2021. Overall, the practice remains rated as Inadequate.

Following our previous inspection on 9 July 2021 the practice was rated Inadequate overall and for the key questions of safe, effective and well led. The key questions of caring and responsive were not inspected.

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

## Why we carried out this review

This was a review of information without undertaking a site visit inspection, to follow up on:

- The breach of Regulation 12, Safe Care and Treatment, of the Health and Social Care Act 2008 identified in the July 2021 inspection.

## How we carried out the review

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 review was carried out in a way which enabled us to spend the 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 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

## Our findings

We based our judgement of the quality of care at this service on a combination of:

- what we found when we carried out this review;
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations

We found that most risks identified in the last inspection had been acted upon by the practice team:

- The practice had made improvements since the last inspection to ensure that people taking high risk medicines were monitored appropriately. They had a recall system in place to ensure that people were not missed, and we found that people were no longer prescribed, on a repeat basis, high risk medicines.

# Overall summary

- The practice had employed locum staff and trained existing staff to ensure that people requiring asthma reviews, childhood immunisations and cervical screening could access these services. We saw evidence of proactive contact by the practice to engage with people who would benefit from these interventions. We saw data that showed an increase in the numbers of people who had accessed these services.
- The practice had action plans in place for areas identified for improvement, compared to local or national averages, for example cervical screening and childhood immunisations.
- The practice had a process in place for managing new and historical safety alerts including Medicine and Healthcare Products Regulatory Agency (MHRA) alerts. Records reviewed showed that safety alerts had been actioned, including for people prescribed sodium valproate. We identified one potential missed MHRA alert for people who were prescribed methotrexate and sought assurance from the practice that prescriptions would be modified to include the day the medication needed to be taken, as per the alert.
- At the last inspection in July 2021 no records were held for staff vaccination and immunity status. At this November 2021 review we saw that the provider had addressed this.
- At the last inspection there were no mechanisms in place to ensure that infection prevention and control (IPC) measures were adequately carried out. The provider had addressed this with staff training and IPC audits.
- We saw that structured medication reviews were carried out as a specific, separate activity by a pharmacist using a template to accurately record all necessary information. Other medication reviews were carried out by the GP's during consultations with patients and were recorded as such accordingly.
- At the last inspection we found that some people with chronic kidney disease (CKD) had not been monitored safely. At this review the provider told us they were in the process of working through a list of people with possible CKD to ensure the checks and confirm the diagnosis.

Whilst we found no breaches of regulations, the provider **should**:

- Include the day of the week on which to take methotrexate is added to prescription instructions for all people taking methotrexate as per MHRA guidance from September 2020.
- Take steps to assure themselves that all relevant staff are accurately recording necessary information during structured medication reviews to ensure safe continuity of care.
- Take steps to assure themselves that clinical staff reviewing blood test results know the correct action to take if they get a result suggestive of a CKD diagnosis. Continue to review all people with possible CKD to ensure that correct monitoring and treatment is applied.

Although improvements have been demonstrated regarding the key question of safe this service is still in special measures. Services placed in special measures will be inspected again within six months of the publication of the identifying inspection's report (which was published in September 2021). If insufficient improvements have been made, such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement, we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

# Overall summary

Chief Inspector of Primary Medical Services and Integrated Care

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities. 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 Prospect Surgery

Prospect Surgery is located at:

The Health Centre,  
20 Cleveland Square,  
Cleveland Health Centre,  
Middlesbrough,  
TS1 2NX

The provider 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 a single site.

The practice is situated within the Tees Valley Clinical Commissioning Group (CCG) and delivers General Medical Services to a patient population of about 6,400. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices (Central Middlesbrough Primary Care Network that delivers services to approximately 48,000 patients in central Middlesbrough).

Information published by Public Health England shows that deprivation within the practice population group is in the lowest decile (one 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 13% Asian, 81% White, 2% Black, 2% Mixed, and 2% Other.

There is a team of five GPs two are partners and one is a salaried GP. The practice has a team of two nurses and one health care assistant. The nurses provide nurse led clinics for childhood immunisations and are currently undergoing required training to enable them to provide clinics for patients with long-term conditions and for cervical smears. The GPs are supported at the practice by a team of reception and administration staff and a practice manager.

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 needed to see a patient face-to-face then the patient is offered a face to face appointment.

Extended access is provided locally by STAR – the local extended GP hours service accessed via telephoning NHS 111, where late evening and weekend appointments are available. Out of hours services are provided by telephoning NHS 111 or NHS 999 for a life-threatening medical emergency.