

Barnburgh Surgery

Inspection report

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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?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Barnburgh Surgery on 13 March 2019 as part of our inspection programme.

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 have rated this practice as requires improvement overall and for all population groups.

We rated the practice as **requires improvement** for providing safe services because:

- The practice had not always implemented systems and processes in areas such as recruitment and training and infection prevention and control to keep people safe and safeguarded from abuse.

We rated the practice as **requires improvement** for providing effective services because:

- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.

We rated the practice as **requires improvement** for providing well led services because:

- The overall governance arrangements were not always effective because policies and procedures had not always been implemented.

These areas affected all population groups so we rated all population groups as **requires improvement**.

We rated the practice as **good** for providing caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- There were good levels of patient satisfaction with the service.

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

- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out the duties.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed. Ensure specified information is available regarding each person employed

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

- Improve the identification of carers to enable this group of patients to access the care and support they need.
- Review and improve stock control of single use equipment.
- Review and improve systems to monitor delays in referrals.
- Review and risk assess supply of emergency medicines.
- Improve systems to monitor the outcomes of care and treatment.
- Review the complaints procedure and include the process for escalation of complaints where patients may not be satisfied with the response from the practice.

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

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 inspector. The team included a GP specialist advisor.

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Background to Barnburgh Surgery

Barnburgh Surgery is located in the centre of the village of Barnburgh near Doncaster. The practice has a Personal Medical Services (PMS) contract. The practice is located in a converted stable and provides services from the ground floor.

The provider also has another separately registered practice in the village of Mexbrough near Doncaster. We did not visit this practice during this inspection.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice serves a population of approximately 2,850 patients and is situated in one of the fifth more deprived areas in England on the deprivation measurement scale. The deprivation scale goes from one to 10, with one being the most deprived. People living in more deprived areas tend to have greater need for health services. National General Practice Profile describes the practice ethnicity

as being 98.6% white British, 0.5% Asian, 0.2% black, and 0.5% mixed and 0.2% other non-white ethnicities. The practice demographics show a slightly lower than average percentage of people in the 75+ year age group. Average life expectancy is 78 years for men and 82 years for women compared to the national average of 79 and 83 years respectively. The general practice profile shows that 54% of patients registered at the practice have a long-standing health condition, compared to 55% locally and 51% nationally.

The service is provided by one male GP and one female GP partner. A first contact practitioner, a female advanced nurse practitioner and a male locum GP to support the partners. The clinical team are supported by a practice manager and a small team of administrative and secretarial staff.

The practice offers pre-bookable appointments between 8.00am and 6.30pm daily. When the practice is closed, out of hours cover for emergencies is provided by the NHS 111 service.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 18 HSCA (RA) Regulations 2014 Staffing How the regulation was not being met... The service provider had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they were employed to perform. In particular: • A training plan to show how training requirements would be met was not in place. • Systems to monitor the completion of required training were not up to date. • Not all staff had completed the required training, for example, infection prevention and control and safeguarding. • Appraisals had not been completed for the clinical staff. This was in breach of Regulation 18(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed How the regulation was not being met... The registered person's recruitment procedures did not ensure that only persons of good character were employed, employees had the necessary qualifications, competence, skills and experience before starting work and not establish whether staff were able, by reasons of their health and after reasonable adjustments, to properly perform tasks intrinsic to the work for which they would be employed. The registered person had not

Requirement notices

ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed. In particular:

- Identity had not been checked, proof of conduct in previous employment had not been obtained and there was no evidence of consideration of physical and mental health or that immunisation checks had been undertaken for two members of staff.
- DBS checks had not been completed by the practice for all clinical staff prior to employment.
- Not all staff recruitment records were available as copies were not held at the practice.

The registered person employed persons who must be registered with a professional body, where such registration is required by, or under, any enactment in relation to the work that the person is to perform. The registered person had failed to ensure such persons were registered. In particular:

- There was no evidence qualifications or registration had been verified for one member of clinical staff.

This was in breach of Regulation 19(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.