

St Saviours Surgery

Inspection report

St. Saviours Surgery
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Malvern
Worcestershire
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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?

Requires improvement



Are services effective?

Good



Are services caring?

Outstanding



Are services responsive?

Good



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at St Saviours Surgery on 5 March 2019 as part of our inspection programme.

At the last inspection in February 2016 we rated the practice as good overall.

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 good overall and requires improvement for safe services. We have rated the practice as outstanding for providing caring services and for the population group of long term conditions. We have rated the practice as good for providing effective, responsive and well-led services:

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

- There was an ineffective system in place to manage and monitor emergency medicines. We found that a number of emergency medicines were not held by the practice and no risk assessments had been completed to determine their rationale. In addition, some medicines were in the process of being ordered by the practice, however two of the recommended medicines were found to be out of date. On the day of our inspection, the practice took immediate action in relation to this finding to reduce any risks to patients.

We rated the practice as outstanding for providing caring services and for the population group of long term conditions because:

- The practice could evidence that all indicators for long term conditions were higher than the local and national averages with lower exception reporting rates than local and national averages. Evidence to support this demonstrated there was a sustained improvement in the diagnosis and management of long term conditions.
- All the practice's indicators for diabetes were higher than local and national averages with overall low exception reporting rates. The practice had systems in

place so that patients who were at risk of developing chronic diseases were coded on their system. For example, 468 patients had been coded who were at risk of developing diabetes.

- Patient feedback through comment cards, reviews on NHS Choices and patient consultations on the day of the inspection were very positive about the caring nature of the practice.
- Patient satisfaction through the National GP Patient Survey was higher than both the CCG and England averages across all indicators relating to caring.
- Feedback from patients told us that the practice gave consistently good care and used a variety of formats to engage with different population groups.
- The practice had proactively identified and supported 140 carers, approximately 3% of the practice population. Patients identified as carers were eligible for a number of services such as flu vaccinations, a carers card and a referral to The Carers Association. There was literature in the practice waiting room of local support groups and networks.

We also rated the practice as good for providing, effective, responsive and well-led services because:

- Patients received effective care and treatment that met their needs.
- The practice worked proactively with other organisations to ensure patients had access to a range of services to support their health and wellbeing.
- Services were tailored to meet the needs of individual patients. They were delivered in a flexible way that ensured choice and continuity of care.
- The practice worked proactively with the Patient Participation Group (PPG) to respond to patients' needs.
- The culture of the practice and the way it was led and managed drove the delivery and improvement of high-quality, person-centred care.

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

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

(Please see the specific details and action required at the end of this report).

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

Overall summary

- Ensure that staff remain up to date with training considered essential by 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	Good	
People with long-term conditions	Outstanding	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

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

Background to St Saviours Surgery

St Saviours Surgery is located in a purpose-built building in Malvern Link, Worcestershire. 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.

St Saviours Surgery is situated within the South Worcestershire Clinical Commissioning Group (CCG) and provides services to 4,633 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

Parking is available on-site and a chaperone service is available for patients who request the service. This is advertised throughout the practice.

The practice has three GP partners (two male and one female), three practice nurses and one health care assistant. The clinical team is supported by a practice manager, two reception managers and a team of administrative and reception staff.

The practice is a training practice and regularly hosts trainee GPs.

There are higher than average number of patients between the ages of 45-64. The National General Practice Profile states that 97% of the practice population is from a white background with a further 3% of the population originating from black, Asian, mixed or other non-white ethnic groups. Information published by Public Health England rates the level of deprivation within the practice population group as seven, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is open between 8am and 6.30pm Monday to Friday. Pre-bookable appointments are available one Saturday per month between 8.30am and 3.30pm. Home visits are available for patients who are too ill to attend the practice for appointments.

The practice does not provide out of hours services to their own patients. When the practice is closed patients are directed to contact Care UK via NHS 111.

The practice website can be viewed at:
www.stsaviourssurgery.nhs.uk

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	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met.</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <ul style="list-style-type: none">• The practice had some emergency medicines but not all that is currently recommended. There was no risk assessment to outline how the practice would manage certain medical emergencies in the absence of these medicines. <p>There were insufficient quantities of medicines to ensure the safety of service users and to meet their needs. In particular:</p> <ul style="list-style-type: none">• Two of the recommended medicines were found to be eleven and twelve months out of date. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>