

# Eyam Surgery

## Inspection report

Church Street  
Eyam  
Hope Valley  
S32 5QH  
Tel: 01433630836  
[www.eyamsurgery.co.uk](http://www.eyamsurgery.co.uk)

Date of inspection visit: 29 April 2021  
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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 caring?

**Good** 

Are services responsive to people's needs?

**Outstanding** 

Are services well-led?

**Good** 

# Overall summary

We carried out an announced, focused inspection at Eyam Surgery on 29 April 2021. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions: safe, effective and well-led. Due to assurances we received from our review of information, we carried forward the ratings for the following key questions: caring and responsive from our last inspection in August 2019. Overall, the practice is rated as Good. It is rated as good in safe, effective, caring and well-led and outstanding in responsive.

Following our previous inspection on 13 August 2019, the practice was rated requires improvement overall and for key questions safe and well-led. It was rated good for key questions effective and caring and outstanding in responsive. A warning notice in relation to good governance was issued. We carried out an unrated inspection at Eyam Surgery on 13 November 2019 to ensure that the issues identified in the warning notice had been addressed. We found that the provider had satisfactorily addressed the issues identified in the warning notice.

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

## Why we carried out this inspection.

This inspection was a focused inspection to follow up on:

- Breaches in Regulations relating to safe care and treatment and good governance.
- Three best practice recommendations:
- Provide clear evidence and assurance that all safety alerts are received and acted upon.
- Consider the approach to how new and revised guidance, including National Institute for Health and Care Excellence (NICE) is reviewed collectively by the clinical team, for example via an established clinical audit programme.
- Review staff induction programmes to ensure this incorporates all the necessary information, training and competencies.
- Since our previous inspection, the provider's legal identity has changed from a single-handed provider to a partnership. The regulatory history and ratings have been carried over to the new provider.

## How we carried out the inspection.

Throughout the COVID -19 pandemic the Care Quality Commission (CQC) has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the COVID-19 pandemic, and in order to reduce risk, we have conducted our inspection 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 prior to the on-site inspection.
- Completing remote clinical searches on the practice's patient records system and discussing findings with the provider.
- Remotely reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short on-site visit.

## Our findings

# Overall summary

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 outstanding for all population groups.**

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Systems had been put in place for safe staff recruitment and staff immunity to healthcare associated infections, receipt of cervical screening results, the internal distribution of prescription stationery, staff induction and the review of National Institute for Health and Care Excellence (NICE) guidance.
- Actions plans had been put in place, where required, and there was evidence that actions had been completed within a timely manner.
- The practice had appropriate systems in place for processes relating to the dispensary.
- Patients received effective care and treatment that met their needs.
- The practice had adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- There was clinical and managerial oversight of processes regarding patient safety. Recent safety alerts were reviewed and acted on however, we found that two historic alerts had not been acted on. The provider introduced a system to act on historic alerts before the end of our inspection.

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

- Embed into practice the newly developed system of updating existing alerts onto the records of children with a child protection plan in place and adding alerts to the records of vulnerable adults, as identified at the multidisciplinary meetings.
- Embed into practice the newly developed tool to demonstrate formal, clinical oversight of the practice nurse's consultations and prescribing.
- Continue to develop and implement the newly developed electronic system to support the ongoing review of historic Medicines and Healthcare products Regulatory Agency (MHRA) alerts.

**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

<b>Older people</b>	<b>Outstanding</b>	★
<b>People with long-term conditions</b>	<b>Outstanding</b>	★
<b>Families, children and young people</b>	<b>Outstanding</b>	★
<b>Working age people (including those recently retired and students)</b>	<b>Outstanding</b>	★
<b>People whose circumstances may make them vulnerable</b>	<b>Outstanding</b>	★
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Outstanding</b>	★

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a short 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 practice.

## Background to Eyam Surgery

Eyam Surgery is a rural, dispensing practice located in the Derbyshire Dales in the Peak District at:

Church Street

Eyam

Hope Valley

Derbyshire

S32 5QH

The practice has a branch surgery at:

Netherside

Bradwell

Hope Valley

Derbyshire

S33 9JL

We visited Eyam Surgery as part of this inspection.

The provider is registered with the CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning, treatment of disease, disorder or injury and surgical procedures. Patients can access services at either surgery.

The practice is situated within the NHS Derby and Derbyshire Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 3,447 people. This is part of a contract held with NHS England. The practice is part of Derbyshire Dales Primary Care Network, a wider network of 13 GP practices that work collaboratively to deliver primary care services.

Information published by Public Health England reports the deprivation ranking within the practice population as 6,727 out of 6,900. The lower the number, the more deprived the practice population is relative to other practices. The age profile demonstrates a higher proportion of older patients, and lower numbers of younger patients compared to local and national averages:

- The percentage of older people registered with the practice is 28.5% which is above the CCG average of 20.2%, and the national average of 17.6%.
- The percentage of young people registered with the practice is 15.3% which below the CCG average of 19.5%, and the national average of 20.2%.

The National General Practice Profile describes the practice ethnicity as being predominantly white at 98.7% of the registered patients, with estimates of 0.8% mixed, 0.5% Asian and 0.1% other groups.

There is a team of four GPs, two practice nurses, two healthcare assistants, two care co-ordinators and a phlebotomist. They provide cover at both practices. The team are supported by two practice managers, a team of dispensers, a team of receptionists and administration staff and a cleaner.

Due to the enhanced infection prevention and control measures put in place since the COVID-19 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 practice or the branch surgery.

Extended access is provided locally by Derbyshire Dales Primary Care Network where late evening and weekend appointments are available. Out of hours services are provided by Derbyshire Health United (DHU).