

# Elizabeth Street Surgery

## Inspection report

61 Elizabeth Street  
Blackpool  
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[www.elizabethstreetsurgery.nhs.uk](http://www.elizabethstreetsurgery.nhs.uk)

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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 summary

We carried out an announced comprehensive inspection at Elizabeth Street Surgery on 24 July 2018 in response to concerns and the practice was rated as Inadequate overall (previous rating June 2016 – Good). The full comprehensive report on the 24 July 2018 inspection can be found by selecting the ‘all reports’ link for Elizabeth Street Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk). We carried out an unannounced focused visit on 16 August 2018 to ensure the practice had begun to make progress to address the serious concerns identified at our inspection in July and to ensure the regulatory action we proposed was proportionate.

At this inspection we found:

- The lack of administrative staff in the practice had been addressed to enable the safe management of patient information coming into the practice. All outstanding information not previously seen by a GP or entered onto patient records had been assessed by the GP and dealt with appropriately.

- The practice had introduced a new protocol for managing communications regarding patient care and treatment and all information had begun to be viewed by the GP.
- The practice had carried out a peer review of patient consultation records for all clinicians and told us they planned further training.
- The backlog of new patient records not summarised onto the computer had begun to be addressed.
- At this visit, staff told us they had attended an awayday and had experienced an improvement in morale and felt more involved in the future of the practice. We saw a new programme of staff meetings had been initiated.

This service was rated Inadequate overall following our inspection on 24 July 2018 and was placed in special measures. This visit does not affect the ratings and the practice remains in special measures.

**Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

## Population group ratings

## Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a second CQC inspector.

## Background to Elizabeth Street Surgery

Elizabeth Street Surgery is based in a residential area close to Blackpool town centre at 61 Elizabeth Street, Blackpool, Lancashire, FY1 3JG. The practice website can be found at [www.elizabethstreetsurgery.nhs.uk](http://www.elizabethstreetsurgery.nhs.uk). There is onsite parking available and the practice is close to public transport. The surgery is housed in a purpose-built, two-storey building comprising of consulting and treatment rooms, administrative office space and two patient waiting areas. On the first floor there are midwifery, baby immunisation and minor surgery facilities. The practice provides services to approximately 5615 patients.

The practice provides level access to the building and is adapted to assist people with mobility problems. Patients can access the consulting rooms on the first floor by using the stairs and there is a lift for those patients who need it.

The practice is part of the NHS Blackpool Clinical Commissioning Group (CCG) and services are provided under a General Medical Services Contract (GMS). There is one male GP partner who is assisted by a part-time locum female GP. The practice also employs two nurse practitioners, two practice nurses, a health care assistant and a locum clinical pharmacist. Non-clinical staff consisting of a practice manager and eight administrative and reception staff support the practice. The practice manager was new in post and had joined the practice in April 2018.

When the practice is closed, patients are able to access out of hours services offered locally by the provider Fylde Coast Medical Services by telephoning 111.

The practice patient population profile is similar to local and national profiles, with a slightly larger proportion of male patients aged between 25 and 35 years of age (8%) compared to local and national averages of 7%.

Information published by Public Health England rates the level of deprivation within the practice population group as one on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice caters for a higher proportion of patients experiencing a long-standing health condition (69% compared to the local average of 61% and national average of 54%). The proportion of patients who are in paid work or full-time education is lower (54%) than the CCG average of 55% and the national average of 62% and unemployment figures are lower, 3% compared to the CCG average of 6% and the national average of 5%.

The practice provides family planning, maternity and midwifery services, surgical procedures, treatment of disease, disorder or injury and diagnostic and screening procedures as their regulated activities.

# Are services safe?

## Risks to patients

At our inspection in July 2018, we saw the systems to assess, monitor and manage risks to patient safety were not always adequate. We saw at this inspection the lack of administrative staff in the practice had been addressed to enable the safe management of patient information coming into the practice.

- In July 2018, arrangements in place for planning and monitoring the number and mix of staff needed to meet patients' needs were not effective. There were insufficient administration staff to ensure the safe management of patient information coming into the practice. When we re-visited the practice on this inspection, we saw evidence of increased staffing. We were told by staff this allowed them to manage patient information and fulfil all areas of service administration effectively.
- On our inspection in July 2018, we saw when there were changes to services or staff the practice had not comprehensively assessed and monitored the impact on safety. Changes to clinical staffing had been addressed but issues related to a shortage of available administration staff resources had not. We saw at this visit this situation had changed. Changes to staffing had been made to allow for the safe management of patient information coming into the practice.

## Information to deliver safe care and treatment

During our inspection in June 2018, staff did not always have the information they needed to deliver safe care and treatment to patients.

- We saw evidence at our inspection in June 2018 some information needed to deliver safe care and treatment was not available to staff; there was information dating back to May 2018 that had not been viewed by a GP or

scanned and coded onto patient care records. At this inspection, we saw this outstanding information had been viewed by a GP and scanned and coded onto relevant patient records. The practice GP had reviewed the patient health information in the backlog of documents and assured all care and treatment had been provided as required.

- The majority of patient health information for some new patients from 2017 had not been summarised onto the practice electronic health record system, a total of between 400 and 500 records. At this visit, we saw the practice had provided sufficient staff to begin to address the backlog of new patient notes in need of summarising and told us they planned to provide additional resources to speed up the process.
- At our previous inspection, the practice did not have a protocol to ensure all patient information coming into the practice was dealt with safely and in a timely way. Non-clinical staff removed items of post to scan and code onto patient records without sight of a GP and with no protocol or GP audit of the process. At this visit, the practice confirmed the protocol for dealing with incoming patient information had changed and the GP was viewing all items of post. Staff confirmed this process was in development and the practice was working towards a new workflow protocol that would adhere to best practice.
- In June 2018, we saw evidence that some patient consultation records contained minimal information and there was a consistent lack of coding information to enable patient care and treatment information to be identified appropriately. Following our visit in June, the practice had conducted a peer review of consultation records and at this inspection told us it planned further training on recording and coding patient consultations.