

Wollaston Surgery

Inspection report

163 London Road
Wollaston
Wellingborough
Northamptonshire
NN29 7QS
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www.wollastonbozeatsurgery.co.uk

Date of inspection visit: 28th and 29 October 2019
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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?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Wollaston Surgery on 28th and 29th October 2019.

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.

- The practice had a leadership structure but some of the governance arrangements in place were not effective.
- Patients were at risk of harm because some systems and processes in place were not effective to keep them safe.
- Risks to patients were assessed but the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe.
- Feedback from people who use the service and stakeholders was positive. Out of 30 comments cards completed by patients registered at the practice, 22 patients expressed high levels of satisfaction about all aspects of the care and treatment they received. The feedback from comments cards we reviewed said patients felt they were treated with by professional and caring staff who with compassion, dignity and respect.

We rated the practice as Requires Improvement for providing a Safe service because we found:-

- Patients were at risk of harm because some systems and processes in place were not effective to keep them safe. For example, patient safety alerts.
- The practice did not always have an effective system in place to safeguard service users from abuse and improper treatment.
- Risks to patients were assessed but the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe. For example, fire and legionella.
- Standards of cleanliness were not always met.
- The system in place to monitor patient's health was not formalised to ensure they were reviewed in a timely manner to ensure medicines were being used safely and followed up on appropriately.

We rated the practice as Good for providing Effective services because we found:-

- Patients' needs were assessed, and care and treatment was delivered in line with current legislation, standards and evidence-based guidance supported by clear pathways and tools.
- Staff were aware of current evidence based guidance.
- There was limited evidence of clinical audits to demonstrate quality improvement.

We rated the practice as Requires Improvement for providing a well-led service because we found:-

- We found a lack of leadership and governance relating to the overall management of the dispensary.
- There was a governance framework in place but it did not always support the delivery of the strategy and good quality care. For example, patient safety alerts, infection control, staffing levels, medicine reviews, long term conditions and meeting minutes.
- The arrangements in place for managing risks was always effective.
- Meeting minutes did not contain enough detail to provide information to staff.
- The practice had a number of policies and procedures to govern activity.
- There was limited evidence of innovation or service development. There was also no evidence of learning and reflective practice.

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

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

- Ensure all staff have received a yearly appraisal.
- Monitor exception reporting to ensure new system is embedded.
- Ensure the business continuity plan has the risks mitigated.

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

Population group ratings

Older people	Good 
People with long-term conditions	Good 
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 inspector and included a GP specialist advisor, a practice nurse specialist advisor and a practice manager specialist advisor.

Background to Wollaston Surgery

Wollaston Surgery provides a range of services under a General Medical Services (GMS) contract which is a nationally agreed contract between general practices and NHS England. It also has a branch surgery at Bozeat and this is where dispensing services are carried out.

The practice is part of Aspiro Healthcare which has eight locations across the counties of Bedfordshire, Derbyshire and Northamptonshire. There are 11 GP partners and one managing partner. Six of the locations provide training for medical students and GP Registrars. Their aim is to work in partnership with patients and staff to improve the health and wellbeing status of individuals and the local community.

The practice's services are commissioned by Northamptonshire Clinical Commissioning Groups (CCG).

The practice serves a population of approximately 5,310 patients.

Patient demographics reflect the national average and information published by Public Health England, rates the level of deprivation within the practice population group as nine, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The service at the practice is provided by one GP partner, two salaried GPs (one is currently on long term sick leave), two practice nurses, two healthcare assistants and one dispenser. Not all of the clinical staff work full-time. The team is supported by an operations manager, deputy operations manager along with a team of administration and reception staff.

The practice has a branch surgery in the village of Bozeat. It is located at Brookside Bozeat, NN29 7NJ. The branch is a dispensing practice. We inspected the branch surgery as part of this inspection.

The practice at Wollaston Surgery is open between 8am and 6.30pm Monday to Friday. The branch surgery at Bozeat is open Monday, Tuesday, Thursday and Friday from 9am to 12.30 and 2.30pm to 6pm. Wednesday and Thursday from 9am to 12.30.

The practice population is predominantly white British (97%) along with small ethnic populations of Asian (0.8%) and mixed race (1.3%).

Aspiro Healthcare currently has five locations registered with the Care Quality Commission (CQC). We inspected Wollaston Surgery which is located at 163 London Road, Wollaston. NN29 7QS and provides the regulated

activities of Family planning, Treatment of disease, disorder or injury, surgical procedures, diagnostic and screening procedures and maternity and midwifery services.

The local NHS trust provides health visiting and community nursing services to patients at this practice.

As part of the Wellingborough locality extended access hub appointments will be provided from Albany House Medical Centre, 3 Queens Street, Wellingborough NN8 4RW

Patients can access extended hours appointments. Additional same day and booked appointments are provided by GPs, Nurse Prescribers, Clinical Pharmacists, Practice Nurses and other clinicians outside of the core General Practice hours.

18:30 - 20:00 Monday to Friday

08:30 - 12:30 Saturday

08:30 - 10:30 Sundays

Bank Holidays 8:30 - 10:30

Q Doctor Virtual Appointments are available:

Monday & Thursday 18:30 - 19:30

Sunday 09:00 - 12:00

When the practice is closed patients are directed to contact the out-of-hours GP services by calling 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	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider had failed to ensure that systems and processes were established and operated effectively.</p> <p>In particular:-</p> <p>The systems for ensuring that Medicines & Healthcare products Regulatory Agency (MHRA) and patient safety alerts were not effective. This included a system for reviewing old searches</p> <p>for ongoing reviews of patient's subject to patient safety alerts.</p> <p>Risks were mitigated but not all the actions had been completed.</p> <p>The dispensary lacked clinical oversight.</p> <p>Standards of cleanliness were not always met.</p> <p>The process in place for medicines reviews was not formalised.</p> <p>The system for the recall of patients with long term conditions to ensure they were reviewed in a timely manner was not formalised.</p> <p>Limited evidence of continuous improvement.</p> <p>Staffing levels had not been reviewed to ensure safe care and treatment.</p> <p>Meeting minutes did not include all areas of practice governance and allow opportunities for learning.</p> <p>Regulation 17, (1), of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>