

Waterbeach 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?		Good	
Are services effective?		Requires Improvement	
Are services caring?		Good	
Are services responsive to people's needs?		Inadequate	
Are services well-led?		Requires Improvement	

Overall summary

We carried out an announced comprehensive inspection at Waterbeach Surgery on 27 May 2021. Overall, the practice is rated as Requires Improvement.

When this service registered with us, it inherited the regulatory history and ratings of its predecessor. This is the first inspection of Waterbeach Surgery under the registered provider MKGP Plus Limited. MKGP Plus Limited became the provider of Waterbeach Surgery from December 2020.

We had previously inspected the Waterbeach Surgery under the previous provider and published our report dated 7 December 2020. At this inspection we rated the practice inadequate overall, imposed urgent conditions and the practice remained in special measures. Under our continuing regulatory history policy, the rating of inadequate remains, however, the conditions did not transfer to MKGP Plus Limited provider registration.

The key questions are rated as:

Are services safe? – Good

Are services effective? – Requires Improvement

Are services caring? – Good

Are services responsive? – Inadequate

Are services well-led? – Requires Improvement

The full reports for previous inspections can be found by selecting the 'all reports' link for Waterbeach Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive review of information with a site visit.

The focus of the inspection included:

- Inspection of all key questions
- Follow up of breaches of Regulation 17, Good Governance, Regulation 18, Staffing, and areas where the provider 'should' improve as identified in our previous inspection.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections 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

Overall summary

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit.
- Gaining feedback from staff by using staff questionnaires
- Conducting patient and care home representatives' interviews using telephone conferencing.

Our findings

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 inadequate for all population groups.

We found that:

- MKGP Plus Limited had made significant improvements to the practice that they had taken over at short notice in December 2020.
- Staff we spoke with told us the leadership and management within the practice had improved under the new provider. Staff were proud of the improvements made.
- The practice had recruited new staff both clinical and non-clinical. However, not all staff had been retained, this led to a shortfall in access to GPs and nurses.
- The practice did not demonstrate they had improved patient satisfaction on access to the surgery. Patients and others reported long delays in getting through on the telephone to the surgery.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.

At this inspection we have rated the practice as Good for providing safe services.

At this inspection we have rated the practice as requires improvement for providing effective services because;

- Although the practice had employed some new staff members and used locum GPs and nurses, we found there continued to be a shortage of skilled staff employed by the practice to be wholly assured patients' needs would be fully met and effective.
- The practice performance QOF data used in this report is the same as in our report published December 2020 (Inspected under the previous provider). This data showed the practice performance was significantly below the CCG and national averages for several indicators. The practice told us their unverified data gave them assurance that despite the COVID-19 pandemic restrictions, they had improved on the management and care of patients. Many reviews had been completed by using telephone consultations and by using locum staff with the specific skills, such as nurses with diabetes specialties. The practice shared with us the plans they had recently written and were implementing to improve the systems and processes to ensure patient's received appropriate and comprehensive reviews in the future.

Overall summary

These findings affected the population groups of, older people, people with long term conditions, working age people, working age people (including those recently retired and students) and people whose circumstances make them vulnerable. Therefore, they are all rated as requires improvement and the practice is rated as requires improvement overall for providing effective services.

The population group of families, children and young people is rated as good because the practice had achieved 100% for three of the five immunisation targets and over 90% for the remaining two.

At this inspection we have rated the practice as good for providing caring services.

At this inspection we have rated the practice as Inadequate for providing responsive services because;

- The practice failed to demonstrate an improvement in the feedback from patients about their experience of accessing the practice.
- Patients told us of long waits to get through on the telephone and to obtain appointments to speak with a GP or appropriate clinical staff member.
- Care home representatives reported they experienced difficulties at times in speaking with a GP or arranging a home visit. Despite having a priority telephone line, staff often found long waits for the telephone to be answered.
- The practice recognised the had insufficient staffing numbers and had an active recruitment plan in place. To try and minimise the impact of this they had used locum GPs and nurses. Patients told us this did not always give the confidence that their needs were fully met.

These findings affected all populations groups and therefore they are rated as inadequate.

At this inspection we have rated the practice as requires improvement for providing well-led services because;

- MKGP Plus Limited had been the registered provider for Waterbeach Surgery since December 2020. The new provider had made significant improvements to the practice which they had taken over at short notice and which was already in special measures.
- Despite an on-going recruitment campaign, the practice had not been able to fully recruit and retain sufficient clinical staff to meet and improve patient satisfaction. To try and mitigate the shortfall, the practice used a significant number of GP locums; staff and patients reported this did not always give them the confidence in the care and treatment they received and did not give easy access to appointments. They practice told us they had recruited a GP and Advance nurse practitioner and were currently doing their recruitment checks.
- The results of the 2020 GP patient survey were significantly lower than the results of the 2019 GP patient survey. The practice had not demonstrated they had improved on this. Feedback we received from patients, care home representatives and staff all reflected that access needed to be improved further.

We found a breach of regulations. The provider **must**:

- Ensure sufficient numbers of suitably qualified, competent, skilled and experienced persons are deployed to meet the fundamental standards of care and treatment.

In addition, we found the provider **should**:

- Continue to improve the system and processes to ensure patients receive timely and comprehensive reviews, especially for those patients with a long-term condition.
- Continue to encourage patients to attend the practice for cervical cancer screening appointments.
- Continue to identify patients who maybe carers to ensure they receive appropriate support.

Overall summary

- Implement the actions as identified in the fire and Legionella risk assessments.

This service was placed in special measures in January 2020 under the previous provider. The new provider, MKGP Plus Limited have made improvements, however, insufficient improvements have been made in some areas. Therefore, the service will remain in special measures for a further six months. The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within six months, and if there is not enough improvement, we will act in line with our enforcement procedures to begin the process of preventing the provider from operating the service.

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

Our inspection team

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

Background to Waterbeach Surgery

Waterbeach Surgery provides services to a population of approximately 5,670 patients.

The practice is contracted to provide Alternative Provider Medical services (APMS) by Cambridgeshire and Peterborough Clinical Commissioning Group.

The provider, MKGP Plus Limited had been the registered provider since December 2020. MKGP Plus Ltd is a healthcare provider organisation that is a subsidiary of the MKGP Ltd. MKGP Plus Limited has an overarching board and includes a chair and deputy chair, chief and a deputy operating officer. There is a finance director, medical director, director of governance and executive nurse. Other members of the senior management team include a clinical lead, and operations managers. There is an operational manager who is responsible for Waterbeach Surgery and to ensure the improvements are made.

At Waterbeach Surgery, there is a GP clinical lead (male) and two salaried GPs (female). There are two practice nurses (one nurse was due to leave June 2021) and two health care assistants. There is a practice manager and a deputy practice manager who are supported by a team of reception and administrative staff who undertake various duties. The practice is further supported by other members of the wider MKGP Plus Limited clinical team who work remotely.

The practice provides a range of clinics and services, detailed in this report, and open between the hours of 8:30am and 6pm weekdays.

The practice also offers extended access appointments on evenings and weekends through a Federation of local practices. In addition to this, outside of practice opening hours, a service was provided by another health care provider, Herts Urgent Care, via 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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• Despite an ongoing recruitment campaign, the practice had not recruited and retained sufficient clinical staff which meant;• They could not be assured they were meeting patients' needs.• Some clinical staff were not appropriately supported with professional development. <p>This was in breach of Regulation 18(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>