

# Maple Access Surgery

## Inspection report

Maple House  
17-19 Hazelwood Road  
Northampton  
NN1 1LG  
Tel: 01604250969  
[www.mapleaccess.org.uk](http://www.mapleaccess.org.uk)

Date of inspection visit: 18 May 2021 and 19 May 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?		Good	
Are services well-led?		Good	

# Overall summary

We carried out an announced follow up comprehensive inspection at Maple Access Surgery on 18 and 19 May 2021.

Maple Access Surgery had been inspected previously:

The overall rating from the inspection on 7 May 2019 was Inadequate, with Requires Improvement in caring and responsive. The practice was placed in special measures.

- At the follow up comprehensive inspection on 17 December 2019, the practice was rated as Requires Improvement with ratings of Good for providing safe and caring services. Insufficient improvements had been made and a rating of Inadequate for the working age population group meant the practice remained in special measures.
- The full comprehensive report on the May 2019 and December 2019 inspections can be found by selecting the 'all reports' link for Maple Access Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

At the last inspection we identified the following areas for improvement:

- Some performance data was significantly below local and national averages.
- Exception reporting was high and although the practice was working to reduce this, further improvement was needed.
- Cancer screening and immunisation rates were significantly below national averages.
- Systems and processes to ensure Good governance in accordance with the fundamental standards of care required had not always identified the shortfalls within the service.
- Complaints were not being effectively managed and responded to.

We were mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what type of inspection was necessary and proportionate. This was why there was a delay in re-inspecting this service.

We carried out a follow up comprehensive inspection on 18 and 19 May 2021 to confirm that the practice had resolved the outstanding issues from the previous inspections.

## 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:

- 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

## We found the practice had made improvements at this inspection.

# 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.**

Key findings included:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- 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. Patients could access care and treatment in a timely way.
- Patient group directions (PGDs) ensured staff had the appropriate authorisations to administer medicines.
- Increased review and monitoring of patients care plans had seen a reduction in some areas of personalised care adjustment (PCA), although the practice told us their patient demography was a contributory factor in higher rates of adjustments.
- Parents of children who were overdue immunisations were contacted in a variety of ways, including follow-up contact by nurses at the practice. They also discussed immunisations opportunistically with parents and actively communicated with local community groups to educate and encourage parents to take their children for vaccinations.
- The practice had worked to improve cervical screening uptake through various means including sending out personal reminders following failed appointments, liaising with local groups and religious leaders to improve uptake for all the national screening levels.
- Systems and processes had improved and now ensured Good governance to identify and act on the shortfalls within the service. This included systems for staff training and monitoring completion, and the management of complaints.

**Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**

**I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service**

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and was supported by a second CQC inspector who undertook a site visit. The team included a GP specialist advisor team who spoke with staff using video conferencing facilities and completed clinical searches and record reviews without visiting the location.

## Background to Maple Access Surgery

Maple Access Partnership is a purpose built two-storey building in the centre of Northampton providing primary medical services to a diverse population of approximately 12,200 patients. The practice holds the contract for the Violent Patient Scheme within Northamptonshire and take referrals from out of the area. The practice has a Personal Medical Services (PMS) plus contract which allows them to tailor more specialised services to a particular patient group and receive additional funding to do this. The practice has a higher than average vulnerable patient population including patients with substance misuse issues, complex mental health needs and 8% of patients being of no fixed abode.

The practice population is culturally diverse with almost 50% of the practice population not having English as a first language. The practice has a registered manager in place. A registered manager is an individual registered with CQC to manage the regulated activities provided. The registered manager is the lead GP at the practice.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice is led by a partnership of three GP partners. The practice also has one salaried GP, a lead nurse practitioner, a prescribing nurse, two practice nurses and a health care assistant. There are five members of the reception team, several administrative roles as well as a mental health team in place at the practice.

The practice has opted out of providing an out-of-hours service. However, the provider is available outside usual surgery hours, with the practice's telephone line being routed to an answering service, which will pass on messages. Otherwise, patients calling the practice when it is closed relate to the local out-of-hours service provider via NHS 111.

The practice website can be viewed at: [www.mapleaccess.org.uk](http://www.mapleaccess.org.uk)