

St Anthony's Health Centre

Inspection report

St. Anthony's Road
Newcastle Upon Tyne
NE6 2NN
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www.stanthonyshealthcentre.nhs.uk

Date of inspection visit: 17, 19 and 24 January 2024
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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 focused inspection at St Anthony's Health Centre on 17, 19 and 24 January 2024. Overall, the practice is rated as outstanding.

- Safe - good
- Effective - good
- Caring - good (not inspected, rating of good carried forward from previous inspection.)
- Responsive - good
- Well-led - good

Following our previous inspection on 17 February 2015, the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for St Anthony's Health Centre on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities.

Our inspection focus was on the following key questions:

- Safe
- Effective
- Responsive, and
- Well led.

How we carried out the inspection/review

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.
- Sending out a questionnaire to staff.

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.

Overall summary

We found that:

- Clinicians and leaders had a clear understanding of the complexity of health deprivation in the local community. They had used their understanding to target health inequalities and work collaboratively with partners to support the needs of patients with complex health needs. There was an overriding and intrinsic focus in everything the practice did to tackle the intergenerational detriments to health.
- There was a truly holistic approach to assessing, planning and delivering care and treatment for patients.
- There was a clear shared purpose driven by a passion to improve the health of the local community. The practice worked collaboratively with partners to identify and develop practical interventions to address holistically the health inequalities in the area.
- Quality improvement and clinical audit were integral to the practice understanding and working together to improve the quality of care provided. This led to a systematic approach to working with other organisations to improve care outcomes and tackle health inequalities.
- There was a strong focus on improving the quality of care and people's experiences.
- There were high levels of staff satisfaction and staff felt recognised and valued for the work they did.
- Safe innovation was celebrated. There was a clear and proactive approach to seeking out and embedding new ways of providing safe and effective care and treatment.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- 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.

We saw areas of outstanding practice:

- There was an overriding and intrinsic focus in everything the practice did to tackle the intergenerational detriments to health. They were working innovatively with a range of partners to ensure patients received coordinated joined up care. The practice had a strategic aim to reduce health inequalities and supported this through the use of targeted clinical audit and quality improvement work. For example, the practice had significantly reduced the prescribing of medicines that have risks of misuse, physical dependency and medical harm.
- The practice had developed and implemented an innovative service for patients experiencing mental health difficulties. They employed a General Practitioner Clinical Psychologist (GPCP). As well as individual appointments, the GPCP offered advice and support to GPs in dealing with patient's mental health, and community-based group sessions for patients. Other local practices had taken an interest in this initiative, and some were in the process of implementing this approach. The practice were expanding on this approach with a Psychological Wellbeing Practitioner due to start in February 2024.
- The partners told us they worked hard to foster a working environment in which staff felt supported and were able to speak up if they had concerns. They prioritised connection and collaboration both within their team and with colleagues from other services. We saw evidence to support this across the inspection.

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

- Improve the documentation of checks on the prescribing competence of non-medical prescribers to ensure ongoing assurance for those staff who have completed training and mentoring.
- Continue their work to encourage increases in the uptake rates of MMR vaccination and cervical cancer screening.
- Ensure the views of patients are integral to identifying and addressing any areas for improvements to support good access to high quality and sustainable care and improving patient satisfaction.

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

Overall summary

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

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. There was also a second CQC inspector who supported the inspection process.

Background to St Anthony's Health Centre

St Anthony's Health Centre is located in the Walker area of Newcastle Upon Tyne at:

St Anthony's Health Centre
St. Anthony's Road
Newcastle Upon Tyne
NE6 2NN

The provider is registered with CQC to deliver the Regulated Activities, diagnostic and screening procedures; family planning; maternity and midwifery services; and, treatment of disease, disorder or injury. The practice told us they planned to apply to add the regulated activity of surgical procedures.

The practice is situated within the North East and North Cumbria Integrated Care Board (ICB) area and delivers Personal Medical Services (PMS) to a patient population of about 6,600. This is part of a contract held with NHS England.

Information published by Public Health England shows that deprivation within the practice population group is in the most deprived decile (1 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 2.7% Asian, 92.3% White, 2.8% Black, 1.4% Mixed, and 0.8% Other.

The age distribution of the practice population shows there are more young people in the area (at 26.4%) than the average for England (19.8%). There are fewer old people (at 12.2%, England 17.8%) and people of working age ranges (at 61.5%, England 62.4%) than averages.

There are 4 GP partners, 2 salaried GPs, a nurse practitioner and a psychologist. The practice has 2 practice nurses who provide nurse led clinics for long-term conditions and 2 nursing assistants. The GPs are supported at the practice by a managing business partner and team of reception/administration staff. They were in the process of recruiting a new practice manager.

The practice is part of a wider network of GP practices covering Newcastle East, with 6 other GP practices, which is a wider network of GP practices to enable greater provision of proactive, personalised, coordinated and more integrated health and social care for people close to home. (Biddlestone Health Group; Heaton Road Surgery; Walker Medical Group; Benfield Park Medical Group; Newcastle Medical Centre; Thornfield Medical Group).

There is an extended urgent care service with access to a GP across the Newcastle area, with provision in emergency departments, walk-in centres and urgent care treatment centres. Patients can see GPs from 8am to 10pm Monday to Sunday, 365 days of the year. These appointments are a mix of walk-in appointments and re-referrals from 111 and emergency departments. This service was being reviewed at the time of the inspection.

Out of hours services are provided by Vocare Limited accessed via the 111 service.