

Woodside Surgery

Inspection report

High Street
Loftus
Saltburn By The Sea
TS13 4HW
Tel: 01287640385
www.woodsidesurgery.co.uk

Date of inspection visit: 29 September 2022
Date of publication: 04/11/2022

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 comprehensive inspection at Woodside Surgery on 29 September 2022. Overall, the practice is rated as good.

Safe - good

Effective - good

Caring - good

Responsive - good

Well-led - good

Following our previous inspection on 25 May 2021, the practice was rated as requires improvement overall and for the key questions of safe and well led, good for caring, effective and responsive. There had been significant improvements following our previous inspection on 24 September 2020, where the practice was rated as inadequate overall and for the key questions of providing safe, and well-led care, but requires improvement for providing effective, caring and responsive services.

At this inspection we found the provider had continued to sustain and deliver further improvement. Changes which were still in their infancy in May 2021 had become more embedded, and the practice had developed a safety and improvement culture.

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

Why we carried out this inspection

We carried out this inspection to follow up on breaches of regulation from a previous inspection, and in line with our inspection priorities due to the previous overall requires improvement rating.

We inspected all five key questions and followed up on a previous breach relating to safeguarding systems and processes.

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 site visit.
- Staff questionnaires.

Overall summary

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 found that:

- 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.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- 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.
- The practice was effective in proactively identifying carers
- The monitoring of high-risk medicines, processes for safety alerts and overall medicines' management was much improved. The provider had plans in place for identified areas for improvement.
- The provider and practice team had worked hard to bring about significant improvements in the governance and safety of the practice.

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

- Improve the prescribing rates of pregabalin, gabapentin and benzodiazepines.
- Ensure all staff receive their upcoming safeguarding training.
- Improve the way in which governance systems such as risk assessments and policies are kept under review
- Strengthen clinical audit programme to include a second cycle to monitor improvement to patient care and outcomes

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

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 Woodside Surgery

Woodside Surgery is located at:

High Street

Loftus

Saltburn By The Sea

TS13 4HW

Loftus is a semi-rural small coastal town with a deprivation decile score of two. (On a scale of one to ten, one is the most deprived and ten is the least deprived). The practice is in a purpose-built health centre, with all treatment rooms for patients based on the ground floor. Parking is available, and the practice is close to public transport. The practice offers services from a single site, in Loftus.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, treatment of disease, disorder or injury and surgical procedures.

Formerly situated within the Tees Valley Clinical Commissioning Group (CCG), the practice is now situated within the North East and North Cumbria Integrated Care System (ICS). This is a partnership of organisations including local councils, voluntary and community services that provide health and care across the region. The practice delivers General Medical Services (GMS) to a patient population of about 6118. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices, the East Cleveland primary care network (PCN). PCNs are partnerships of practices working together and with other local health and care providers.

The clinical team at the practice comprises two male General Practitioners (GPs), who are the partners. There are also two salaried GPs, male and female. In addition to the GPs there is a nurse practitioner and three practice nurses (one of whom has additional practitioner level duties), and a healthcare assistant. There is a practice manager and a team of administrators, receptionists and secretaries.

According to the latest available data, the ethnic make-up of the practice area is 99.2% White, 0.8% other. The age distribution of the practice population is broadly similar to local and national averages, although with a slightly higher proportion of older population, and slightly less of working age population.

The practice is open between 8 am to 8 pm Monday, 8am to 6pm Tuesday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by ELM Alliance, where late evening, earlier morning and weekend appointments are available. Out of hours services are provided by 111.