

# Eightlands Surgery

## Inspection report

Dewsbury Primary Care Centre  
Wellington Road  
Dewsbury  
West Yorkshire  
WF13 1HN  
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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?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at Eightlands Surgery on 6 November 2019. The inspection was carried out to review the progress the practice had made in response to breach of regulation which we had identified at our previous inspection in November 2018.

Our judgement of the quality of care at this service is based 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.**

In November 2018 we rated the practice as requires improvement overall.

The practice was rated as requires improvement for providing safe services. This was because:

- Systems for reporting, recording and learning from incidents, accidents and near misses were not operating effectively. At this inspection we found that these systems had been overhauled. We saw that staff knew how to raise and report issues, actions taken, and learning gained from such events were shared throughout the practice team.
- In November 2018, patient group directions (PGDs), allowing nurses to administer vaccinations and immunisations without the need for individual prescription, were not always appropriately authorised. At this inspection we found that appropriate authorisation was in place in all cases.

In November 2018 we rated the practice as requires improvement for providing well-led services. This was because:

- There were divisions at the senior leadership team level in the practice. This meant that a number of barriers to effective communication were in place, which resulted in a lack of cohesion in relation to delivering on the practice strategy. At this inspection we found that changes amongst the senior leadership team had been effectively implemented. We saw that communication within the practice had improved, and that all staff were engaged in the delivery of the practice's strategic objectives.

On this inspection we found that:

- Changes to the leadership team had resulted in the loss of one partner, and the addition of three further partners. The new leadership team provided a cohesive approach, with a clear vision and direction for the future of the practice.
- There were clearly defined systems to report, record, act upon, disseminate and learn from significant incidents.
- A range of quality improvement activity was carried out to continually monitor and improve care for patients.
- The practice had developed systems to record and act upon verbal as well as written complaints and compliments.
- A private circumcision service, carried out by one of the partners, had a comprehensive policy and set of protocols which ensured safe and effective procedures were carried out.
- The practice had worked alongside their patient group to evaluate and analyse patient experience in accessing appointments at the practice. They continued to review and evaluate patient experience and patient satisfaction. On the day of our inspection we saw that access to appointments was good, with not all available appointments being filled.
- We observed interactions between staff and patients, and received feedback from patients, which indicated people felt they were treated with dignity and respect.
- Staff were clear about governance processes and protocols. They told us the senior team was approachable, and they were clear about their own roles and responsibilities.

The areas where the provider should make improvements are:

# Overall summary

- Take steps to embed infection prevention and control (IPC) processes for the independent non-therapeutic circumcision service to continue to be included in practice IPC procedures.
- Continue to evaluate patient experience in relation to telephone access to the surgery.
- Continue to work to improve uptake of cervical screening.

**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

<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 Care Quality Commission (CQC) lead inspector. The team included a GP specialist advisor and a second CQC inspector.

## Background to Eightlands Surgery

Eightlands Surgery is located within Dewsbury Primary Care Centre, Wellington Road, Dewsbury WF13 1HN. Dewsbury Primary Care Centre also hosts another GP practice, as well as a number of community healthcare services. It is located approximately half a mile from Dewsbury town centre. Car parking is available on site, and the practice is accessible by public transport. The practice is situated on the first floor of the shared building. Lift access is available for those patients with mobility difficulties, and those using pushchairs or wheelchairs.

The practice delivers Personal Medical Services (PMS) to patients, in accordance with a locally agreed contract with NHS England.

The practice is registered with the Care Quality Commission to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Family planning
- Maternity and midwifery services
- Surgical procedures
- Diagnostic and screening procedures

There are currently 6,701 patients registered on the practice patient list. The Public Health General Practice Profile shows that approximately 29% of patients are of South Asian ethnicity, 2% are of mixed ethnicity, and the remainder are of white British or Irish origin.

The level of deprivation in the practice is rated as three, on a scale of one to ten. Level one represents the highest level of deprivation, and level ten the lowest.

The age/sex profile of the practice is in line with national averages. The average life expectancy for patients at the practice is 77 years for men and 82 years for women, compared to the national average of 79 years and 83 years respectively.

The clinical team is made up of four GP partners (all male), four regular locum GPs (two male and two female) and one locum advanced nurse practitioner (male). There are two practice nurses and one healthcare assistant, all of whom are female.

Non-clinical support is provided by a practice manager, a senior administrator and a team of administrative, secretarial and reception staff.

One of the GP partners carries out an additional, independent circumcision service from a minor surgery room within the same building, but separate from the practice premises. This is available on a fee- paying basis only, and is open to patients not registered at the practice for children under one year of age.

The practice is open between 8am and 6pm Monday to Friday. Extended hours are available on Monday between 6.30pm and 8pm, and Tuesday between 7.30am and 8am. Phlebotomy appointments are available Monday to Friday from 7.30am.

Further access to appointments is available through the extended access scheme, delivered from the same building between 6.30pm and 9.30pm Monday to Friday, and between 9am and 4pm on Saturday and between 9am and 1pm on Sunday and bank holidays.

The practice is part of a local primary care network (PCN) to collaborate on care for patients across the area: Ravensthorpe, Dewsbury and Mirfield PCN. The PCN is made up of six local practices, serving approximately 44,000 patients.

Out of hours care is provided by Local Care Direct, which is accessed by calling the practice telephone number, or by calling the NHS 111 service.

When we returned to the practice for this inspection we checked, and saw that the previously awarded ratings were displayed, as required, in the practice premises and on the practice website.