

Fronks Road Surgery

Inspection report

Cleveleys
77 Fronks Road
Harwich
CO12 3RS
Tel: 01255556868

Date of inspection visit: 05 September 2023
Date of publication: 06/12/2023

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?	Requires Improvement	

Overall summary

We carried out an announced comprehensive at Fronks Road Surgery on 05 September 2023. Overall, the practice is rated as good.

Safe – good.

Effective – good.

Caring – good.

Responsive – good.

Well-led – requires improvement.

Following our previous inspection on 01 August 2022, the practice was rated inadequate overall and for Safe, Effective, and Well-led key questions and Requires Improvement for Caring, and Responsive key questions.

At this inspection, we found significant improvements had been made through clear clinical and managerial leadership throughout the practice. The practice is now rated as requires improvement.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Fronks Road 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.

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.
- Staff questionnaires.

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:

- The clinical and managerial leadership team had engaged with the Integrated Care Board, and their primary care network (PCN) practices to develop a comprehensive action plan following the concerns and breaches found at the last inspection.
- The practice had implemented new systems, processes, and employed new staff to ensure services were delivered in a safe and effective way to patients. There had been a multi-organisational approach to regularly review and monitor all the actions and improvements as they were undertaken and completed.
- We found the practice provided care in a way that kept patients safe and protected them from avoidable harm.
- There was safe and effective management of medicines including storage and cold chain procedures demonstrated.
- There were appropriate infection control procedures in place, that were regularly monitored for assurance this was sustained.
- Staff recruitment procedures were appropriate, and training, competencies, and immunisation status recorded.
- Patients received effective care and treatment that met their needs.
- There were governance arrangements and processes for managing risks, including staff competency and performance.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Complaints were managed in a timely manner and learning shared with staff for improvement in the service and development.
- The way the practice was led and managed promoted the delivery of high-quality, patient-centred care.

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

- Continue to reduce the hypnotic and psychotropic medicines prescribed.
- Continue to encourage patients to attend their appointments for the national cervical cancer screening programme.
- Continue with the improvements to patient access to appointments.
- Continue with the improvements to the premises to mitigate health and safety risks and increase access.

I am taking this service out of special measures and the conditions that were imposed on the provider's registration will be removed. This recognises the significant improvements that have been made to the quality of care provided by this service.

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 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.

Background to Fronks Road Surgery

Fronks Road Surgery is located in Harwich at:

Cleveleys

77 Fronks Road

Harwich

Essex

CO12 3RS

The practice provides a dispensing service which we inspected and formed part of this inspection activity. The small dispensary provides dispensing services to approximately 45 patients.

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

The practice is situated within the NHS Suffolk and Northeast Essex Integrated Care Board (ICB) and delivers General Medical Services (GMS) to a patient population of about 4,800. This is part of a contract held with NHS England.

The practice is part of a primary care network (PCN) of six GP practices.

There are three GPs and an advanced paramedic practitioner working at the practice. The practice has a nursing team of five who provide nurse led clinics for long-term conditions and two dispensers. The GPs are supported at the practice by a team of reception/secretarial staff and a practice manager.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advanced bookable appointments. Extended access is provided by a practice locally in the PCN group, where late evening and weekend appointments are available. Out of hours services are provided by the 111 service East Lynne Medical Centre located in Clacton town centre.