

Coltishall Medical Practice

Inspection report

St John's Close
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Norwich
NR12 7HA
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Date of inspection visit: 05 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

Requires Improvement



Are services safe?

Requires Improvement



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 inspection at Coltishall Medical Practice on 5 May 2021. Overall, the practice is rated as Requires Improvement.

The key questions are rated as:

Are services safe? – Requires Improvement

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Requires Improvement

Following our previous focused inspection between 22 and 25 September 2020 the practice was rated Inadequate overall and for providing safe, effective and well-led services. We did not inspect caring or responsive services. As a result of our findings, we imposed urgent conditions on the practice.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Coltishall Medical Practice on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive review of information with a site visit.

The focus of the inspection included:

- Inspection of all key questions
- Follow up of breaches of regulations 12, Safe Care and Treatment and Regulation 17, Good Governance and areas where the provider ‘should’ improve identified in our previous inspection
- Assessment of how the provider had met the conditions imposed at our last inspection

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

Overall summary

- Requesting evidence from the provider
- A short site visit, including the dispensary.
- Gaining feedback from staff by using staff questionnaires
- Conducting patient interviews using video conferencing.

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 have rated this practice as Requires Improvement overall and good for all population groups.

We found that:

- Significant improvements had been made following our last inspection. The practice had improved systems to ensure patients had received appropriate follow up and monitoring of their health conditions and medicines needs.
- New partners and additional staff have been recruited to ensure sufficient staff were available to continue to make, monitor and sustain improvements.
- As a result of this additional staffing, a lead clinician had improved the safeguarding of adults and children.
- A lead nurse had implemented new systems and processes to ensure patients with long term conditions received a comprehensive review in a timely manner.
- 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.
- 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.

At this inspection we have rated the practice as Requires improvement for providing safe services because;

Although significant improvements had been made, some areas needed further improvement, embedding and sustaining.

- Not all staff had a DBS check or a risk assessment to mitigate any risks undertaken by the practice.
- Formal and written risk assessments had not been carried out to ensure safe storage and management of medicines within the dispensary.
- The practice did not always record the checks undertaken to ensure stocks of medicines were managed safely.
- Improvements were required to ensure the standard operating procedures within the dispensary were correct, acknowledged and staff practice was in line with them.
- The practice needed to further improve the identification, reporting and learning from events, however minor.

We have rated the practice as good for providing effective services.

We have rated the practice as good for providing caring services.

We have rated the practice as good for providing responsive services.

At this inspection we have rated the practice as requires improvement for providing well-led services because;

Overall summary

The practice had engaged with the findings of our last report, had worked with the CCG and an external team to identify the recovery plan, make the changes, monitor and ensure those improvements were sustainable. Additional partners had been recruited to strengthen the leadership capacity and relationships. Additional staff had been recruited and feedback from staff was positive about the changes and future. However;

- The new partnership needed time to evidence they had the capacity and capability to ensure the practice delivered consistently high-quality services to patients.
- We found further improvements were required in some of the practices' governance processes including the management of risks.
- We identified new risks in relation to the dispensary service which had not been part of our last inspection.
- Where improvements had been made the practice needed to ensure they are fully embedded, monitored and sustained.

We found a breach of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.

In addition, we found the provider **should**:

- Continue to monitor, develop and drive forward the improvement plan, ensuring regular monitoring of improvement to ensure they are safe and effective.

I am taking this service out of special measures and the conditions that were imposed on the practice 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 Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

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. In addition, a member of the CQC pharmacy team undertook a site visit.

Background to Coltishall Medical Practice

Coltishall Medical Practice is located at: St John's Close, Rectory Road, Coltishall, Norwich, Norfolk, NR12 7HA. There is a dispensary at the Coltishall site, and we inspected this as part of our inspection.

The practice has a branch surgery at: 20, St Peter's way, Spixworth, Norwich, Norfolk. NR10 3NS. This site was not visited as part of this inspection.

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 and surgical procedures. These are delivered from both sites.

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the NHS Norfolk & Waveney Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of approximately 8,787. This is part of a contract held with NHS England.

The practice has four GP partners (three male, one female), three salaried GPs (female) and one GP registrar (female). There is an advanced nurse practitioner, one lead nurse (nurse practitioner), two practice nurses, two health care assistants and a phlebotomist. The practice also employs a business manager, practice manager, an IT & Data Quality Manager, a reception manager, a dispensary manager and a team of reception, administration and dispensary staff as well as secretaries and medical summarisers and coders.

The practice main site at Coltishall is open from 8am to 6.30pm Monday to Friday. The branch site at Spixworth is open between 8am and 5pm Monday to Friday, closing every day between 1pm and 1.30pm for lunch. The dispensary opening hours are Monday to Friday from 8.30am and 6pm.

The practice was a training practice and has temporarily suspended the teaching of medical students. The practice also reduced their commitment to the training of GP trainees and currently has one GP trainee. This enabled the practice to ensure capacity to make the improvements that had been identified at our last inspection.

According to Public Health England, the patient population had a lower number of patients aged 0 to 40 and a higher number of patients aged 45 and over in comparison to the practice average across England. It had a higher proportion of patients aged 60 to 74 compared to the practice average across England. Income deprivation affecting children and older people was lower than the practice average in the area and across England.

Extended access is provided locally by North Norfolk Primary Care, where late evening and weekend appointments are available. Out of hours services are provided by Integrated Care 24.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Maternity and midwifery services	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• Not all staff had a DBS check or a risk assessment to mitigate any risks undertaken by the practice.• Formal risk assessments had not been carried out or documented to ensure safe storage and management of medicines within the dispensary.• The practice did not always record the checks undertaken to ensure stocks of medicines were managed safely.• The standard operating procedures within the dispensary were not all reflecting the correct practice and had not been acknowledged by staff.• The practice needed to further improve the identification, reporting and learning from events, however minor. We found not all events had been reported. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>