

The Derby Road Practice

Inspection report

52 Derby Road
Ipswich
IP3 8DN
Tel: 01473728121

Date of inspection visit: 29 September 2022
Date of publication: 19/12/2022

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?

Outstanding 

Overall summary

We carried out an announced comprehensive inspection at The Derby Road Practice on 29 September 2022.

Overall, the practice is rated as Good

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Outstanding

When this service registered with CQC, it inherited the regulatory history and ratings of its predecessor. This is the first inspection of The Derby Road Practice under the registered provider Suffolk Primary Care who became the provider from April 2020. Following our previous inspection under the predecessor, the practice was rated good overall. Suffolk Primary Care is a partnership of 9 GP surgeries covering a population of 115,000 patients across Suffolk. We inspected 8 of the 9 practices within a period of four weeks.

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

Why we carried out this inspection

We carried out this comprehensive inspection to provide a rating of the location under the new provider and in line with our inspection priorities.

This was a comprehensive inspection and therefore we have reported on safe, effective, caring, responsive and well-led services.

How we carried out the inspection

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

Overall summary

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.

Suffolk Primary Care is a partnership of 9 GP surgeries covering a population of 115,000 patients across Suffolk. There are 28 GP partners and around 500 staff working across the practices. Whilst each practice retains oversight of their demographics and patients' needs and priorities, there is a centralised head office which provides a single governance structure with clear engagement from all partners. There are key roles such as a management board consisting of a chair, medical directors, business director and finance directors. In addition, there are other teams such as an executive team with delegated decision-making authorisations, information governance and Information Technology (IT), human resources (HR), finance, research, estates, procurement, complaints and governance. There are clinical and administration teams who manage patient safety alerts and the quality audit programme. In addition, there are various manager and lead roles including head of operations, website management and business intelligence. Many of the centralised functions support the practices with surges of demand such as medicines management and background services such as patient recall for patients with long term conditions.

There are several functions that are centrally carried out by the provider (SPC) for the practices. These include maintenance of human resources (HR), estates and equipment, risk assessments and safety. Management of the various teams such as the pharmacy team which consisted of pharmacists and pharmacy technicians (some of these are also based in the individual practice) and physiotherapists. The provider and practice demonstrated clear and cohesive joint working and sharing of resources in particularly different staff skill mix including clinical and non-clinical staff.

Within the Suffolk Primary Care (SPC) organisation there were 10 approved GP trainers and a further 6 associate trainers. Across the practices there was support and teaching/supervision and oversight for the employed clinical staff such as non-medical prescribers as well as GP registrars, foundation year doctors and medical students.

We found;

- There was compassionate, inclusive and effective leadership at all levels. Leaders at all levels demonstrated the high levels of experience, capacity and capability needed to deliver excellent and sustainable care. There was a deeply embedded system of leadership development and succession planning, which aimed to ensure that the leadership was comprehensive and included successful leadership strategies to ensure and sustain delivery and to develop the desired culture. Leaders had a deep understanding of issues, challenges and priorities in their service, and beyond.
- The strategy and supporting objectives and plans were in place at provider level and at practice level. They were stretching, challenging and innovative, while remaining achievable.
- There was strong collaboration, team-working and support across all functions and a common focus on improving the quality and sustainability of care and people's experiences.
- Governance arrangements were proactively reviewed and reflected best practice. A systematic approach was taken to working with the other practices within the group, the local primary care network and the provider to improve care outcomes.
- There was a demonstrated commitment to best practice performance and risk management systems and processes. The provider and practice reviewed how they functioned and ensured that staff at all levels had the skills and knowledge to manage those systems and processes effectively. Problems were identified and addressed quickly and openly.

Overall summary

- The service invested in innovative and best practice information systems and processes. The information used in reporting, performance management and delivering quality care was consistently found to be accurate, valid, reliable, timely and relevant. There was a demonstrated commitment at all levels to sharing data and information proactively to drive and support internal decision making as well as system-wide working and improvement.
- There were consistently high levels of constructive engagement with staff and people who use services, including all equality groups.
- There was a fully embedded and systematic approach to improvement, which made consistent use of a recognised improvement methodology. Improvement was seen as the way to deal with performance issues and for the organisation to learn. Improvement methods and skills were available and used across the organisation, and staff were empowered to lead and deliver change.
- The provider had been informed they had been short listed for a national award given by the Health and Safety Journal in the patient safety category. The nomination was in relation to the significant work the provider and practice had undertaken in the monitoring and management of medicines, including patient safety alerts and high-risk medicines. They told us they were very proud of becoming a finalist and planned a celebration with the staff.

Whilst we found no breaches of regulations. The provider **should**:

- Continue to monitor and further improve the systems and processes in place for safe prescribing of medicines including those relating to medicine safety alerts.
- Continue to monitor the recovery of backlog improvement plan already in place so that patients requiring follow up or annual reviews are seen in a timely way. This should include improving the uptake of patients attending their cervical cancer screening programme.

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 and second CQC 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 The Derby Road Practice

The Derby Road Practice is located at:

52 Derby Road

Ipswich Suffolk

IP3 8DN

The practice has a branch surgery at:

Shepherd Drive

Ipswich

Suffolk

IP8 3SL

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

The practice is situated within the Suffolk and North East Essex Alliance and delivers Personal Medical Services (PMS) to a patient population of 18,139. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called East Suffolk Primary Care Network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the fifth lowest decile (5 out 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 3% Asian, 92% White, 2% Black, and 3% Mixed.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of 6 GPs who provide cover at both sites. The practice has a team of 8 nurses who provide nurse led clinics for long-term conditions at both the main and branch locations. The GPs are supported at the practice by a team of reception/administration staff. The practice manager and assistant practice manager are based at the main location to provide managerial oversight.

The practice is open between 8 am to 6.30 pm Monday 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 Pinewood Surgery, weekend appointments are also available. Out of hours services are provided by GP Suffolk Federation and accessed via the NHS 111 service.