

# Elizabeth Street Surgery

## Inspection report

61 Elizabeth Street  
Blackpool  
Lancashire  
FY1 3JG

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[www.elizabethstreetsurgery.nhs.uk](http://www.elizabethstreetsurgery.nhs.uk)

Date of inspection visit: 14 March 2019

Date of publication: 01/05/2019

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?

Requires improvement 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

**This practice is rated as Good overall.** (Previous rating July 2018 – Inadequate)

The key questions at this inspection are rated as:

Are services safe? – Good

Are services effective? – Requires improvement

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out a comprehensive inspection on 24 July 2018 when we found patients were at risk of harm because practice systems to manage risk had not been followed and the governance of the practice was inadequate. Practice systems and policies to safeguard vulnerable patients were not comprehensive. There were insufficient staff to provide a good level of service to patients and information coming into the practice was not managed safely. There was evidence some patient consultation records were not sufficient to ensure patient safe care and treatment and the management of staff training was not comprehensive. Communication with staff, patients and other services was lacking; care plans were not routinely shared for vulnerable patients. There was little evidence of quality improvement work by the practice to drive improvements in service. Some staff reported they did not feel supported or valued and team morale was low.

We rated the practice as inadequate overall and the practice was placed into special measures.

At the end of July 2018, the practice provider changed from a partnership of two GPs to an individual GP. The practice registration with CQC was formally changed to this new provider in February 2019.

At this inspection we found:

- The practice had developed their systems to manage risk so that safety incidents were less likely to happen. Staff used significant incidents to improve processes and we saw evidence they were shared with staff at regular meetings.
- The staffing of the practice had been addressed. Patient safety and safeguarding systems were comprehensive and staff were able to carry out their roles and responsibilities safely in relation to these systems.

- The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines. Quality improvement was embedded into practice.
- The quality of patient medical records was good enabling patient safe care and treatment.
- There was a new management overview of staff training and development. Staff training and development was supported with protected time and encouraged by managers.
- Staff involved and treated patients with compassion, kindness, dignity and respect.
- Patients found the appointment system easy to use and reported that they were able to access care when they needed it.
- Communications in the practice had been improved. Staff felt engaged in the running of the practice; they felt valued and supported and team morale was high.
- The governance of the practice had been strengthened and new systems and processes put in place to assure managers patient care and treatment was safe and effective.
- There was a strong focus on continuous learning and improvement at all levels of the organisation.

The areas where the provider **should** make improvements are:

- Continue to review records of vulnerable patients to allow for all family and household members to be identified.
- Continue to improve the uptake of childhood vaccinations and immunisations.
- Implement the new process to offer timely reviews for patients with a new diagnosis of cancer.

I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by this service.

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

**Please refer to the detailed report and the evidence tables for further information.**

## 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>Requires improvement</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Requires improvement</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 adviser and two other CQC inspectors for part of the visit.

## Background to Elizabeth Street Surgery

Elizabeth Street Surgery is based in a residential area close to Blackpool town centre at 61 Elizabeth Street, Blackpool, Lancashire, FY1 3JG. The practice website can be found at [www.elizabethstreetsurgery.nhs.uk](http://www.elizabethstreetsurgery.nhs.uk). There is limited onsite parking available and the practice is close to public transport. The surgery is housed in a purpose-built, two-storey building comprising of consulting and treatment rooms, administrative office space and two patient waiting areas. On the first floor there are facilities for minor surgery. The practice provides services to approximately 4,984 patients.

The practice provides level access to the building and is adapted to assist people with mobility problems. Patients can access the consulting rooms on the first floor by using the stairs and there is a lift for those patients who need it.

The practice is part of the NHS Blackpool Clinical Commissioning Group (CCG) and services are provided under a General Medical Services Contract (GMS). There is one male GP provider who is assisted by a part-time locum female GP and a further regular part-time male locum GP. The practice also employs two advanced nurse practitioners, two practice nurses, two health care assistants, who also work as administrators and a clinical pharmacist. Non-clinical staff consisting of a practice

manager, a business manager and five administrative and reception staff support the practice. One of the non-clinical team is also qualified as a healthcare assistant and will start work in this role following a period of observed practice. At the time of this inspection, the practice manager had been in post for approximately five weeks.

When the practice is closed, patients are able to access out of hours services offered locally by the provider Fylde Coast Medical Services by telephoning 111.

The practice patient population profile is similar to local and national profiles, with a slightly larger proportion of male patients aged between 25 and 35 years of age (8%) compared to local and national averages of 7%.

Information published by Public Health England rates the level of deprivation within the practice population group as one on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice caters for a higher proportion of patients experiencing a long-standing health condition (69% compared to the local average of 61% and national average of 54%). The proportion of patients who are in

paid work or full-time education is lower (54%) than the CCG average of 55% and the national average of 62% and unemployment figures are lower, 3% compared to the CCG average of 6% and the national average of 5%.

The practice provides family planning, maternity and midwifery services, surgical procedures, treatment of disease, disorder or injury and diagnostic and screening procedures as its regulated activities.