

# Leatside Health Centre

## Inspection report

The Manor Surgery  
Forth Noweth  
Redruth  
TR15 1AU  
Tel: 01209313313  
[www.leatsidehealthcentre.co.uk](http://www.leatsidehealthcentre.co.uk)

Date of inspection visit: 1 March 2022  
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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?

Requires Improvement 

Are services effective?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced inspection of Leatside Health Centre on 1 March 2022. Overall, the practice is rated as Good.

The key questions at this inspection are rated as:

Safe - Requires Improvement

Effective - Good

Well-led - Good

Leatside Health Centre is a newly registered practice following a merger in July 2021 of the Clinton Road Surgery and Manor Surgery. Our previous inspections of these two locations were carried out as follows;

Clinton Road Surgery November 2019 - rated Good

The Manor Surgery June 2016 - rated Good.

The full reports for previous inspections can be found by selecting the 'all reports' link for Clinton Road Surgery and Manor Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Cornwall. To understand the experience of GP Providers and people who use GP services, we asked a range of questions in relation to urgent and emergency care. The responses we received have been used to inform and support system wide feedback.

## How we carried out the inspection/review

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 facilities
- 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
- Requesting evidence from the provider
- A short site visit

## Our findings

We based our judgement of the quality of care at this service on a combination of:

# Overall summary

- 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**

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm, however we couldn't be assured this was maintained at all times as some annual reviews had not been completed.
- The practice systems for reviewing safety alerts was not always carried out effectively.
- All staff had undertaken mandatory training appropriate to their role.
- Recruitment files contained all relevant information.
- Prescription stationery was stored securely in line with NHS guidelines.
- The practice had made adjustments associated with the COVID-19 pandemic to ensure that patients were kept safe and protected from avoidable harm.
- The practice was able to demonstrate staff had the skills, knowledge and experience to carry out their roles. Staff members were appraised annually and received appropriate supervision and training.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care. The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- Staff we spoke with told us they felt supported by the management team and if they raised concerns these would be listened to and acted upon.
- The practice had an open and supportive culture, where there was a focus on improvement.

We found breach of Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment. The provider must make sure they are following up to date guidance and have processes in place and follow them to:

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

Also the provider should

- Continue to improve the service's cervical screening uptake rates.

**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

## 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 Leatside Health Centre

The Leatside Health Centre is located in Redruth at :

The Manor Surgery

Forth Noweth

Redruth

Cornwall

TR15 1AU

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.

The practice is situated within the Kernow Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 16,793. This is part of a contract held with NHS England.

Information published by Public Health England shows that deprivation within the practice population group is in the fourth lowest decile (two 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 98.5% White with the largest ethnic minority (0.6%) Asian. The age distribution of the practice population closely mirrors the local and national averages.

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	Regulation 12 CQC (Registration) Regulations 2009
Maternity and midwifery services	Statement of purpose
Surgical procedures	Regulation 12 HSCA (RA) Regulations 2014 Safe care and Treatment
Treatment of disease, disorder or injury	<p><b>How the regulation was not being met:</b></p> <p>Assessments of the risks to the health and safety of service users of receiving care or treatment were not being carried out. In particular:</p> <ul style="list-style-type: none"><li>• Some patients prescribed certain high-risk medicines were not receiving the appropriate monitoring, in line with national guidance, prior to prescribing.</li><li>• The practice did not have an embedded system in place for acting on safety alerts and continued monitoring of historic alerts.</li></ul> <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>