

# Lakeside Healthcare at Cedar House Surgery

## Inspection report

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Date of inspection visit: 28 November 2018  
Date of publication: 06/02/2019

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

Are services safe?	
Are services effective?	
Are services caring?	
Are services responsive?	
Are services well-led?	

# Overall summary

We carried out an announced comprehensive inspection at Lakeside Healthcare at Cedar House Surgery on 28 November 2018 as part of our inspection of the provider (Lakeside Healthcare Partnership). Our inspection team was led by a CQC inspector and included a GP and a nurse specialist advisor. The team also included a second CQC inspector.

Our judgement of the quality of care at this service is based 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.

## **I have rated this practice as good for safe, effective, caring and responsive (and good) overall because:**

- People were protected from avoidable harm and abuse and that legal requirements were met.
- At the time of the visit the GP records were not fully updated with all available monitoring information in relation to the management of patients on high risk medicines. However, the practice were able to demonstrate, once data had been updated, that prescribing for high risk medicine was safe.
- Patients had good outcomes because they received effective care and treatment that met their needs.
- Patients were supported, treated with dignity and respect and were involved as partners in their care.
- People's needs were met by the way in which services were organised and delivered.

We rated the practice as **requires improvement** for providing well-led services because:

- The leadership, governance and culture of the practice promoted the delivery of high quality person-centred care. However, the system or process for the management of high risk medicines with appropriate monitoring and clinical review prior to prescribing required improvement.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- Establish effective systems and processes (in relation to the management of patients on high risk medicines) to ensure good governance in accordance with the fundamental standards of care.

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

- Ensure emergency medicines are kept secure
- Consider a formal process to document quality assurance process for the clinical practice of the advanced nurse practitioners and the paramedic.
- Continue to improve the identification of carers to enable this group of patients to access the care and support they require.
- **Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**
- **Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

## Population group ratings

Older people	Good	
People with long-term conditions	Requires improvement	
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. The team included a GP specialist adviser, a practice nurse specialist adviser who was shadowing the team and a second CQC inspector.

## Background to Lakeside Healthcare at Cedar House Surgery

Lakeside Healthcare at Cedar House Surgery is situated in St Neots, Cambridgeshire, just off the main high street. The practice has a primary medical services (PMS) contract with the NHS. There is a branch site approximately two miles away and there are approximately 13,000 patients registered at the practice. Patients can choose to be seen at either location. We did not visit the branch site as part of this inspection.

The practice was known as Cedar House Surgery until recently where it had joined a new provider (Lakeside Healthcare Partnership). We therefore inspected this site as part of our inspection of the provider.

The practice has three partner GPs, (two male, one female) and five salaried GPs (all female). One of the GP partner was on long term leave and they were being covered by another GP partner from a nearby practice (Eaton Socon) that was part of the same provider. All partner GPs have lead responsibilities and management roles. The practice also teaches medical students. There are two advance nurse practitioners (known by the practice as consultant nurses), five practice nurses, and four health care assistants. There was a hub manager and a team of administration staff including front line staff (patient care advisors), secretaries and a prescribing clerk.

The surgery is open Monday to Friday between 8am and 6pm; there is an extended surgery until 8.30 pm on weekdays. Hub working arrangements were in place to offer extended opening for Saturdays (8am to 1pm) and Sundays (8.30am to 12.30pm). Out of hours services are provided by Herts Urgent Care via the 111 service.

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. These are delivered from both sites.

The practice patient age profile was similar to the national average with the life expectancy of patients above the national average. The male life expectancy was 80 years compared to the national average of 79 years. The female life expectancy was 85 years compared to the national average of 83 years.

Based on data available from Public Health England, the levels of deprivation in the area served by the practice showed the practice is located in a less deprived area than national averages, ranked at eight out of 10, with 10 being the least deprived. (Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial).

The practice was previously inspected in November 2017 and rated overall good.

This section is primarily information for the provider

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	