

Alexandra Road Surgery

Inspection report

Alexandra Road
Lowestoft
NR32 1PL
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www.alexandracrestviewsurgeries.co.uk

Date of inspection visit: 8 July 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?	Requires Improvement 
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 inspection at Alexandra Road Surgery on 8 July 2021. Overall, the practice is rated as Requires Improvement.

The ratings for each key question are:

Safe - Requires Improvement

Effective - Requires Improvement

Caring - Good

Responsive - Good

Well-led - Requires Improvement

Following our previous inspection on 20 August 2019, the provider was rated Requires Improvement overall. We rated the provider as Inadequate for providing responsive services, and requires improvement for providing effective, caring and well-led services. We rated the provider as good for providing safe services.

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

Why we carried out this inspection

This inspection was a comprehensive follow-up inspection:

- We inspected the Safe, Effective Caring, Responsive and Well-led key questions.
- We followed up on breaches of regulations identified at our previous inspection to ensure the required action had been taken.

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 data protection and information governance requirements.

This included:

- Conducting staff interviews using staff questionnaires
- 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, other stakeholders and people who use the service
- A site visit.

Overall summary

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 for the population groups families, children and young people, and working age people. The population group people with long term conditions is rated Inadequate. The population groups older people, people whose circumstances make them vulnerable and people experiencing poor mental health (including people with dementia) are rated as Good.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm, however the provider is required to improve the way high risk medicines and other medicines requiring monitoring are managed.
- Patients did not always receive effective care and treatment that met their needs, especially people with long term conditions.
- 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.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care, however improvements were required in order to ensure high-quality, person-centred care was delivered.

We found breaches of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

There were other areas the provider could improve and **should**:

- Continue to review and improve consistency in recording do not attempt cardiopulmonary resuscitation (DNACPR) decisions.
- Continue to improve staff communication and engagement.
- Continue to monitor and take action on long standing medicines safety alerts.
- Continue to monitor and reduce where appropriate, prescribing rates for Gabapentin and Pregabalin and multiple psychotropic medicines.

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	Inadequate 
Families, children and young people	Requires Improvement 
Working age people (including those recently retired and students)	Requires Improvement 
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 and included a GP specialist advisor.

Background to Alexandra Road Surgery

- The name of the registered provider is Alexandra Road Surgery. The service operates from two sites; Alexandra Road Surgery, Alexandra Road, Lowestoft, Suffolk, NR32 1PL and Crestview Medical Centre, 141 Crestview Drive, Lowestoft, Suffolk, NR32 4TW.
- The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, family planning, surgical procedures, maternity and midwifery services and treatment of disease, disorder or injury.
- Alexandra Road Surgery is situated within the Great Yarmouth and Waveney Clinical Commissioning Group (CCG) and provides services to 15,000 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.
- The website for the practice is <http://www.alexandracrestviewsurgeries.co.uk/>
- The practice clinical team consists of two GP partners (both male), three salaried GPs (two male, one female), long term locum GPs, four nurse practitioners, five practice nurses, a paramedic, six healthcare assistants, two phlebotomists and a clinical pharmacy team of five. The practice non-clinical team is led by a practice manager supported by a deputy practice manager, three department managers and a team of 29 administrative staff.
- The practice is a teaching practice for medical students.
- The practice is open from 8am to 6.30pm Monday to Friday. The practice is able to offer extended hours appointments on Monday, Thursday and Friday evenings and additional appointments through a local improved access scheme, however the scheme is suspended during the COVID-19 pandemic.
- When the practice was closed patients were directed to access out of hours services via NHS 111.
- The most recent data available from Public Health England showed the practice has a lower than average number of patients aged between 24 to 44 and a higher than average number of patients aged between 65 and 84. Income deprivation affecting children and older people is higher than the CCG and national average. Life expectancy for patients at the practice is comparable to the national average.

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

Diagnostic and screening procedures
Family planning services
Maternity and midwifery services
Treatment of disease, disorder or injury

Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

- The provider did not ensure the proper and safe management of medicines.
- Monitoring of patients prescribed high risk medicines and other medicines requiring specific monitoring was not always undertaken and was not always in line with current prescribing guidelines.

This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity

Diagnostic and screening procedures
Family planning services
Maternity and midwifery services
Treatment of disease, disorder or injury

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

Systems and processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided were not always effective. In particular:

- The service had not sufficiently improved the quality of care provided to people with long term conditions, including people with Diabetes.
- Patients with a potential missed diagnosis of diabetes had not been identified.
- Uptake rates for the cervical screening programme were significantly below the national target.
- Personalised Care Adjustment rates were higher than local and national averages.
- Childhood immunisation rates were below the national target rate in all indicators.

This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.