

Bury Road Surgery

Inspection report

Gosport War Memorial Hospital
Bury Road
Gosport
Hampshire
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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?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We previously carried out an announced comprehensive inspection at Bury Road Surgery on 23 November 2018 as part of our inspection programme. The practice was rated as requires improvement for safe, effective and well-led, and for the six population groups; older people, people with long term conditions; families, children and young people; working age people whose circumstances may make them vulnerable and people experiencing poor mental health. This meant the practice was rated requires improvement overall. We issued requirement notices for Regulation 12: Safe care and treatment and for Regulation 17: Good governance.

This inspection on 8 January 2020 was an announced comprehensive inspection to follow up on the breaches of regulation and as part of our inspection schedule where services rated as requires improvement are subject to re-inspection within 12 months.

This inspection looked at the following key questions:

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

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**. We rated the practice as good for effective, caring and responsive and good for all population groups apart from the group of patients with long-term conditions, which we have rated requires improvement. We have continued to rate the practice as requires improvement for providing both safe and well-led services.

We rated the practice as **requires improvement** for providing safe services because:

- The recruitment process did not define the safety checks required before employing new staff, including role-specific safety checks.
- There was not a system for checking all staff were up to date with their routine immunisations.

- There were gaps in the process for checking safe prescribing of high risk medicines and the process had not been formally defined.

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

- Governance systems had not identified where there were gaps in assurance or areas for improvement. There was a lack of oversight of staff training and policy management.
- Key risks to the organisation had not been identified, managed and reviewed to understand and to promote quality and safety. For example, in response to changes planned for the service, issues with the estate and potential capacity issues from changes in local service provision.

We rated the practice as **good** for providing effective, caring and responsive services because:

- Patient needs were assessed and their care and treatment was based on evidence-based guidance.
- The practice addressed areas where outcomes for patients were below the national average, and worked cooperatively with other organisations involved in patient care.
- Staff were supported to gain additional skills and qualifications.
- 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.

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

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

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

- The provider should implement strategies to increase the uptake in cervical screening.
- The provider should continue to take forward actions identified at the recent fire risk assessment.

Overall summary

- The provider should consider improvements in recording discussions and decisions in meeting minutes.
- There should be guidance on how to make a complaint more readily available for patients.
- The practice should make information about support groups readily available to patients and visitors.
- The practice should have information available in different formats and languages.

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	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 inspector. The team included a GP specialist advisor and a second CQC inspector

Background to Bury Road Surgery

The provider for Bury Road Surgery is Dr Carl Wyndham Robin William Anandan, who is the sole partner at this practice. The practice is purpose built and based within Gosport War Memorial Hospital and has approximately 4,283 patients on its register. The practice is registered to provide the following regulated activities: treatment of disease, disorder or injury; surgical procedures; maternity and midwifery services and diagnostic and screening procedures.

The practice operates from one registered location:

Gosport War Memorial Hospital, Bury Road, Gosport, Hampshire, PO12 3PW

The practice population is in the sixth decile for deprivation, where 1 represents the most deprived. The practice population is 96.6% ethnically white British, with a higher proportion of older patients and lower

proportion of patients under 18 years of age, compared with the national average. A higher proportion of its patient population smoke and have a long-standing health condition.

The practice has one principal GP, one salaried GP, and two regular locum GPs. There are two advanced nurse practitioners, two practice nurses, and a healthcare assistant. The practice also has teams of administration and reception staff, and the practice manager is supported by an assistant practice manager.

The practice is open on Mondays from 8.30am to 7.30pm and Tuesdays to Fridays from 8.30am to 6.30pm. Telephone lines are open from 8am. Out of hours services are provided from 6:30 pm to 8pm Monday to Friday as well as 8am to 4.30pm. on Saturdays and Sundays. Patients can access the OOH service via the NHS 111 number.

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 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 requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met...</p> <p>Care and treatment must be provided in a safe way for service users.</p> <p>In particular</p> <ul style="list-style-type: none">• There were gaps in the process for checking safe prescribing of high-risk medicines.• The recruitment process did not define the safety checks required for new staff.• There was not a system for checking staff were up to date with their routine immunisations. <p>Regulation 12(1)</p>
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met...</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (regulation Activities) Regulations 2014.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• Arrangements for identifying, recording and managing risks, issues and implementing mitigating actions were not operated effectively.• There were gaps in systems for managing policies.• There were no systems for monitoring staff training.

This section is primarily information for the provider

Requirement notices

- The outcomes for patients with long term conditions were below national and local levels.

Regulation 17(1)