

The Centre Surgery

Inspection report

29 Hill Street

Hinckley

LE10 1DS

Tel:

www.thecentresurgery.co.uk

Date of inspection visit: 4 Mar 2022 9 Mar 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

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Overall summary

We carried out an announced focussed inspection at The Centre Surgery on 4th and 9th March 2022 to review compliance with a warning notice which was issued following our previous inspection in January 2022.

In January 2022, the practice was rated as inadequate overall and also for the key questions of safe and effective. The practice was placed into special measures. This inspection on 4 and 9 March 2022 was undertaken to review compliance with the warning notices which had to be met by 28 February 2022, but the inspection was not rated. The ratings from January 2022 therefore still apply and will be reviewed via a further inspection to take place within the next six months.

The key questions are rated as:

Safe - Inadequate

Effective - Inadequate

Caring - Good

Responsive - Good

Well-led – Requires Improvement

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

Why we carried out this inspection.

This inspection was a focused inspection to follow up on the warning notice issued in respect of breach of regulation 12 (safe care and treatment).

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, considering 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
- 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

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 not rated this practice as the rating remains unchanged until we have completed a further inspection incorporating all relevant key questions.

However, we found that action had been taken to address the breaches identified in the warning notice and it was evident that improvements had been made.

- We found no evidence of undiagnosed conditions in patients we reviewed.
- Patients with long term conditions were being managed appropriately in line with national guidance.
- DNACPR records were completed and recorded for patients.
- The practice had a system in place to deal with incoming test results and correspondence.
- There was a system for clinical oversight of non medical prescribers however it had yet to be embedded due to no non-medical prescribers currently working within the practice.

However, we found that some areas required actions were ongoing and were not yet fully completed or embedded.

- We saw that most medicines were being monitored in line with national guidance, however some medicines still required some monitoring to be completed more frequently in line with national guidance.
- The practice had not reviewed historical safety alerts to identify if any patients were potentially at risk of harm.
- Medication reviews had been completed for patients who took multiple medicines, however they did not always contain detail of which medicines had been reviewed.

As a result, the areas where the provider **must** make improvements are:

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

Whilst we found no breaches of regulations, the provider **should**:

- Continue to implement a system in relation to clinical oversight of prescribers within the practice.

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. 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 The Centre Surgery

The Centre Surgery is located in Hinckley at:

29 Hill Street,

Hinckley

LE10 1DS

The provider, Hinckley & Bosworth Medical Alliance Limited, is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury.

The practice is situated within the Leicester and Leicestershire Clinical Commissioning Group (CCG) and delivers Alternative Provider Medical Services (APMS) services to a patient population of about 5,500. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices as a Primary Care Network (PCN) known as Hinckley Central which is a group of four practices in Hinckley.

Information published by Public Health England shows that deprivation within the practice population group is in the seventh lowest decile (seven 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 96% White, 2% Asian and 1% mixed.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of two salaried GPs and an Advanced Nurse Practitioner (ANP). The practice has a team of two nurses, one healthcare assistant, a practice manager and a team of reception/administration staff.

Due to the enhanced measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If a clinician needs to see a patient face-to-face then the patient is offered an appointment.

Extended access is provided locally by the PCN with appointments held at The Centre Surgery, where Saturday morning appointments are available. Out of hours services are provided by DHU where patients can access services by phoning NHS 111.

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 Statement of purpose <ul style="list-style-type: none">• Ensure that medication reviews being completed contain detail around which medicines had been reviewed.• Ensure that historical safety alerts are reviewed and patients who are potentially at risk are identified and acted upon if necessary.• Ensure that monitoring of medicines are completed for those which require it.
Family planning services	
Maternity and midwifery services	
Treatment of disease, disorder or injury	