

# Highcroft Surgery

## Inspection report

Arnold Health Centre  
High Street, Arnold  
Nottingham  
Nottinghamshire  
NG5 7BQ  
Tel: 01158832330  
[www.highcroftsurgery.co.uk](http://www.highcroftsurgery.co.uk)

Date of inspection visit: 8 August 2018  
Date of publication: 03/10/2018

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 responsive?

Good



# Overall summary

We carried out an announced comprehensive inspection at Highcroft Surgery on 16 March 2016. Overall the rating for the practice was requires improvement and the practice was asked to provide us with an action plan to address the areas for improvements. A second announced comprehensive inspection was carried out on 3 November 2016 in order to review progress made by the practice. The practice was given an overall rating of good, with a rating of requires improvement for providing responsive services.

We carried out a third comprehensive inspection on 2 August 2017, which was announced at short notice to assess the areas previously highlighted as requiring improvement and respond to concerns reported by stakeholders about access to the service. During the inspection on August 2017, the practice was given an overall rating of good, with a rating of requires improvement for providing responsive services. The previous inspection reports can be found by selecting the 'all reports' link for Highcroft Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced follow up inspection carried out on 8 August 2018. This was to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations identified at the previous inspection. This report covers our findings in relation to those requirements.

## Our key findings were as follows:

- The practice had taken action to improve patient satisfaction in relation to accessibility and monitored this through surveys and audits

- Feedback from patients and data reviewed showed improvements were being achieved to the appointment system, waiting times and getting through to the practice by telephone.
- However, access to appointments was an ongoing issue and further plans were in place to increase availability by recruitment and collaborative working with local practices as part of a GP federation.
- We identified that the practice took appropriate action to information received from the Medicines and Healthcare Regulatory Agency (MHRA). However, the practices process for documenting this was not appropriate to demonstrate this. We told the provider that they should improve the process.

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

- Ensure the recording of alerts received from the Medicines and Healthcare Regulatory Agency (MHRA) clearly reflects the actions taken and the outcomes achieved.
- Continue acting to improve patient satisfaction in relation to access to appointments.

**Professor Steve Field** CBE FRCP FFPH FRCGP Chief Inspector of General Practice

**Please refer to the detailed report and the evidence tables for further information.**

## Population group ratings

## Our inspection team

Our inspection was undertaken by a Care Quality Commission (CQC) lead inspector and a second CQC inspector.

## Background to Highcroft Surgery

Highcroft Surgery is situated in Arnold in the Gedling borough to the north-east of the city of Nottingham. The practice is sited on the first floor within a new purpose-built premises constructed in 2013, and is co-located with 21 other community based health care services and clinics. The building also incorporates an independent pharmacy.

The practice provides primary care medical services via a Primary Medical Services (PMS) contract commissioned by NHS England and Nottingham North & East Clinical Commissioning Group (CCG).

The practice is run by a partnership of three GPs (two male and one female). The partners also employ two salaried GPs and one long term locum GP. One of the partners is the Registered Manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The practice has one advanced nurse practitioner and two practice nurses. The nursing team is supported by

three health care assistants. The clinical team is supported by a full-time practice manager, estates manager and a team of administrative, secretarial and reception staff, including apprentices. The practice employs three cleaning staff and a caretaker.

The registered practice population of around 12,000 patients are predominantly of white British ethnicity, and are ranked in the fourth least deprived decile. The practice age profile is broadly in line with local and national averages, but has slightly higher percentages of patients aged 65 and over.

The practice is a training practice for GP registrars (qualified doctors who are gaining experience of general practice) and also supports medical students as part of their placement within general practice. There was one GP registrar working at the practice at the time of our inspection.

The practice has opted out of providing out-of-hours services to its own patients. When the practice is closed patients are directed to the out of hour's provider via the 111 service. Patients could also access the NHS Urgent Care Centre in Nottingham, which opens daily from 7am-9pm.

# Are services responsive to people's needs?

We previously carried out an announced comprehensive inspection at Highcroft Surgery on 2 August 2017. At the time the practice was rated as requires improvement for providing responsive services as the results from the published national GP patient survey highlighted that some responses were below local and national averages in relation to access. Although we found that the practice had made some changes to improve access, at the point of our inspection, the practice was unable to demonstrate sustained improvement and increased satisfaction in this area. During this inspection, we rated the practice as good for providing responsive services because action had been taken to address areas of low satisfaction and feedback identified that patient satisfaction was improving.

## **Timely access to care and treatment**

The practice had responded to the results of the last national GP survey published in July 2017 and previous CQC inspections. The main areas identified for patient dissatisfaction related to access to appointments and getting through to the practice by telephone. The practice had taken a number of actions to increase accessibility for patients. This enabled patients to access care and treatment within an acceptable timescale for their needs. For example,

- The practice had implemented a same day service known as the 'Sit and Wait' clinic where patients could be seen without an appointment. The practice had reviewed the impact this had and found it was viewed positively by patients and had a high uptake. This was aligned with feedback that we received from patients as well as NHS choices and the practices internal survey.
- Patients reported that general routine and urgent appointments were easy to access.

- More patients were able to get through to the practice by telephone in a timely manner and this was supported by recent data provided by the practice.
- Waiting times, delays and cancellations were monitored and managed appropriately through data collection and auditing.
- Patients told us that any delays in accessing appointments and waiting times on arrival were mostly due to patients wanting to see a preferred GP or that patients with urgent need were prioritised. Patients found these delays acceptable and stated that when they were seen they felt their care and treatment needs were met.
- We looked at the 2018 national GP survey results which was published following our inspection although, we did not make a direct comparison to the previous survey or comparison with the local or national averages. This was due to a change in the survey methodology in 2018. However, the overall feedback received from patients demonstrated that patients experience of accessing the service had improved.
- Following the inspection the practice had analysed the results in brief and noted improvements in patients getting through to the practice by telephone and the length of time patients waited on arrival to be seen. This was aligned with evidence from the inspection. However, access remained an area for improvement based on the results of the 2018 survey.
- The practice had a proactive PPG and worked collaboratively with them to improve the service for the benefit of patients.

**Please refer to the evidence tables for further information.**