

New Longton Surgery

Inspection report

2 Churchside
New Longton
Preston
Lancashire
PR4 4LU

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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

Good



Are services safe?

Requires improvement



Are services effective?

Good



Are services caring?

Outstanding



Are services responsive?

Good



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at New Longton Surgery on 11 February 2020. The service had been inspected previously under a different provider. The new provider was registered in January 2018 and this was the first inspection of this service under the new registration.

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 good overall and good for all the population groups.

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

- Patients received effective care and treatment that met their needs.
- The practice organised and delivered services to meet patients' needs. 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.

We rated the practice as **outstanding** for providing caring services because:

- Feedback from patients was consistently positive and was higher than local and national averages. Patients told us care exceeded their expectations.

- There was a strong person-centred culture. Staff told us they were motivated to provide best possible care.
- Staff knew patients well and were sensitive to their needs. They went out of their way to offer care and support.

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

- There were gaps in safety systems and processes.

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

- Ensure that care and treatment is provided in a safe way.

(Please see the specific details on action required at the end of this report).

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

- Record an action plan to support the improvements undertaken from infection prevention and control audits.
- Introduce an ongoing formal GP audit of items removed from the post by non-clinical staff without sight of a GP.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good	
People with long-term conditions	Good	
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 advisor.

Background to New Longton Surgery

New Longton Surgery is a small practice in the residential area of New Longton, on the outskirts of Preston, situated at 2 Churchside, New Longton, Preston, PR4 4LU. There are good transport links with the practice and there is a pharmacy situated nearby.

The surgery is situated within the NHS Chorley and South Ribble Clinical Commissioning Group (CCG) and provides services to approximately 1,877 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and the CCG for delivering services to the local community.

The provider is a single-handed female GP who registered with the CQC in January 2018. The practice employs a female salaried GP and one regular female locum GP, a practice nurse, a practice manager and four additional administration staff. The practice is part of the Ribble Medical Group network of GP practices.

The patient population of the practice contains a higher proportion of older people than is the average across England; 30% are aged over 65 years, compared to the national average of 17%, and 14% are aged over 75 years compared to the national average of 8%. Conversely, there are a lower proportion of younger patients in the

practice population; 4% are aged between 0 and 4 years compared to the national average of 6%, and 9% are aged between 5 and 14 compared to the national average of 12%.

Information published by Public Health England rates the level of deprivation within the practice population group as ten on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The proportion of the practice's patient population who are unemployed is 4%, the same as the national average. The practice population has a slightly higher proportion of patients suffering with a long-standing health condition than is the average

nationally; 53% compared to 51%.

When the practice is closed, patients are able to access out of hours services offered locally by

the provider GotoDoc.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

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 Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment Care and treatment must be provided in a safe way for service users. How the regulation was not being met: The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular: • There was sometimes a lack of security for staff files; one file had been mislaid and the practice could therefore not demonstrate compliance with the necessary regulations. • There were some gaps in premises risk assessments and risk management; there were no records of staff fire drills, alarm testing or fire safety policy in place. There was no electrical safety certificate for the building and legionella water testing was out of date. There were no documented new staff confidential health questionnaires to ensure working conditions were suitable and no records of the management overview of staff vaccination and immunisation status, clinical staff membership of professional bodies and clinical staff training. • The provider did not have effective arrangements in place for the monitoring and security of all computer prescription paper and some medicines held in the practice were not monitored effectively. This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.