

Lockfield Surgery

Inspection report

Croft Street
Willenhall
WV13 2DR
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www.lockfieldsurgery.co.uk

Date of inspection visit: 29 March 2022
Date of publication: 27/05/2022

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



Are services well-led?

Inspected but not rated



Overall summary

We carried out an announced comprehensive inspection at Lockfield Surgery on 29 November 2021. Overall, the practice was rated as inadequate. This rating will remain unchanged until we undertake a further full comprehensive inspection within six months of the publication date of the initial report. Following the inspection, we took enforcement actions against the provider and issued a warning notice for breaches of Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014, Safe care and treatment.

The full comprehensive report on the November 2021 inspection can be found by selecting the 'all reports' link for Lockfield Surgery on our website at www.cqc.org.uk.

Why we carried out this inspection

This inspection was an announced focused inspection carried out on **29 March 2022** and included a site visit to :

- Confirm that the practice had carried out their plan to meet the legal requirements in relation to the warning notices issued.
- This report only covers our findings in relation to those requirements.

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 with the aim 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.
- Requesting evidence from the provider.
- A short site visit.

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 found that:

- The practice had taken the action needed to comply with the legal requirements of the warning notice we issued.
- There were improvements to systems and processes to assess, monitor and manage risks to patient safety, including recruitment, fire, infection prevention and control and safeguarding.

Overall summary

- The practice had taken action to improve oversight of care records and clinical data to address gaps and inconsistencies identified at the last inspection.
- Reliable systems were in place for the appropriate and safe use of medicines. This included the monitoring of patients on high-risk medicines and those with long term conditions. There were structured plans in place to ensure that all outstanding patients were reviewed and the practice was prioritising patients based on risk.
- Patients with long term conditions were monitored and reviewed. The practice was proactive in following up and responding to patients who did not attend.
- The practice had developed a comprehensive quality assurance system to assess the quality and safety of the service.
- Leaders had developed capacity and skills with a commitment to deliver high quality, sustainable care.
- The provider had improved the system used to assess and monitor the governance arrangements..
- A review and risk assessment of the premises had been completed with plans in progress to ensure necessary repairs and upgrades were completed.
- An induction loop system was available at the practice to support patients with a hearing impairment.
- Information about how to complain was available on the practice website and final responses to complaints included details of action to take if the patient was not happy with the findings.

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

- Continue to take action to review all outstanding patients in receipt of high-risk medicines to be able to demonstrate appropriate monitoring is in place.
- Continue to take action to review all outstanding patients due a structured medicine review.
- Review the systems and processes to keep clinicians up to date with current evidence-based practice to be able to demonstrate that changes in guidelines are consistently reflected in care and treatment.

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 undertook a site visit. 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 Lockfield Surgery

Lockfield Surgery is located in Walsall at:

Croft Street

Willenhall

Walsall

WV13 2DR

The practice is situated within the Walsall Clinical Commissioning Group (CCG) and delivers Alternative Provider Medical Services (APMS) to a patient population of about 10,200. This is part of a General Medical Services (GMS) contract with NHS England. The practice provides minor surgical procedures for its own patients and patients registered at practices in the Primary Care Network (PCN)

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

Information published by Public Health England rates the level of deprivation within the practice population group as two on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. According to the latest available data, the ethnic make-up of the practice area is 79% White, 11% Asian with the remaining patients of Black, Mixed, and other ethnicity.

The practice is a training practice and employs GP registrars. A GP registrar is a fully qualified and registered doctor who is completing further training to become a GP.

The staffing consists of a team of four GPs (three female and one male) which includes the lead GP also the individual provider and three salaried GPs, each working between four and nine sessions a week. There are also two locum GP's (male) who undertake regular sessions at the practice. The clinical team includes seven nurses two of whom are nurse prescribers, one clinical pharmacist and an advance clinical practitioner. There are two health care assistants who also undertake phlebotomy (taking of blood). The administrative team includes a business manager operations manager and a team of administrative staff. As part of joint working within the Primary Care Network, shared staff included additional clinical pharmacists, nurses and a social prescriber.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone, video and online consultations. Patients were offered face-to-face appointments following triage.

The practice is open Monday and Tuesday from 8.30am to 6.30pm, Wednesday 7am to 1pm, Thursday 7am to 6pm and Friday 8am to 4pm. When the practice is closed during core hours appointments are provided by a GP service contracted by the practice. During out of hours patients are directed to the out of hours provider via the NHS 111 service.