

The Village Surgery

Inspection report

283 High Street **London Colney** St. Albans AL2 1EU Tel: 01727 855160 http://www.lattimoresurgery.co.uk/

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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?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Requires improvement	

Overall summary

We carried out an announced comprehensive inspection at The Village Surgery on 11 February 2020 as part of our inspection programme.

This inspection looked at the following key questions:

Safe, Effective, Caring, Responsive and 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 all population groups as requires improvement overall because of the issues identified in the effective domain.

We rated safe as requires improvement because:

• Systems for the appropriate and safe use of medicines and for managing safety alerts needed strengthening.

We rated effective as requires improvement because:

 Clinical outcomes for some long-term conditions were lower than expected compared to CCG and England averages.

We rated caring and responsive as good because:

- 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.

We rated well led as requires improvement because:

 Assurance systems related to medicine management, management of safety alerts, effective clinical needs assessment care and treatment needed a review, as only limited performance information was currently available in order to highlight performance issues and deliver positive patient outcomes.

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

• Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

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

- Act to complete the actions highlighted in the fire risk assessment of 6 February 2020.
- Act to ensure the building plans for the new practice premises are completed as scheduled so the space constraints of the current location are resolved in a timely way.
- Act to achieve the 95% WHO based target for childhood immunisations.
- Act to achieve the cervical cancer screening 80% national programme coverage measure set by Public Health England.

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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	Requires improvement	
Working age people (including those recently retired and students)	Requires improvement	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Requires improvement	

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a practice manager specialist advisor.

Background to The Village Surgery

The Village Surgery situated at 283 High Street, London Colney, St. Albans, Hertfordshire, AL2 1EU, is a GP practice which provides primary medical care for approximately 8,887 patients living in London Colney and surrounding areas.

The Village Surgery provides primary care services to local communities under a General Medical Services (GMS) contract, which is a nationally agreed contract between general practices and NHS England. The practice population is predominantly white British along with larger ethnic population of Asian, and smaller populations of Afro Caribbean, mixed race and Eastern European origin. Information published by Public Health England, rates the level of deprivation within the practice population group as nine on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

During May 2018, the practice moved their entire team to their branch situated at 283 High Street, London Colney, St. Albans, Hertfordshire, AL2 1EU as the lease for their previous premises at 1 Upton Avenue, St. Albans,

Hertfordshire, AL3 5ER had expired. The current premises are very compact with limited facilities. We were advised the situation was an interim measure, as a new purpose-built premises is being developed to which the practice intend to move during the summer of 2021.

The practice has three GP partners (one female and two males) and three salaried GPs (all females). There are two practice nurses (one of whom commenced employment during week 10 February 2020).

There is a practice manager who is supported by a team of administrative and reception staff. The local NHS trust provides health visiting, midwifery, and community nursing services to patients at this practice.

The practice is open between 8am and 6.30pm Monday to Friday. There is extended opening from 6.30am until 8.30pm on a Monday and weekend and late evening appointments available through the St Albans and Harpenden extended access hub.

When the practice is closed services are provided by Herts Urgent Care via 111.

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 Regulation 17 HSCA (RA) Regulations 2014 Good governance Family planning services There was a lack of systems and processes established Maternity and midwifery services and operated effectively to ensure compliance with Surgical procedures requirements to demonstrate good governance. Treatment of disease, disorder or injury In particular we found: a) Monitoring of patients that received high risk medicines: Though the practice had undertaken an audit of all patients that received medicines that required regular monitoring, the implementation of findings from the audit was incomplete. This presented a risk of medicines being prescribed inappropriately. b) Management of safety alerts: In the absence of an appropriate information system to provide assurance that applicable alerts had been acted upon, there was a risk that the practice could miss some of the applicable alerts. The practice system did not effectively demonstrate the practice knew when all applicable alerts had been acted upon and closed. c) Effective needs assessment, care and treatment: Verified and unverified current data indicated that clinical performance had not improved. Possible reasons

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

were attributed to data migration errors and staff unfamiliarity with the newly implemented patient records system (EMIS). In the absence of validated data, clinical performance continued to be reported as below expectations in comparison with CCG and England data

which in turn reflected negative patient clinical

outcomes.