

Crofton and Sharlston Medical Practice

Inspection report

Crofton Health Centre
Slack Lane
Crofton
WF4 1HJ
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Date of inspection visit: 15 November 2023
Date of publication: 27/12/2023

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?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced comprehensive inspection at Crofton and Sharlston Medical Practice on 14 and 15 November 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement.

Effective – good.

Caring – good.

Responsive – good

Well-led – requires improvement.

Following our previous inspection on 6 October 2015, the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Crofton and Sharlston Medical Practice on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection due to the length of time since our last inspection.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video and telephone conferencing.
- Completing clinical searches on the practice’s patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Requesting evidence from the provider.
- A short visit to the provider sites.
- Staff questionnaires
- Requesting feedback from patients via the ‘share your experience’ link on the CQC website.

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:

Overall summary

- Patients' needs were assessed, and we saw that medicines management processes and patient care and treatment was generally delivered effectively. However, we identified that in 1 area of medicines management and 1 area of long-term condition management, that care and treatment had not always been delivered in line with current standards and evidence-based guidance.
- The provider had a programme of quality improvement activities in place which included clinical and non-clinical audits.
- Child immunisation performance was above national averages and targets.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The provider had engaged with patients regarding access to their branch surgery. As a result, additional clinical appointments had been made available at the site.
- The provider had processes in place to monitor and manage performance.
- Feedback from some members of staff indicated some significant relationship issues with managers and senior leaders, a reticence to raise concerns, and problems with the confidentiality of staff information.

We saw areas of outstanding practice:

- Practice staff had organised and delivered a Halloween themed event to promote the take up of the child nasal flu vaccine.
- The provider hosted a monthly dementia café for patients and carers.

The provider **should**:

- Improve the areas of medicines management and long-term conditions management identified during the inspection.
- Work to continue to improve cervical screening rates.
- Implement actions to improve communication with staff members, effectively share learning, improve staff confidence in raising concerns, and build manager/senior leader relationships with staff.
- Inform all staff of their Freedom to Speak Up Guardian and how to contact them.
- Replace the damaged door seals to 2 vaccine refrigerators.
- Improve the organisation of staff personnel files.
- Examine the provision of protected learning time for training and non-patient facing duties.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who reviewed information and data, spoke with staff using video conferencing facilities, telephone and in person, and undertook site visits. 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, and a CQC observer.

Background to Crofton and Sharlston Medical Practice

Crofton and Sharlston Medical Practice is located at:

Crofton Health Centre

Slack Lane

Crofton

Wakefield

West Yorkshire

WF4 1HJ

The practice has a branch surgery which is located at:

Sharlston Medical Practice

Clifton Road

Sharlston

Wakefield

WF4 1AR

Both sites were visited as part of this inspection activity.

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

The practice is situated within the NHS West Yorkshire Integrated Care Board, and delivers services to approximately 10,970 patients under the terms of a personal medical services (PMS) contract. The practice works with a number of local practices in the Trinity Health Group primary care network (PCN).

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the 6th lowest decile (6 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 is 98% White, and 2% Asian/Black/or originating from mixed or other non-white ethnic groups.

The clinical team consists of 4 GP partners, and 4 salaried GPs. Other members of the clinical team include 3 paramedics, 3 practice nurses, 3 healthcare assistants, 1 phlebotomist, and 1 in-house pharmacy technician. Other clinical capacity is provided by PCN pharmacists and pharmacy technicians. The clinical team is supported by a practice manager, an assistant practice manager (currently vacant), administration and reception team leaders, and members of the administration and reception teams. The provider hosts the local PCN pharmacy team, and is also a training practice which supports the development of GP registrars and medical students.

The practice is open 8am until 6.30pm Monday to Friday (Sharlston Medical Practice closes at noon on Fridays).

Extended access is provided locally through PCN working where late evening and weekend appointments are available at another nearby practice. Out of hours services are provided by Local Care Direct limited.

The practice offers a range of appointment types including on the day, telephone consultations, advance appointments, and home visits.