

Lakeside Healthcare at New Queen Street and Stanground surgeries

Inspection report

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Date of inspection visit: 25 May 2022 Date of publication: 22/06/2022

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

Overall summary

We carried out an announced inspection at Lakeside Healthcare at New Queen Street and Stanground Surgeries on 25 May 2022. Overall, the practice is rated as requires improvement.

Set out the ratings for each key question

Safe - Requires improvement

Effective - Good

Caring - Good

Responsive - Requires improvement

Well-led - Requires improvement

We previously inspected the location under its previous name of Lakeside Healthcare at The New Queen Street Surgery in May 2017 and the practice was rated good overall. The practice has changed their name and inherited the regulated history and ratings of the predecessor location, and is now called Lakeside Healthcare at New Queen Street and Stanground Surgeries.

The full reports for previous inspections can be found by selecting the 'all reports' link for Lakeside Healthcare at New Queen Street and Stanground Surgeries on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection.

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 in a way which enabled us 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
- Staff questionnaires

Our findings

Overall summary

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 found that:

- The systems and processes to ensure infection prevention and control were not wholly effective.
- The practice had ineffective systems for ensuring all emergency medicines and equipment were safe to use.
- Patients did not always receive effective care and treatment that met their needs.
- The process in place for medicine reviews and coding of diagnosis of treatments was not always effective.
- The management and central team did not have full oversight of vaccination history held in staff records to ensure that staff were kept safe from harm.
- The process for recording near misses and incidents in the dispensary did not ensure there was sufficient detail of the events recorded. Reviews of near misses or incidents were not conducted in a timely way to ensure that learning was shared, or that changes were made to prevent reoccurrences.
- The practice had effective processes for supervision and competency checks for all staff, these were formally recorded for proactive learning.
- The practice respected patients privacy and dignity and patient confidentiality was maintained throughout the practice.
- GP patient survey data was below CCG and national averages, and the practice had not engaged in patient feedback exercises to understand patients poor experiences of accessing the practice.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- The way the practice was led and managed promoted the delivery of person-centre care.

We found a breach of regulation. The provider **must**:

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

In addition, the provider **should**:

- Continue to encourage patients to attend their cervical screening appointments.
- Continue to identify and offer support to carers within the practice.
- Review and improve the opportunities for patients to access health checks.

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 spoke with staff using video conferencing facilities and 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 Lakeside Healthcare at New Queen Street and Stanground surgeries

Lakeside Healthcare at New Queen Street and Stanground Surgeries is located in Peterborough at:

New Queen Street Surgery

Syers Lane

Whittlesey

Peterborough

PE7 1AT

The practice has a branch surgery at:

Stanground Surgery

Peterborough Road

Peterborough

PE28RB

New Queen Street Surgery has a dispensary on site, and it was visited as part of this inspection.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 19,830. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called South Peterborough primary care network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the middle decile (six 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 2% Asian, 95% White, 1% Black, 1% Mixed. and 1% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of eight GPs who provide cover at both practices. The practice has a team of seven nurses who provide nurse led clinics for long-term condition of use of both the main and the branch locations. The GPs are supported at the practice by a team of health care assistants and reception/administration staff. The practice manager and leadership team are based at the main location to provide managerial oversight.

The practice is open between 8am to 6pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the New Queen Street Surgery on Monday 6pm-8:30pm and Greater Peterborough Network (GPN), where late evening and weekend appointments are available. Out of hours services are provided by Herts Urgent Care (HUC).		

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

what action they are going to take to meet these requirements.		
Regulated activity	Regulation	
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	 Regulation 17 HSCA (RA) Regulations 2014 Good governance How the regulation was not being met: The practice had ineffective systems for ensuring all emergency medicines and equipment were safe to use. We found the practice systems and processes to ensure infection and prevention was to an appropriate standard was not wholly effective. Staff had not received an appraisal within the past 12 months. GP patient survey data was below CCG and national averages, and the practice had not engaged in patient feedback exercises to understand patients poor experiences of accessing the practice. The process in place for medicine reviews and coding of diagnosis of treatments was not effective. We found the management and central team did not have full oversight of vaccination history held in staff 	
	records to ensure that staff were kept safe from harm. • The process for recording near misses and incidents in the dispensary did not ensure there was sufficient detail of the events recorded. Reviews of near misses or incidents were not conducted in a timely way to ensure	

prevent reoccurrences.

that learning was shared, and changes were made to