

# Poplar House Surgery

## Inspection report

24-26 St Annes Road East  
Lytham St Annes  
Lancashire  
FY8 1UR  
Tel: 01253 722121

Date of inspection visit: 6 Dec 2018  
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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?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at Poplar House on 6 December 2018 as part of our inspection programme. Our inspection team was led by a CQC inspector and included a GP specialist advisor.

At the last inspection published in September 2015 we rated the practice as good overall.

Our judgement of the quality of care at this service is based 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.

## **The practice is rated as good overall.**

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

- The practice did not have safe and effective systems and processes to recruit staff.

This means that:

- People who used the service were generally protected from avoidable harm and abuse, however legal requirements in relation to recruitment of staff, were sometimes not met.
- Patients had good outcomes because they received effective care and treatment that met their needs.
- Patients were supported, treated with dignity and respect and were involved as partners in their care.

- Patients' needs were met by the way in which services were organised and delivered.
- The leadership, governance and culture of the practice promoted the delivery of high quality person-centred care.

There were areas where the provider **must** make improvements:

- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed. Ensure specified information is available regarding each person employed.

There were areas where the provider **should** make improvements:

- Improve the recording and documentation of discussions at safeguarding meetings.
- Improve management oversight of professional registration, staff immunisations and medical safety alerts.
- Improve the records kept in relation to complaints to include those made verbally.

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

**Professor Steve Field** CBE FRCP FFPH FRCGP Chief Inspector of General Practice

## Population group ratings

|  |   |
|--|---|
| <b>Older people</b>  | <b>Good</b>  |
| <b>People with long-term conditions</b>  | <b>Good</b>  |
| <b>Families, children and young people</b>                                     | <b>Good</b>  |
| <b>Working age people (including those recently retired and students)</b>      | <b>Good</b>  |
| <b>People whose circumstances may make them vulnerable</b>                     | <b>Good</b>  |
| <b>People experiencing poor mental health (including people with dementia)</b> | <b>Good</b>  |

## Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser.

## Background to Poplar House Surgery

Poplar House Surgery is located at 24 St Annes Road East, Lytham St Annes, Lancashire, FY8 1UR and is part of the NHS Fylde and Wyre Clinical Commissioning Group (CCG). Poplar House Surgery is the registered provider. Services are provided under a general medical services (GMS) contract with NHS England. The practice building covers three floors and provides ground level access on the ground floor, which is suitable for people with mobility issues. The two upper floors are not serviced by a lift and as such are unsuitable for people with mobility issues.

More information about the practice is available on their website address: [www.poplarhousesurgery.nhs.uk](http://www.poplarhousesurgery.nhs.uk).

There are 7,336 patients registered at the practice. The practice population includes a higher proportion (64%) of patients with a long-standing health condition, and a lower proportion (3%) of people unemployed, in comparison with the national average of 54% and 5% respectively. Information published by Public Health England rates the level of deprivation within the practice population group as six on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice has two GP partners (male) and one salaried GP (female), two advanced nurse practitioners, two practice nurses and two health care assistants (HCAs). The clinical team is supported by a practice manager, a deputy practice manager and a team of receptionists and administrators. The practice reception is open between 8am to 6.30pm Monday to Friday. The practice provides online access that allows patients to order prescriptions and request and cancel an appointment.

The practice does not offer extended hours, patients are signposted to other commissioned services within the locality. Out of hours service is provided by Fylde Coast Medical Service.

The practice provides the following regulated activities: treatment of disease, disorder or injury, diagnostic and screening procedures, family planning and maternity and midwifery services.

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<br>Family planning services<br>Maternity and midwifery services<br>Treatment of disease, disorder or injury | Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed<br><br>The registered person's recruitment procedures did not ensure that only persons of good character were employed. The registered person's recruitment procedures did not ensure that potential employees had the necessary qualifications, competence, skills and experience before starting work. The registered person's recruitment procedures did not establish whether staff were able, by reasons of their health and after reasonable adjustments, to properly perform tasks intrinsic to the work for which they would be employed. The registered person had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed. This was in breach of regulation Regulation 19 (1) (2) and (3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. |