

Lakeside Healthcare Partnership (Lakeside Healthcare at Lakeside Surgeries Corby)

Inspection report

The Lakeside Surgery
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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?	Inadequate	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Requires improvement	
Are services well-led?	Requires improvement	

Overall summary

We carried out an announced comprehensive inspection at Lakeside Healthcare Partnership (Lakeside at Corby), on 26 November 2018 as part of our inspection programme.

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.

We have rated this practice as requires improvement overall.

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

- The practice did not always have clear systems and processes to keep patients safe.
- Staff did not have all the information they needed to deliver safe care and treatment.
- The practice did not have appropriate systems in place for the safe management of medicines.

We rated the practice as **good** for providing effective services because:

- Patients received effective care and treatment that met their needs.

We rated the practice as **good** for providing caring services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

We rated the practice as **requires improvement** for providing a responsive service because:

- Feedback from patients relating to access to services was significantly lower when compared with local and national averages. The practice were aware of this and were implementing an action plan to address the issues.

This area affected all population groups so we rated all population groups as **requires improvement**.

We rated the practice as **requires improvement** for providing well-led services because:

- There were not always clear responsibilities, roles and systems of accountability to support good governance and management.

- The practice did not always have clear and effective processes for managing risks.
- The practice did not always act on appropriate and accurate information.

We identified an area of outstanding practice:

- Lakeside Healthcare Partnership, as a provider, had their own designated safeguarding team who were employed within the partnership from Monday to Friday to cover all aspects of the safeguarding processes to protect both children and adults. The team covered all aspects of the safeguarding role with a view that this increased staff's knowledge of at risk patients and ensured a level of continuity. The members of the team were easily contactable during working hours via telephone or the task system on the clinical record system. Staff told us, and we found evidence, that as dealing with safeguarding concerns was the only role of the dedicated team that this enabled them to produce much more detailed safeguarding referrals and child protection reports.

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).

In addition, the provider **should**:

- Review the arrangements for the oversight of nurses' clinical decision making and ensure the planned system is embedded.
- Review the system for identifying patients with an underlying condition who were eligible for relevant vaccinations to ensure they are regularly identified.

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

Older people	Requires improvement 
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	Requires improvement 
People experiencing poor mental health (including people with dementia)	Requires improvement 

Our inspection team

Our inspection team was led by a CQC inspector and included a GP specialist advisor, a practice nurse specialist advisor, a practice manager specialist advisor, a CQC pharmacist specialist and a second CQC inspector.

Background to Lakeside Healthcare Partnership

Lakeside Healthcare Partnership, also known as Lakeside at Corby is made up of three sites; the main site located at Cottingham Road, Corby, NN17 2UR. The second site is also in the town of Corby at Forest Gate Surgery, Forest Gate Road, Corby, NN17 1TR. The third site which also provides a dispensing service to patients is situated at Brigstock Surgery, Bridge Street, Brigstock, NN14 3ET. All the sites have level access and parking facilities.

The practice is one of eight locations of Lakeside Healthcare Partnership, a partnership of GPs and others which provides primary medical services to approximately 165,000 patients across Northamptonshire, Lincolnshire and Cambridgeshire.

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

Lakeside Healthcare Partnership is a training practice situated within the NHS Nene Clinical Commissioning Group (CCG) and provides services to 48870 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice has 18 partner GPs, seven salaried GPs, four pharmacists, a nurse team lead, six nurse prescribers, three specialist nurses, one community nurse prescriber, a nurse practitioner, seven practice nurses, 11 health care assistants and two dispensers. They are supported by a team of receptionists, administration staff and management.

Patient demographics reflect the national picture and life expectancy is very similar to national averages. Information published by Public Health England, rates the level of deprivation within the practice population group as four, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The two Corby sites are open between 8.00am and 6.30pm Monday to Friday, with the Cottingham Road site open until 8.00pm on Monday and Thursday. The Brigstock site is open between 8.00am and 1.00pm on Monday, Wednesday, Thursday and Friday and from 1.00pm until 6.00pm on Tuesdays.

Out-of-hours GP services are accessed by calling the NHS 111 service.

This section is primarily information for the provider

Enforcement actions

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. We took enforcement action because the quality of healthcare required significant improvement.

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 The provider did not have in place an effective system or process for the management of high risk medicines with appropriate monitoring and clinical review prior to prescribing. The system for dealing with incoming clinical correspondence was not being operated effectively and lacked clinical oversight. The provider did not have an effective system in place for the monitoring and recording of the availability of emergency equipment and medicine. The systems to ensure that the premises used by the service provider are safe to use for their intended purpose were not effective. This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.