

Agenda Item 5

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of NHS Lincolnshire Clinical Commissioning Group

Report to	Health Scrutiny Committee for Lincolnshire
Date:	15 September 2021
Subject:	Lakeside Medical Practice, Stamford

Summary:

This report advises the Committee of the actions taken both in advance of and following the publication of an inspection report by the Care Quality Commission (CQC) on 2 August 2021, on the Lakeside Medical Practice (Stamford). The CQC's report, which followed an inspection on 8 June 2021, found that Lakeside Stamford was inadequate and the CQC placed the practice in special measures. This report to the Committee specifically sets out the mitigating actions taken by Lakeside Stamford, plus assurance and support activity for Lakeside by the Lincolnshire Clinical Commissioning Group.

Actions Requested:

The Committee is requested to review and consider the contents of this report to ascertain satisfaction with mitigating actions to improve care provision from Lakeside Healthcare General Practice (Stamford).

1. Background

Lakeside Healthcare General Practice at Stamford operates from two sites: Sheepmarket Surgery, Ryhall Road Stamford and the branch surgery: St Mary's Medical Centre, Wharf Road, Stamford. Patients can access services from either surgery. The service has onsite dispensaries situated at both sites.

The practice is situated within NHS Lincolnshire Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of just under 31,000 patients. The practice is one of eight locations of Lakeside Healthcare Partnership, a partnership of GPs and others which provides primary medical services to approximately 170,000 patients across Northamptonshire, Lincolnshire and Cambridgeshire. The organisation's central support function is situated in Corby, Northamptonshire. The practice is part of Four Counties Primary Care Network and the practice is a training practice.

Public Health England report deprivation within the practice population group as nine on a scale of 1 to 10. Level one represents the highest levels of deprivation and level 10 the lowest. The average life expectancy of the practice population is higher than the national average for both males and females (81.4 years for males, compared to the national average of 79 years and 85.5 years for females compared to the national average of 83 years). The National General Practice Profile states that the majority of registered patients are white with approximately 1.2% Asian and 1.5% other non-white ethnic groups. The age distribution of the practice population closely mirrors the local averages. There are slightly more female patients registered at the practice compared to males.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments are currently telephone consultations. If the GP or advance nurse practitioner needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery. Other consultation methods such as video calls and advice via email are offered.

2. Care Quality Commission Inspection Outcome

The Care Quality Commission (CQC) inspected Lakeside Medical Practice (Stamford) on 8 June 2021. This followed the receipt of a high number of concerns raised by the public about care access. Aware of these concerns, which had occurred in the preceding few months, the practice implemented a new telephone system across both Lakeside Stamford sites at the same time as the CQC inspection was happening. This was to address the access concerns associated with patient long waits for calls to the practice to be answered.

Action Taken Prior to Publication of CQC Report

Immediately after the CQC inspection visit and prior to publication of the CQC full inspection report, the practice was issued with an urgent enforcement notice in relation to risks associated with medicines management, medication and long term condition reviews and dispensary procedures. The notice required Lakeside to submit an action plan setting out how the matters would be addressed. The CQC also served two warning notices to Lakeside Stamford in relation to good governance and safe staffing.

Lakeside made the CCG aware of the initial CQC feedback received and the requirement to provide fortnightly feedback to the CQC on the actions being taken to address the significant areas of concern noted. The action plan produced and progress updates is also being regularly shared with the CCG.

Specifically CCG Senior Quality and Primary Care representatives met with the full Practice Team on 15 July 2021 to receive further assurance on the mitigating actions underway against the CQC Inspection Improvement plan and to understand what particular areas required additional support from the CCG. The CCG agreed to provide support with Safeguarding training, Infection Prevention and Control and coordination of Communications prior to release of the CQC published Inspection Report. The CCG has also supported with interactions with the newly established Patient Participation Group (PPG), with the CCG attending with Lakeside Healthcare representatives, two of the recent PPG meetings in July 2021.

Other partners have also provided support eg. Local Medical Committee and partner Practices from the Lakeside Healthcare Partnership.

Publication of the Report

The CQC Inspection Report inspection was published on 2 August 2021 and is available on the CQC website:

<https://www.cqc.org.uk/location/1-6017886696>

The report included the following ratings:

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

The practice was also rated inadequate for all population groups.

The CQC found that:

- The practice was not providing care in a way that kept patients safe and protected them from avoidable harm.
- Patients were not always receiving effective care and treatment that met their needs.
- Staff mostly dealt with patients with kindness and respect and involved them in decisions about their care. However patients commented that their care had been impacted upon by poor access to appointments.
- The practice adjusted how it delivered services to meet the needs of patients during the Covid-19 pandemic. However, patients were unable to access care and treatment in a timely way.
- The way the practice was being led and managed did not promote the delivery of high-quality, person-centred care.

The CQC found three breaches of regulations and stated that Lakeside Stamford **must**:

- ensure care and treatment is provided in a safe way to patients;
- establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care; and
- ensure persons employed in the provision of the regulated activity receive the appropriate support, training, supervision and appraisal necessary to enable them to carry out the duties.

In addition the CQC stated that Lakeside Stamford provider should:

- implement the new telephone system with adequate staff resourcing to improve telephone access for patients;
- develop the practice website to include more information on local services and practice updates;
- improve visibility and communication between the central support function personnel in Corby Northamptonshire, and the practice team;
- provide stronger local management by recruiting an appropriately skilled practice or business manager; and
- develop staff engagement processes, and improve responses to patient feedback to enhance service user experience.

The Practice has reported to the CCG that the CQC carried out a re-inspection in the week commencing 30 August. An update on progress and any further issues identified following the re-inspection is expected in the near future.

Response of Lakeside Stamford

The Practice has a very detailed action plan to address all areas of concern highlighted by the CQC. A summary of the required main actions and their current status is provided below:

Areas of Concern	Key Actions and Outcomes
Patient Telephone Access/Waiting Times	<p>New telephone system installed early June 2021 across both sites. Waiting times significantly reduced.</p> <p>Further staff appointments increasing staffing capacity to respond to calls (see below)</p> <p>Improvement to complaints process & website – so patients can more easily raise concerns.</p> <p>Planned survey by PPG to ascertain patient/public ongoing concerns.</p>

Areas of Concern	Key Actions and Outcomes
Staffing Levels & Appraisal, Supervision & Training	<p>Significant recruitment success:</p> <ul style="list-style-type: none"> • Additional GP Partner sessions secured • 3 new salaried GPs recruited. (Locums in place for any gaps). • New Practice Manager recruitment • Additional Clinical Pharmacy Hours & additional dispensary support. <p>Prioritised plan to address outstanding staff appraisals with individual training needs identified.</p> <p>Supervision provision improved; Team & Practice meetings re-established at greater frequency to understand staff concerns.</p> <p>Improvements to incident reporting and learning from incident processes. Improved Risk Management.</p>
Medication & Long Term Condition Review Backlog	<p>Additional Clinical Pharmacy, administrative and GP support secured to address the backlog. CCG facilitated additional specimen collections to assist. At least ¾ reduction in backlog to date.</p>
Dispensary system & processes	<p>Guidelines reviewed and renewed as necessary.</p> <p>Improvement to Governance of dispensary via Lead GP. Additional staffing support.</p>

Assessment of Lakeside Response to Date

The CCG is satisfied with progress to date on required improvements and CQC representatives have reported the same. The new PPG has met a few times and reports a positive and constructive relationship being established with the Practice. The CCG will continue to meet with the Practice had regular intervals to receive ongoing assurance on the improvement actions and to provide support where required.

3. Finance and Resource Implications

Any additional capacity required to support improvements will be considered by the CCG. To date support required has been from existing CCG teams, for example safeguarding and health protection.

4. Legal Considerations and NHS Constitution

The CCG has a statutory duty to engage with patients and the public under section 13Q of the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012). The section 13Q duty ensures that the CCG acts fairly in making plans, proposals and decisions in relation to the health services it commissions and where there may be an impact on services. The CCG also has a duty to secure the continuous improvement of services. This paper supports the patient rights in the NHS Constitution.

5. Outline Engagement – Clinical, Stakeholder and Public/patient

There has been communication via the practice's website and local media to ensure patients and public are kept updated regarding improvement actions. The PPG Chair has indicated that the PPG will "gain feedback from patients on the GP service, through an email address, online survey and postcards left at the surgery". There is also the triangulation of patient voice information from Healthwatch, the CQC, complaints, concerns, patient surveys etc in order to establish any ongoing issues are addressed.

The PPG has been through a number of major changes over recent months with a completely new Committee having been established with a new chair. Following the resignation of the new chair at the end of July, a new is in place. The PPG had met on a few occasions and reports on progress were both positive and constructive with good relationships being established with the Practice. The CCG will continue to meet with the Practice at regular intervals to receive ongoing assurance on the improvement actions and to provide support where required.

6. Consultation

This is not a direct consultation item with the Committee. The Committee is being requested to consider the progress being made as a result of the CQC's inspection.

7. Conclusion

In the light of the progress made by Lakeside Stamford, as summarised in this report, the CCG is satisfied with progress to date on required improvements and CQC representatives have reported the same.

8. Background Papers - No background papers, as defined by Part VA of the Local Government Act 1972, were used to a material extent in the compilation of this report.

This report was written by the following officers from Lincolnshire Clinical Commissioning Group, who may be contacted via the email addresses listed:

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