



Care Quality Commission Binscombe Medical Centre

Overview

Overall Rating: Outstanding

The service is performing exceptionally well.

Summary	
Safe	Good
Effective	Good
Caring	Outstanding
Responsive	Outstanding
Well-led	Good

Overall Service Commentary

Date of Inspection: 21 to 23 October 2025. Binscombe Medical Centre is a GP practice and delivers services to approximately 11,600 patients under a contract held with NHS England. Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the 9 decile (9 of 10). The lower the decile, the more deprived the practice population is relative to others. This inspection considered the demographics of the people using the practice, the context the practice was working within and how this impacted service delivery. Binscombe Medical Centre is an accredited training practice providing work placements to foundation doctors, GP registrars and student nurses. The provider is registered with CQC to deliver the following regulated activities; diagnostic and screening procedures, maternity and midwifery services; family planning, treatment of disease, disorder or injury and surgical procedures.

Patients were fully involved in assessments of their needs, decisions about their care including understanding options and care was based on latest evidence and best practice. Patients were treated with kindness and compassion. The practice provided information in an accessible way so it met people needs, and they could understand. Leaders and staff had a shared vision and culture based on listening, learning and trust. Leaders were visible, knowledgeable, and supportive, helping staff develop in their roles. Staff understood their roles and responsibilities. The practice supported the wellbeing of their staff.

The practice has remained being rated outstanding overall. The key questions of caring, and responsive are rated as outstanding. The safe, effective and well-led key questions have been rated as good.

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Overall People's Experience

Patients were very positive about the quality of their care and treatment. Recent survey results, including from the National GP patient survey and the NHS Friends and Family Test, showed patients were very satisfied with services. For example, the GP patient survey 2025 results were all above the national average including for overall experience and access. 95% describe their overall experience of this GP practice as good or very good, compared to the national result of 75%.

CQC received 58 comments from patients and the overwhelming majority of these were positive. Less positive comments were mainly about the appointment system.

There was a new patient participation group. One of the members told us that although the group was new, they felt the practice listened to their feedback.

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Safe

Rating: Good

Percentage Score: 78.00 %

▶ [How do we score this?](#)

Summary

This service is safe

Commentary

We looked for evidence that patients were protected from abuse and avoidable harm.

The practice had a good learning culture and people could raise concerns. We saw evidence of meetings discussing complaints, compliments, and significant events, to ensure a culture of continuous learning and improvement. Managers investigated incidents thoroughly. People were protected and kept safe. Staff understood and managed risks. The facilities and equipment met the needs of people, were clean and well-maintained and any risks mitigated. Staff had the right skills, qualifications and experience. Managers made sure staff received training and regular appraisals to maintain high-quality care. Staff managed medicines well and involved people in planning any changes. Leaders maintained a culture of openness and collaboration, where safety was the top priority for everyone.

At our last inspection, we rated this key question as good. At this inspection, the rating remains the same.

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Safe

Learning culture

Overall Score

1 2 3 4

▶ [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice had a proactive and positive culture of safety, based on openness and honesty. They listened to concerns about safety and investigated and reported safety events. Lessons were learnt to continually identify and embed good practice.

Staff members we spoke with said they were encouraged to take on new or additional responsibilities. For example, staff who joined the practice as receptionists had been given additional training to take on roles such as summarisers or medical secretaries.

Patients felt supported to raise concerns and felt staff treated them with compassion and understanding. Managers encouraged staff to raise concerns when things went wrong. Clinical issues were discussed during staff meetings to share learning. Staff felt there was an open culture, and that safety was a top priority. The practice had processes for staff to report incidents, near misses and safety events. There was a system to record and investigate complaints, and when things went wrong, staff apologised and gave people support. Learning from incidents and complaints resulted in changes that improved care for others.

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Safe

Safe systems, pathways and transitions

Overall Score

1 2 3 4

▶ [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice worked with people and healthcare partners to establish and maintain safe systems of care, in which safety was managed or monitored. They made sure there was continuity of care, including when patients moved between different services

There were systems in place for processing information relating to new patients. The practice worked with other providers to deliver shared care and when patients moved between services.

The practice had a comprehensive recall system, using text message reminders to ensure patients attended necessary appointments and follow-up care. Staff efficiently managed clinical workflow, ensuring that all pathology and blood test results were reviewed and actioned within appropriate timescales. There was a comprehensive referral system.

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Safe

Safeguarding

Overall Score

1 2 3 4

▶ [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice worked with people and healthcare partners to understand what being safe meant to them and the best way to achieve that. The practice shared concerns quickly and appropriately.

Safeguarding policies were in place and known to staff, who were appropriately trained in safeguarding procedures. Staff were aware who the safeguarding lead was. Safeguarding registers for children and vulnerable adults were maintained and staff acted on concerns by working in partnership with other organisations. Patient records contained pop-up alerts and alerts were also

visible in the Summary Care Record. The practice had a chaperone policy in place to maintain patient privacy during intimate examinations. Posters were displayed in consultation rooms and waiting areas.

The practice held a safeguarding workshop which was attended by local school safeguarding workers, community midwives, health visitors and school nurses. There were a series of actions implemented from the meeting including regular termly meetings with home school link workers, the creation of a safeguarding administration role within the practice, and a standing item at the weekly clinician meetings. Outcomes included better communication which has helped direct appropriate support to families and children, identifying serious risk, improved awareness of neurodiversity support available, and an increased awareness of extended family issues.

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Safe

Involving people to manage risks

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice worked with patients to understand and manage risks by thinking holistically. They provided care to meet patients' needs that was safe, supportive and enabled patients to do the things that mattered to them.

National GP patient survey data showed that 97% of patients stated that during their last appointment, the healthcare professional was very good or fairly good at listening to them (national average 87%) and 95% of patients stated they were involved as much as they wanted to be in decisions about their care and treatment during their last general practice appointment (national average 91%).

Emergency equipment was available and maintained. Staff could recognise a deteriorating patient and knew of action to take. Patients were advised on risks related to their condition and actions to take if their condition deteriorated.

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Safe

Safe environments

Overall Score

1 2 3 4

▶ [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Observation

The practice detected and controlled potential risks in the practice environment. They made sure equipment, facilities and technology supported the delivery of safe care.

Contracts were in place to ensure the premises were maintained. Health and safety risk assessments and audits had been undertaken and risks identified had been addressed. There was a business continuity plan in place which was monitored and reviewed.

We saw that the practice had effective systems to monitor and comply with risk assessments, including fire safety and legionella testing to ensure that patients and staff remained safe. Fire alarms were routinely tested, and the practice had appointed fire marshals to direct patients and staff in the event of a fire. Staff completed fire training and attended regular fire drills. Electrical equipment had been calibrated and tested.

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Safe

Safe and effective staffing

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice made sure there were enough qualified, skilled and experienced staff, who received effective support, supervision and development. They worked together well to provide safe care that met patients’ individual needs.

There were a range of clinical and non-clinical roles within the practice. We found training was up to date, learning needs and development of staff was managed appropriately, and staff were working within their agreed areas of competence. Safe recruitment practices were followed. Checks were in place to confirm nursing staff renewed their registration with their professional body annually. The practice also conducted General Medical Council (GMC) checks for doctors.

Staff told us they were happy within their roles and were given opportunities to learn and develop whilst being supported to do so.

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Safe

Infection prevention and control

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Observation

The practice assessed and managed the risk of infection. They detected and controlled the risk of it spreading and shared concerns with appropriate agencies promptly.

The practice had a designated infection, prevention and control (IPC) lead and all staff had had relevant training. Cleaning schedules were in place and followed. Clinical rooms had adequate provision of personal protective equipment (PPE) and handwashing facilities. IPC policies were in place and IPC audits were completed regularly and the appropriate actions were taken when necessary to mitigate any risks.

The practice used digital technology to improve their IPC standards. Each clinical staff member was responsible for carrying out IPC checks in their clinical rooms at the end of every session and this was recorded using a QR (Quick Response) code. Responses were monitored to check these had been completed, or if anything needed addressing.

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Safe

Medicines optimisation

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Outcomes

The practice made sure that medicines and treatments were safe and met patient's needs, capacities, and preferences. They involved patients in planning, including when changes happened.

Staff involved patients in reviews of their medicines and helped them understand how to manage their medicines safely. Patients knew what to do and who to contact if their condition did not improve or they experienced any unexpected symptoms.

Staff received regular training, were competency assessed on medicines optimisation, and felt confident managing the storage, administration and recording of medicines.

Staff followed protocols to ensure they prescribed all medicines safely, and ensured patients received all recommended medicines reviews and monitoring.

Medicines were stored securely and at appropriate temperatures. Staff regularly checked the stock levels and expiry dates for all medicines, including emergency medicines. Staff stored medical gases, such as oxygen, safely and completed required safety risk assessments.

The provider had effective systems to manage and respond to safety alerts and medicine recalls. Staff followed established processes to ensure patients prescribed medicines with specific risks received recommended monitoring.

Staff took steps to ensure they prescribed medicines appropriately to optimise care outcomes, including antibiotics. There was a programme of regular clinical audits of prescribing that focused on improving care and treatment.

Effective

Rating: Good

Percentage Score: 79.00 %

► [How do we score this?](#)

Summary

This service is effective

Commentary

We looked for evidence that staff involved patients in decisions about their care and treatment and provided them with advice and support. Staff regularly reviewed patient's care and worked with other services to achieve this.

Leaders inspired a culture of improvement, where understanding current outcomes and exploring best practice was a deeply embedded part of the culture, and learning was widely shared and acted on.

At our last inspection, we rated this key question as good. At this inspection, the rating remains the same.

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Effective

Assessing needs

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice made sure patients' care and treatment was effective by assessing and reviewing their health, care, wellbeing, and communication needs with them.

Feedback from patients using the practice was positive. Patients felt involved in any assessment of their needs and felt confident that staff understood their individual and cultural needs. Reception staff were aware of the needs of the local community. Reception staff used digital flags within the care records system to highlight any specific individual needs, such as the requirement for longer appointments or for a translator to be present. Staff checked patient's health, care, and wellbeing needs during health reviews. Clinical staff used templates when conducting care reviews to support the review of patient's wider health and wellbeing. The provider had effective systems to identify patients with previously undiagnosed conditions. Staff could refer patients with social needs, such as those experiencing social isolation or housing difficulties, to a social prescriber.

All staff had completed learning disability and autism training, and patients with complex health needs were given longer appointments to review their needs.

Feedback from patients using the practice was very positive. The results of the GP patient survey 2025 showed that 98% of practice respondents felt their needs were met during their last appointment (national average 90%).

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Effective

Delivering evidence-based care and treatment

Overall Score

1 2 3 4

▶ [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice planned and delivered patient's care and treatment with them, including what was important and mattered to them. They did this in line with legislation and current evidence-based best practice and standards.

Systems were in place to ensure staff were up to date with evidence-based guidance and legislation. There was a strong emphasis on learning within the practice and regular meetings were held to support the sharing of information. Clinical supervision was in place.

The remote clinical searches we undertook included reviewing the monitoring of patients with long-term conditions to assess if National Institute for Health and Care Excellence (NICE) recommendations were followed. Clinical records we saw demonstrated care was provided in line with current guidance.

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Effective

How staff, teams and services work together

Overall Score

1 2 3 4

[▶ How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice worked well across teams and services to support patients. They made sure patients only needed to tell their story once by sharing their assessment of needs when patients moved between different services. We saw evidence of regular meetings taking place including, clinical, nurse, and partner meetings. There was also a ‘Reps’ meeting, where a representative from each staff group (including administration, and reception) attended. Staff could ask their representative to address issues, bring up ideas or to cascade information to the wider group. Information was then disseminated back to the teams.

The practice had strong relationships with the other practices that made up its Primary Care Network (PCN). Staff and leaders successfully maintained positive partnership arrangements with many local providers and charities.

Referrals to other services were audited to ensure that appointments were created for patients in a timely manner, for example, when patients were referred for suspected cancers.

Staff had access to the information they needed to appropriately assess, plan, and deliver patient’s care, treatment, and support.

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Effective

Supporting people to live healthier lives

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice supported patients to manage their health and wellbeing to maximise their independence, choice, and control. The practice supported patients to live healthier lives and where possible, reduce their future needs for care and support.

Patients were encouraged and supported to make healthier lifestyle choices to promote their wellbeing and prevent deterioration. One of the GPs led a series of evening seminars across six weeks in summer 2025 raising awareness of mental health conditions. These had been attended by 60 to 80 people each time. An annual seminar at a local church was also held each year. This year's topic was 'new hope for chronic pain'. The practice supported children and young people with their mental health by arranging regular meetings with home school link workers from local primary and secondary schools where they discussed individuals of concern. The practice ran a weekly 'Wellbeing Walk' which all patients could attend.

The practice worked closely with a range of local organisations to support patients' health and wellbeing.

Staff focussed on identifying risks to patients' health, including those in the last 12 months of their lives, patients at risk of developing a long-term condition and those with caring responsibilities. Staff supported national priorities and initiatives to improve population health, including stopping smoking and tackling obesity.

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Effective

Monitoring and improving outcomes

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Outcomes

The practice routinely monitored patients’ care and treatment to continuously improve it. They ensured outcomes were positive and consistent, and that they met both clinical expectations and the expectations of patients themselves. Staff identified opportunities to refer patients through their care co-ordinators to improve their quality of life. GPs followed up patients who had received treatment in hospital and acted on information received in discharge summaries.

The practice engaged in audits and quality improvement. For example, we reviewed clinical audits completed for minor illness, chronic kidney disease and coil fitting.

From the clinical notes we reviewed, we found that patients who used the practice experienced positive outcomes as set out in legislation, standards, and evidence-based clinical guidance.

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Effective

Consent to care and treatment

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice told patients about their rights around consent and respected these when delivering person-centred care and treatment. Staff we spoke with demonstrated the importance of ensuring that patients understood what they were consenting to and the importance of obtaining consent before they delivered care or treatment. Clinical and non-clinical staff had undergone training in the Mental Capacity Act and clinical staff understood the requirements of legislation and guidance when considering consent and decision making.

We noted that a minor operations audit completed in September 2025 showed patient consent had been recorded in 100% of cases.

Staff understood and applied legislation relating to consent. Capacity and consent were clearly recorded. Do not attempt cardiopulmonary resuscitation (DNACPR) decisions were appropriate and were made in line with relevant legislation.

Caring

Rating: Outstanding

Percentage Score: 90.00 %

► [How do we score this?](#)

Summary

This service is exceptionally caring

Commentary

We looked for evidence that the practice involved patients and treated them with compassion, kindness, dignity, and respect.

We received exemplary comments from patients using the practice, which included mostly very positive comments about the care they received. Comments included: 'personal attention', 'provided with excellent care and understanding', 'efficient' and 'friendly and professional'.

We found that the culture of the entire team was patient-centred, and staff members told us they felt empowered to deliver high-quality, considerate and empathetic care. Results for both the National GP patient survey and the Friends and Family Test were extremely positive and well above national averages.

At our last inspection, we rated this key question as Outstanding. At this inspection, the rating remains the same.

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Caring

Kindness, compassion and dignity

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

People's Experience

The practice was exceptional at treating patients with kindness, empathy, and compassion and in how they respected patients' privacy and dignity. Staff always treated colleagues from other organisations with kindness and respect.

The practice gathered Friends and Family scores, which consistently reflected high levels of patient satisfaction. Feedback from patients was shared with staff to encourage and reinforce good practice. The practice used all comments as an opportunity for learning and improvement.

58 patients shared positive experiences of the practice directly with the Care Quality Commission. Comments from patients included: "I have been provided with excellent care and understanding by my GP" and 'I have felt reassured and listened to'.

Results from the National GP patient survey consistently scored higher than both the local and national averages. Notably, 98% of patients felt their needs were met during their last general practice appointment. This was above the local average and national average of 90%. Similarly, 93% said the healthcare professional they saw or spoke to was good at treating them with care and concern during their last general practice appointment, (the national average was 86%). 95% of patients found the reception and administrative team at this GP practice helpful, compared to the national average of 83%

Arrangements were in place to promote patients' privacy. Staff that chaperoned patients were aware of their responsibilities in maintaining a person's dignity and safety, including during an intimate examination. We observed notices around the practice advising that chaperones were available and how to request one. National GP patient survey data reflected that 97% of patients felt listened to (national average 87%). Staff we spoke with understood Gillick competency and there was a process to ensure young adults had control over their own privacy and the amount of parental involvement in managing their care and support.

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Caring

Treating people as individuals

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice treated patients as individuals and was exceptional in how they made sure care, support and treatment met patients' needs and preferences. The practice took account of patient's strengths, abilities, aspirations, culture and unique backgrounds and protected characteristics.

All staff had received training surrounding autism and learning disabilities and were able to support patients who may need extra support to be independent and access services.

Patients with learning disability were asked to attend their annual review during their birthday month. The practice had an improvement project to assist their neurodiverse patients in requesting reasonable adaptations they may need to access and/or attend healthcare appointments. The practice created a passport where the patient could add things that were important to them, and this could be worn as a lanyard. For example, patients could highlight 'things to know and ways to help me: give me specific instructions and explain why, check my understanding, ask me direct (closed) questions'.

The practice worked closely with a range of local organisations to support patients' health and wellbeing. For example, Clockhouse in Milford for dementia patients, Farncombe Day Centre for loneliness and "meals on wheels" service, NHS volunteer befriending service, Hoppa bus, Age UK, local free support groups, local walks, Sport in mind (free local sports for people struggling with mental wellbeing).

The practice supported all patients, including homeless people, to access healthcare. Patients with no fixed abode could use Binscombe Medical Centre as their postal address.

Patients' personal, cultural, social, religious and equality characteristics needs were understood and met. Patient communication needs were met to enable them to be fully involved in their care. The practice was able to use translation services.

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Caring

Independence, choice and control

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice was exceptional at promoting patient's independence, so patients knew their rights and had choice and control over their own care, treatment, and wellbeing.

The practice provided information in a way that patients could understand and offered time for discussion so patients could consider their options. Interpreters and accessible communication formats were available when needed. The practice had disabled access and hearing loops.

Staff helped patients and their carers to access advocacy and community-based services.

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Caring

Responding to people's immediate needs

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Feedback from staff and leaders

The practice listened to and understood patients' needs, views and wishes. Staff responded to patient's needs and acted to minimise any discomfort, concern, or distress. There was a system for appointment triage that ensured patients with immediate needs had access to services. A senior doctor was available each day to support non-clinical staff in care navigation. Patients' needs were usually managed on the day of contact with the practice. The remaining were either signposted or offered an appointment in the future rather than having to call back. Patients were directed to the most appropriate person to meet their needs and ensure continuity of care where required. Staff knew the process for referral to emergency support, including mental health crisis teams.

The practice had also conducted a review to identify patients with complex needs. Patients with a variety of needs were highlighted to ensure staff were aware of any specific requirements when contacting the practice. For example, ensuring a patient was seen face to face and not booked in for a telephone consultation, or ensuring they saw the same GP for continuity of care.

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Caring

Workforce wellbeing and enablement

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The provider cared about and promoted the wellbeing of their staff and was exceptional at supporting and enabling staff to always deliver person-centred care.

Staff told us they were valued by leaders. Leaders had taken steps to recognise and meet the wellbeing needs of staff, which included the necessary resources and facilities for safe working, such as regular breaks and rest areas. Staff reported being supported if they were struggling at work. We saw team building days were established within the practice. The practice also supported their staff by having a 'Wellbeing Champion' who held weekly drop-in sessions, organised social events, and feedback surveys. We also saw evidence of a high level of peer support across the practice.

Staff we spoke with, and evidence seen demonstrated a high level of training opportunities for staff. Staff told us they were encouraged to expand their roles and / or achieve career progression. We saw internal training sessions were provided for staff to increase their knowledge on a variety of subjects. For example, For example, suicide awareness, sepsis recognition, red flags in primary care and communication.

Leaders demonstrated the systems they had in place to support staff, and staff reported how their views and feedback were listened to, carefully considered and used to drive change. For example, reception staff were asked to feed back about the appointment system, what was working well and what were the challenges. The results of these were discussed by the partners and changes made.

Responsive

Rating: Outstanding

Percentage Score: 89.00 %

► [How do we score this?](#)

Summary

This service is exceptionally responsive

Commentary

We looked for evidence that the practice met patient's needs, and that staff treated patients equally and without discrimination. The practice was easy to access. Direct feedback to CQC highlighted patients found it easy to make appointments. Results from the National GP patient survey also highlighted that 66% found it easy to contact the GP practice using their website (national average 51%), and 65% found it easy to contact the GP practice using the NHS App (national average 49%). Patients received fair and equal care and treatment. The practice worked to reduce health and care inequalities through training and feedback.

We received 58 comments about the practice from patients. The overwhelming majority were very positive and many who gave feedback provided examples that confirmed person centred care.

At our last inspection, we rated this key question as good. At this inspection, the rating has improved to outstanding.

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Responsive

Person-centred Care

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Feedback from staff and leaders

The practice was exceptional at making sure patients were at the centre of their care and treatment choices and they decided, in partnership with patients, how to respond to any relevant changes in patient's needs.

Our review of clinical records showed patients were supported to understand their condition and were involved in planning for their care needs. They were also involved in decisions about their care.

The percentage of respondents to the GP patient survey who responded positively to the overall experience of contacting their GP practice was 86% with the national average being 70%. In addition, 95% of patients described their overall experience of this GP practice as good, compared with the national average 75%.

Accessible standards and barriers to care were considered for patients, with alerts added to medical records so that the receptionists were aware the person had additional needs. For example, patients who were blind or hard of hearing were collected from the waiting room by the clinicians and a hearing loop was installed at reception.

A passport had been created for neurodiverse patients. The passport included important information that the patient felt they wanted people to know, including if they needed a quiet place to wait for their appointment or how they liked to be provided with information. This was entirely up to the patient if they wanted to create a passport or use it while at the practice.

The practice was able to offer appointments with a GP Chaplain. Appointments with the Chaplain were available on a Friday at the practice. The role of a GP Chaplain was to provide holistic, person-centred care by focusing on the spiritual, pastoral, and emotional wellbeing of patients, and their families. The practice had audited the number of people attending and had noted a marked increase in 2024.

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Responsive

Care provision, Integration and continuity

Overall Score

1 2 3 4

[▶ How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice understood the diverse health and care needs of patients and their local communities, so care was joined-up, flexible and supported choice and continuity.

We saw the practice worked in partnership with other services to meet the needs of its patient population. The practice had tailored its services to meet the diverse needs of its community, for example, building relationships with community groups to promote the take up of screening programmes. There were established mechanisms for engaging with the community healthcare provider.

The long-standing clinical staff team provided continuity and stability with minimal requirements for locum staff. Staff had forged excellent working relationships with many multi-disciplinary professionals to meet the needs of patients and all staff we spoke with were familiar with the patients who regularly attended the practice.

Our review of the clinical system demonstrated that referrals to other services were made promptly, and information shared by other services was managed effectively and timely to support good outcomes for patients.

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Responsive

Providing Information

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice supplied appropriate, accurate and up-to-date information in formats that were tailored to individual needs.

The practice had access to interpreter services, including British Sign Language. Information provided by the practice met the Accessible Information Standard. Patients were informed as to how to access their care records.

Results from the National GP patient survey showed that 94% of patients knew what the next step would be within two days of contacting their GP practice.

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Responsive

Listening to and involving people

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice made it easy for people to share feedback and ideas, or raise complaints about their care, treatment and support. They involved patients in decisions about their care and told them what had changed as a result.

We saw complaints were managed in line with the practice's policy. The practice had a positive approach to receiving feedback and complaints we reviewed showed the practice responded to feedback appropriately, openly and in a non-defensive manner. Learning from complaints was evident and staff were able to identify changes made as a result of patient feedback, including complaints. Staff were aware of their duty of candour and to be open and honest when things went wrong.

The practice routinely asked patients to complete Friends and Family Test (FFT) feedback forms and reviewed the feedback for any trends or themes. Data from the FFT showed that for the month of August, 252 patients had responded, and the practice had received 96% positive comments. This was similar for July (246 patients responded with 98% positive comments), and June (286 patients responded with 95% positive comments).

Results from the GP patient survey showed the practice performed above the national average, achieving 95% for involving patients in decision-making, (the national average 91%). In addition, the national GP patient survey showed, 97% of patients who responded felt that during their last appointment, the healthcare professional was good at listening to them, (the national average 87%).

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Responsive

Equity in access

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice made sure that patients could access the care, support, and treatment they needed when they needed it.

The premises was wheelchair accessible, and all patients were seen on the ground floor. The practice had built an extension to the practice to gain 3 more clinical rooms due to an increasing patient list and the need to accommodate more staff members. The extension had been built to accommodate patients with wheelchairs or prams and had wider doors and corridors. The practice had a hearing loop. Patients could access appointments online, over the phone and in person.

Patients could access pre-bookable appointments at extended hours on Friday and Saturday mornings (including appointments with a nurse or Healthcare Assistant). Patients could also be booked in extended access appointments which was provided through East Waverley PCN, in the evenings during weekdays or on Saturdays. This ensured access for working patients and others who were unable to get to the surgery during normal opening hours.

The practice offered a range of appointments. These included emergency on the day, pre-bookable and clinics for conditions such as diabetes or asthma reviews. The provider maintained registers of patients with protected characteristics and informed them of additional services available for them.

The practice gave us examples of where additional support had been identified for patients. An example included: a patient with impaired hearing had an agreed emergency procedure where the patient could contact the practice by sending a text message to a landline phone number. When the practice responded to the patient, a spoken message would be converted to text, ensuring the patient was able effectively to convey an urgent message and be responded to.

The practice also provided an example of feedback given by a visually impaired patient, regarding practice signage. The patient was invited back to the practice to review where new signage needed to be placed to make the signs clearer for them and other patients with visual impairments.

Results from the GP patient survey showed the practice performed significantly better than local averages in several areas concerning access. For example, 83% of patients felt they waited the correct amount of time, compared with the national average 67%. Results from the National GP patient survey also highlighted that patients could easily access the practice, 77% of patients found it easy to get through to the GP practice by phone (national average 53%)

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Responsive

Equity in experiences and outcomes

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

Staff and leaders actively listened to information about patients who are most likely to experience inequality in experience or outcomes and tailored their care, support and treatment in response to this.

Feedback provided by patients using the practice, both to the provider as well as to CQC, was positive. Staff treated patients equally and without discrimination. Leaders proactively sought ways to address any barriers to improving patients' experience and worked with local organisations, including within the voluntary sector, to address any local health inequalities. Staff understood the importance of providing an inclusive approach to care and made adjustments to support equity in patient's experience and outcomes. The provider had processes to ensure people could register at the practice, including those in vulnerable circumstances such as homeless people.

Systems and processes were in place to assist in identifying patients who may need extra support. This included alerts on patients records to show what support they needed with communication such as interpreters. Care co-ordinators could support patients at risk of social isolation or poverty via community groups. For example, Clockhouse cafe for dementia patients, Farncombe Day Centre for loneliness and "meals on wheels" service.

The practice had created The Binscombe Walking Group. Originally this was run by a GP partner and HCA. The initiative was specifically designed to promote patient wellbeing, by providing a safe and inclusive environment that fostered community and broke down social barriers for those managing physical or mental health challenges. The walking group has now been taken over by a group of volunteers with practice staff still attending and renamed 'Wellbeing Walks'. Since its formation, the group has recorded attendance from over 400 people.

The practice had created a pilot for patients suffering with chronic pain using a more holistic approach. Following training one of the GPs invited 20 patients to attend 4 sessions held at Farncombe Community Garden. The first session was run in October 2025 with 10 patients attending. The pilot included a structured four-topic curriculum. The patients were sent a questionnaire to complete before the first session, and an evaluation will be completed at the end. A further evaluation, 2-3 months after completion of the pilot, will be completed to see the impact of the sessions on quality of life, level of pain and use of pain relief.

The practice organised annual free seminars for patients and residents at a local church. Past topics included generalised anxiety, women's health and challenges associated with ageing. In October 2025 a chronic pain seminar was held. Approximately 80 people attended, and feedback was very positive.

The practice was responsive to the needs of older patients and offered home visits and urgent appointments for those with enhanced needs and complex medical issues.

The practice liaised regularly with community services to discuss and manage the needs of patients with complex medical issues.

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Responsive

Planning for the future

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

Patients were supported to plan for important life changes, so they could have enough time to make informed decisions about their future, including at the end of their life.

Our records review showed patients were supported to consider their wishes for their end-of-life care, including cardiopulmonary resuscitation. This information was shared with other services when necessary.

The practice used the Marie Curie Daffodil Standards to improve end-of-life care for patients. (The standards consist of eight core domains that cover aspects like early identification of need, planning and delivering personalised care, and providing support to carers and families after death). The practice had conducted a retrospective audit of deaths. The audit reviewed the last 20 deaths and reviewed areas such as the proportion of patients who had next of kin included in their notes, if ReSPECT forms (A ReSPECT form is a Recommended Summary Plan for Emergency Care and Treatment that outlines personalised recommendations for a person's clinical care in an emergency where they cannot speak for themselves), had been completed, and if they had achieved their preferred place of death. Findings of the audit were reviewed by the practice to drive improvements, and we saw an action plan had been created in response.

The practice fully engaged in regular, well attended multi-disciplinary team meetings to assess and support patients in reaching decisions about their end-of-life care. This identified that patients' views had been sought and respected. Minutes of these meetings were recorded, saved, and shared with relevant agencies. We were assured that safeguards were in place to ensure that decisions were made which were in the person's best interest. When patients did not have mental capacity to make their own decisions regarding end-of-life care, family members and carers were involved in decision making.

Well-led

Rating: Good

Percentage Score: 82.00 %

► [How do we score this?](#)

Summary

This service is well-led

Commentary

We looked for evidence that practice leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

There were clear and effective governance, management and accountability arrangements. Staff understood their role and responsibilities. Managers and leaders could account for the actions, behaviours and performance of staff. Information was used effectively to monitor and improve the quality of care. Leaders implemented quality frameworks to improve equity in experience and outcomes for people using services and tackle known inequalities.

Staff feedback during the assessment was positive, with staff stating there was a supportive, team-based culture and all staff we spoke to were passionate about delivering a high-quality service.

At this inspection, the rating has changed from outstanding to good. Whilst the provider had maintained excellent practice, the threshold to achieve an outstanding rating had not been reached.

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Well-led

Shared direction and culture

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice had a shared vision, strategy and culture. This was based on transparency, equity, equality and human rights, diversity and inclusion, engagement, and understanding challenges and the needs of patients and their communities. However, the practice was aware that the vision had not been reviewed in some time with current staff members.

The new patient participation group, (PPG) was in its infancy and only had one meeting at the time of the inspection.

Leaders demonstrated the importance of staff wellbeing to support them in maintaining good outcomes for patients. Leaders invested in learning and development for all staff and developed tools to assist staff to achieve best practice.

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Well-led

Capable, compassionate and inclusive leaders

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice had inclusive leaders at all levels who understood the context in which they delivered care, treatment and support and embodied the culture and values of their workforce and organisation. Leaders had the skills, knowledge, experience and credibility to lead effectively. They did so with integrity, openness and honesty.

Staff told us leaders in the practice were approachable and responded to any concerns raised. We saw the leadership team worked with other practices in the primary care network and were engaged in the development of primary care services within the local area.

Staff we spoke with told us leaders were approachable and responded to any concerns raised. There were regular management and staff meetings to ensure all staff members were aware of changes to service delivery.

Staff told us that leaders cared about their wellbeing and provided initiatives such as a Wellbeing Champion with drop-in meetings, peer support across all levels and organised social events.

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Well-led

Freedom to speak up

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice fostered a positive culture where patients felt they could speak up and their voice would be heard.

The practice had established Freedom to Speak up arrangements with other practices in the primary care network. Staff were aware of how to raise concerns, and we saw examples where staff had used the arrangements in place to positive effect.

The practice had an open culture where staff felt confident to speak up if they had concerns. Staff told us they were listened to and felt safe raising issues without fear of negative consequences. Leaders promoted honesty and transparency, encouraging staff to share concerns. There were clear policies in place. All staff spoken with told us they knew how to access them if they

wanted to raise a concern formally. The practice had an external freedom to speak up guardian who was fully trained to deal with concerns raised with them.

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Well-led

Workforce equality, diversity and inclusion

Overall Score

1 2 3 4

▶ [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice valued diversity in their workforce. They worked towards an inclusive and fair culture by improving equality and equity for people who worked for them.

Policies and procedures to promote diversity and equality were in place. We saw senior leaders had addressed concerns related to discrimination. Adjustments had been made to ensure all staff were valued.

Staff we spoke with told us about career development and opportunities for learning. For example, reception staff moving to a secretarial role and clinical staff being encouraged and supported to undertake further training.

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Well-led

Governance, management and sustainability

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Good – This service maximises the effectiveness of people’s care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice had clear responsibilities, roles, systems of accountability and good governance. They used these to manage and deliver high-quality, sustainable care, treatment, and support. They acted on the best information about risk, performance, and outcomes, and shared this securely with others when appropriate.

Leaders and managers supported staff, and all staff we spoke with were clear on their individual roles and responsibilities. GPs were each assigned clinical areas to oversee, and staff informed us that they knew who to contact if they had any queries or concerns. Staff we spoke with told us the leaders had an “open-door” policy and were always responsive and available to provide support. Managers met with staff regularly to complete appraisals and performance reviews. The provider had established governance processes that were appropriate for their service. Staff knew where to access all required policies and procedures and understood the importance of patient confidentiality and information security. Managers held regular practice meetings with staff, during which they discussed clinical concerns and emerging risks. However, a small number of staff members told us they had not attended any meetings. Managers clearly recorded any actions arising from these meetings and ensured they shared these with staff.

The practice had comprehensive assurance systems that underwent regular review and improvement. These systems effectively managed risks to both patients and staff, covering areas such as fire safety and the learning from complaints, safety alerts and significant events. We saw evidence of clear action plans which were monitored to ensure identified risks were mitigated, actions completed and sustained over time.

Recruitment processes were effective, with appropriate checks carried out for new staff. Staff were aware of their training requirements, and all had completed their mandatory training.

The practice operated a robust clinical audit programme. Audits and improvement projects were monitored and re-audited and results were discussed with all relevant staff.

We reviewed the practice website. We noted there was patient information listed under the Patient Areas tab with links to websites for support. However, some of these links were no longer working and some information was no longer the most up to date. For example, a few of the information posters used were more than 10 years old and although potentially still relevant had not been reviewed to see if more recent information was available.

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Well-led

Partnerships and communities

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice clearly understood and carried out their duty to collaborate and work in partnership, and services worked seamlessly for patients. They always shared information and learning with partners and collaborated for improvement.

The provider worked with other practices within their primary care network to offer extended access, and flu and covid vaccination programmes.

The practice worked with stakeholders to build a shared view of challenges and of the needs of the population. The practice worked with a range of external partners, for example, other health and social care professionals, mental health services and housing to support patients with a range of needs. There were many clear examples of how partnership working had improved patient outcomes and how best practice had been shared across the wider organisation. For example, Farncombe Community Garden which was a

community wellbeing project set up by 3 GP's and 2 non clinical representatives from the community, one of whom was a patient. The community garden was used to improve the mental and physical wellbeing of patients and the wider community. The garden was used by other third sector organisations involved in community wellbeing, such as Roots for the Future, Dose of Nature and the Green Hub (gardening activities for young people who find school challenging). The garden was also accessible to a care home (with residents with dementia) who had a private entrance and could visit the garden when closed. The garden was now set up as a charity, with 2 GP's and the 2 non clinical representatives as trustees. The whole practice team was committed to the project, having held a practice development afternoon volunteering at the site. All staff spoken with were extremely proud of the garden.

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Well-led

Learning, improvement and innovation

Overall Score

1 2 3 4

► [How do we score this?](#)

Summary

Outstanding – This service is exceptional at maximising the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Processes

The practice had a strong focus on continuous learning, innovation and improvement across the organisation and local system. They always encouraged creative ways of delivering equality of experience, outcome, and quality of life for people. They actively contributed to safe, effective practice and research.

Leaders showed strong commitment by regularly listening to patient and community feedback, which directly influenced the design and assessment of new working practices. They also invested significant time and resources to support staff.

The practice used learning from significant events and complaints to continually improve the service they provided, and changes were made within the practice if needed.

We saw examples where staff had requested and been offered the opportunity to progress in their roles and/or add to their skills. These included clinical and non-clinical roles.

We saw evidence of a range of audits and quality improvement projects. Projects were designed to improved performance, outcomes, and patient experience. For example, audits for complaints, clinical audits and infection control. As well as quality improvement projects such as a practice passport for patients with autism, chronic pain initiatives, walking for health, a community garden, and free patient/community seminars. All staff were encouraged to put forward and test out new ways of working.

We saw evidence of learning cascaded to team members and the wider community including the integrated care board. The quality and depth of this documentation demonstrated a clear commitment to meaningful and sustained learning across the practice. To improve staff awareness and patient care, GPs within the practice conducted internal training sessions for staff. The knowledge gained, spanning topics such as self-harm management, patient communication and frustration, red flags in primary care, mental health and neurodiversity and the early detection of sepsis in primary care, was directly applied to enhance patient outcomes.

The practice had a strong focus on mentorship and supervision. Salaried GPs were provided with structured support and guidance through mentorship with an experienced GP embedded within the practice which also helped to promote a supportive wellbeing environment. The practice was an accredited training practice for doctors in training (GP trainees and foundation doctors) as well as Physician Assistants (PAs) Each trainee had a named educational Supervisor and mentor. The practice also hosted student nurses. Clinical supervision for student nurses was provided on a day-to-day basis through peer-to-peer support and via the practice nurse lead. Staff we spoke with told us that through mentorship and supervision they felt well supported in their role.