

# Ashover Medical Centre

## Inspection report

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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?

Good 

# Overall summary

We carried out a desk-top focused review at Ashover Medical Centre on 26 August 2020.

The practice had previously received a comprehensive inspection in August 2019 when it received an overall rating of good, although the safe domain was rated as requires improvement. All population groups were rated as good.

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

- The management of some systems within the practice dispensary were not always safe or effective. This included the safe management of Monitored Dosage Systems.
- Some processes had insufficient evidence to provide assurances that they operated safely. This included the tracking of prescription stationery, and the monitoring of vaccine refrigerator temperatures.
- Where risk assessments had been completed, follow up actions and dates of completion were not consistently documented.

We undertook this desk based review in August 2020 to check that the provider had completed the areas identified as requiring improvement. We did not visit the practice as part of this inspection.

This report only covers our findings in relation to the safe domain. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Ashover Medical Centre on our website at

Following our review in August 2020, the practice remains rated as good overall; and the safe domain is also now rated as good. This was because:

- The management of practice dispensary systems were found to be safe and effective. Monitored Dosage Systems were managed safely and kept under review.
- Processes had been strengthened to provide assurances that they operated safely. The management of prescription stationery was found to be secure, and vaccine refrigerator temperatures were being monitored safely in line with guidance.
- When risk assessments had been completed, follow up actions and dates of completion were documented.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Our inspection team

The focused desk-top inspection was undertaken by a CQC inspector, supported by a second CQC inspector.

## Background to Ashover Medical Centre

Ashover Medical Practice is registered with the Care Quality Commission as a partnership, which consists of three male GPs and one female GP. It is registered to carry out the following regulated activities - diagnostic and screening procedures, family planning, surgical procedures, maternity and midwifery services, and the treatment of disease, disorder or injury.

Ashover Medical Practice is a rural dispensing practice which opened in 2004 and is situated within North East Derbyshire close to the Derbyshire Peak District. It works in close collaboration with the provider's other CQC registered GP practice in nearby Matlock.

The practice has a contract with NHS Derby and Derbyshire Clinical Commissioning Group (CCG) to provide General Medical Services (GMS) and offers a range of local enhanced services.

The practice has approximately 2,230 registered patients. The age profile demonstrates a higher proportion of older patients, and lower numbers of younger patients compared to local and national averages:

- The percentage of people in the 65+ year age group at 30.3% is above the CCG average of 20.5%, and the national average of 17.3%.
- The percentage of people in the under 18 age group at 13.3% is below the local average of 19.3%, and the national average of 20.7%.

The practice scored eight on the deprivation measurement scale; the deprivation scale goes from one to 10, with one being the most deprived. People living in more deprived areas tend to have greater need for health services.

The National General Practice Profile describes the practice ethnicity as being predominantly white at 98.6% of the registered patients, with estimates of 0.6% mixed race, 0.7% Asian and 0.1% black.

The partners provide some clinical sessions at the practice, working across both of their registered locations. There is a practice manager, a part-time practice nurse, a practice secretary, and a phlebotomist who also works as a notes summariser. Due to the small size of the practice, reception staff work also work as dispensers. There is a senior dispenser/receptionist and a team of six more reception/dispensary staff. A member of this team also works as the practice co-ordinator.

The practice opens Monday to Friday from 8am until 6.30pm with extended hours opening on Tuesday between 6.30-7.30pm. Access to wider local access scheme to be determined.

The surgery closes on a Wednesday afternoon on most months for staff training. When the practice is closed, out of hours cover for emergencies is provided by Derbyshire Health United (DHU).