

Bridgemary Medical Centre

Inspection report

The Bridgemary Medical Centre
2 Gregson Avenue, Bridgemary
Gosport
Hampshire
PO13 0HR
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www.bridgemarymedicalcentre.co.uk

Date of inspection visit: 22 August 2019
Date of publication: 03/10/2019

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

Inadequate



Are services safe?

Good



Are services effective?

Inadequate



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Inadequate



Overall summary

Previously, we carried out an announced focused inspection at Bridgemary Medical Centre on 24 June 2019. We inspected the effective and well led key questions only and rated these as inadequate. The practice was rated as inadequate overall.

We served a warning notice to the provider following a breach of regulation 17: Good Governance, of the Health and Social Care Act 2008. We also issued a requirement notice in relation to regulation 12, Safe Care and Treatment.

We carried out an announced focused follow up inspection at Bridgemary Medical Centre on 22 August 2019 to confirm that the practice had met the legal requirements in relation to the warning notice served after our previous inspection in June 2019. This report covers our findings in relation to the warning notice only. This means the ratings from our previous inspection remain the same.

We based our judgement of the quality of care at this service 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.

At this inspection we found that the requirements of the warning notice had been partially met. We therefore served a requirement notice in relation to regulation 17: Good Governance, of the Health and Social Care Act 2008.

We found that:

- Patients were receiving care in line with evidence-based guidance.
- The practice had taken steps to improve clinical governance, but policies and processes still need further development and embedding.
- Plans had been put in place to improve and develop Quality and Outcome Framework (QOF) monitoring, but these were in their infancy.
- Significant events were appropriately reported, investigated and monitored.
- Care planning was being developed but was still in the early stages.

However, we found that:

- There remained a lack of oversight and monitoring in relation to staff training.
- There remained a lack of clinical audits and quality improvement activity to review effectiveness.

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.

The full report published on 7 August 2019 should be read in conjunction with this report. The practice remains rated inadequate until a full comprehensive inspection is carried out by the Care Quality Commission.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP Chief Inspector of General Practice

Our inspection team

Our inspection team was led by a CQC lead inspector and included another CQC inspector and a GP specialist advisor.

Background to Bridgemary Medical Centre

Bridgemary medical centre is located at 2 Gregson Avenue, Gosport, PO13 0HR.

The practice provides services under a general medical services contract. The practice has approximately 8,700 registered patients. The population includes an area of high deprivation. The practice is part of the NHS Fareham and Gosport Clinical Commissioning Group.

The practice is registered with the Care Quality Commission to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice's clinical team consists of five GP partners, three practice nurses, one health care assistant and a clinical pharmacist. The administration team is led by a practice manager and consists of an operations manager and 11 administrators or receptionists.

The practice has opted out of providing an out-of-hours service. Patients had access to an extended hours service provided by a local federation when the surgery was closed.

You can access practice information online at www.bridgemarymedicalcentre.co.uk.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>Systems or processes must enable the registered person to assess, monitor and improve the quality and safety of services and to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users.</p> <ul style="list-style-type: none">• The system for oversight of staff training records was ineffective and inaccurate.• A system of clinical audits had not been developed to demonstrate the quality of patient care.• A leadership program was yet to be developed.• Continued improvement to clinical governance, was needed to ensure the quality of patient care.• Further development of policies and procedures was needed to ensure they were embedded.• Continued work to improve clinical monitoring and Quality Outcomes Framework (QOF) monitoring was needed to demonstrate full compliance with this regulation. <p>This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>