

Camphill Health Centre

Inspection report

Ramsden Avenue
Nuneaton
CV10 9EB
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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?	Good		
Are services effective?	Good		
Are services caring?	Good		
Are services responsive to people’s needs?	Requires Improvement		
Are services well-led?	Requires Improvement		

Overall summary

We carried out an announced comprehensive inspection at Camphill Health Centre on 26 October 2022. Overall, the practice is rated as requires improvement.

Safe - good

Effective - good

Caring - good

Responsive - requires improvement

Well-led - requires improvement

Following our previous inspection on 25 April 2017, the practice was rated good overall and for the key questions are services safe, effective, responsive and well led. They were rated as requires improvement for providing caring services. The April 2017 inspection was carried out under a different provider.

The full reports for previous inspections can be found by selecting the 'all reports' link for Camphill Health Centre on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection as there is a new provider registration. This was a comprehensive inspection and looked at the key questions inspected, are services safe, effective, caring, responsive and well-led.

How we carried out the inspection/review

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

Our findings

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.

We found that:

Overall summary

- The practice had clear systems, practices and processes to keep people safe and safeguarded from abuse. Patients received effective care and treatment that met their needs.
- Patients received effective care and treatment that met their needs. Processes were in place to monitor patients' health in relation to the use of medicines including high risk medicines. However, we found some patients were overdue a review.
- Safety alerts were received by the practice. A review of the patient record system found that actions had not always been taken for the alerts received. Particularly with documenting discussions with patients regarding the side effects of medicines.
- There was a lack of oversight to ensure policies and procedures regarding medicines management and effective management of patients was applied.
- The monitoring of patients with poorly controlled diabetes was not consistent.
- The practice were below the minimum 90% target for the uptake of childhood immunisations for four of the five indicators. However, the data related to a time prior to the current provider managing the practice. Actions had been taken to improve the uptake.
- The coverage for cervical screening was below the UK Health and Security target of 80%. However, the published data for cervical screening covers a period of time prior to the provider managing the practice. The data covers eligible persons who have had screening within the specified period, for example, either the previous 3.5 or 5.5 years.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care. Feedback from patients was generally positive regarding the practice. However, the National GP Patient survey published in July 2022 showed some indicators for satisfaction with patient care were lower than the local and national averages.
- The National GP Patient survey published in July 2022 showed patient satisfaction with how they could access the practice and the appointments available was below the local and national averages. Actions had been taken by the practice to make improvements. However, at the time of our inspection, the impact of the changes made had not been assessed.
- We found areas of good practice in the leadership of the service. However, oversight of the systems in place for good governance and management were not always effective.
- Significant events and complaints were well managed with learning shared within the practice and the provider organisation.
- Feedback from staff was positive with comments that they felt supported by the practice management and GP.

We found a breach of regulations. The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The areas where the provider **should** make improvements are:

- Continue to take measures to improve the uptake of childhood immunisations and cervical screening.
- Continue to take actions to improve patient satisfaction.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Camphill Health Centre

Camphill Health Centre is located in Nuneaton at:

Ramsden Avenue

Nuneaton

Warwickshire

CV10 9EB

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

The practice is situated within the West Warwickshire Integrated Care System (ICS) Alternative Provider Medical Services (APMS) to a patient population of about 4,654. This is part of a contract held with NHS England.

The practice is a member of a primary care network (PCN) that enables them to work with other practices in the area to deliver care.

Information published by Public Health England shows that deprivation within the practice population group is in the second lowest decile (2 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 96% White, 3% Asian, 1% Black and 1% Mixed.

There are a higher than average number of patients aged under 44 years of age and a lower than average number aged over 45 years.

The practice has a GP and advanced nurse practitioner and a practice nurse all female. The clinical team is supported by regular locum GPs. There is a practice manager and deputy practice manager who lead a team of administration and reception staff.

The practice is open between 8am to 6.30pm Monday to Friday. Extended access appointments are available on Tuesdays and Thursdays in the practice from 6.30pm to 8pm. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the primary care network, where late evening and weekend appointments are available.

When the practice is closed out of hours services can be accessed via the NHS 111 service.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Family planning services	Good governance systems and processes were not always effective or followed. In particular:
Maternity and midwifery services	There was a lack of oversight to ensure policies and procedures regarding medicines management and effective management of patients was applied.
Surgical procedures	Safety alerts were not always followed. For example,
Treatment of disease, disorder or injury	<ul style="list-style-type: none">• There were 39 female patients of child-bearing age who were prescribed medicines that may cause side-effects in pregnancy. We reviewed 5 of these patients and found 3 had effective contraception in place. There was no documentation to show any of the patients had been informed of the risk of these medicines in pregnancy.• We found 50 patients were prescribed a specific medicine to treat diabetes that had a rare but serious side effect. A safety alert issued in 2019, advised clinicians to ensure patients sought urgent medical attention if they experienced symptoms. A sample of 5 of the 50 records were reviewed and there was no evidence to suggest patients had been informed.
	A review of the patient record system showed the practice had carried out 261 medicine reviews in the previous 12 months. We reviewed 5 patients and found documentation was not fully detailed. For example, 2 patients were prescribed high strength pain relief medicines. It was noted that compliance was checked. However, there was not a record of whether the medicines were effective. Two of the reviews had not considered all the medicines prescribed to the patients.
	The monitoring of patients with poorly controlled diabetes was not consistent.

This section is primarily information for the provider

Requirement notices

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.