

Central Lakes Medical Group

Inspection report

The Health Centre
Rydal Road
Ambleside
Cumbria
LA22 9BP

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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?

Requires improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Central Lakes Medical Practice on 7 March 2019. We had previously inspected the practice in May 2015; this inspection had resulted in an overall rating of Good. The full comprehensive report following the inspection in May 2015 can be found on our website here:

<https://www.cqc.org.uk/location/1-549363386>.

We carried out our most recent inspection in order to ensure the practice was continuing to maintain good standards.

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 have rated this practice as requires improvement overall and good for all population groups.

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

- The risk of fire was not properly mitigated at Hawkshead branch surgery.
- Risks in relation to recruitment processes and pre employment checks were not always comprehensively mitigated.
- Infection control audits had not been fully completed at Hawkshead branch surgery.
- The provider had not assured itself that processes around the management of incoming correspondence were safe.
- It was not possible to tell who had received what training from the training records.

We rated the practice as **requires improvement** for providing well-led services because:

- The practice governance arrangements had failed to note that recruitment processes were not sufficiently robust, audits were incomplete and risk assessments had not been carried out.

However, we also found that:

- Patient feedback was strongly and consistently positive about the standard of care and treatment received. The practice's results from the national GP patient survey were higher than local and national averages.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

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.

(Please see the specific details on action required at the end of this report).

In addition, the provider **should**:

- Improve the identification of carers to enable this group of patients to access the care and support they need.
- Improve communication so staff are aware of leadership roles within the practice team.

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

Professor Steve Field CBE FRCP FFPH FRCGP
Chief Inspector of General Practice

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

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

Background to Central Lakes Medical Group

Central Lakes Medical Practice (The Health Centre, Rydal Road, Ambleside, Cumbria, LA22 9BP.) is situated in a purpose build premises close to the centre of the Ambleside. Car parking facilities are available outside the building. It has a branch surgery at Hawkshead (Hawkshead Surgery, Bragg Field, Hawkshead, LA220QW) The practice provides services to a patient list of approximately 5000 patients many of whom are holiday makers and seasonal workers in the area.

Male and female life expectancy (79 and 86 years respectively) for the practice population is slightly above local and national averages for males (both 79 years) and above local and national averages for females (82 and 83 years). The practice's patient population consists of a slightly higher proportion of older people, with 22.7% being over the age of 65 (National average 17.1%). There is a low population of people under 18 equating to 12.2% with the national average being 20.8%. The practice also caters for a comparable proportion of patients with a long-standing health condition at 53.9%, compared to the national average of 53.6%.

Information published by Public Health England rates the level of deprivation within the practice population group as nine on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is staffed by three GP partners (two female and one male). The GPs are supported by practice nurses and health care assistants. The clinical staff are supported by a practice manager and a team of administration and reception staff.

The practice is a training practice for doctors to become GPs.

Outside normal surgery hours, patients are advised to contact the out of hours service, offered locally by the provider Cumbria Health on Call.

The practice is registered with CQC to provide the regulated activities diagnostic and screening procedures, treatment of disease disorder and injury, maternity and midwifery services and surgical procedures.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions were not operated effectively, in particular in relation to the recruitment checks being undertaken appropriately.• The provider governance arrangements were not sufficiently robust and had failed to identify issues around fire, health and safety and infection control at the Hawkshead branch surgery.• Arrangements for the sorting and prioritisation of important mail were not sufficiently robust.• Recording of training that people had received was unclear.

This section is primarily information for the provider

Enforcement actions

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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance requirement notice
Family planning services	
Surgical procedures	
Treatment of disease, disorder or injury	