

Hilltops 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

Requires improvement 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced inspection at Hilltops Medical Centre on 15 October 2019 as part of our inspection programme. We decided to undertake an inspection of this service following our annual review of the information available to us. This inspection looked at the following key questions:

- Safe
- Effective
- Well-led

At the last inspection in November 2018 we rated the practice as good overall and requires improvement for providing safe services because:

- Risks to patients and staff had not adequately been assessed and monitored, in particular with regard to infection prevention and control and blank prescription stationery security.
- The practice did not evidence a consistent approach to recruitment through the provision of appropriate recruitment records.

At this inspection, we found that the provider had taken some action to improve in these areas. In particular, concerns with blank prescription stationery security had been resolved.

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. The practice was rated as requires improvement for providing safe and well-led services.

We found that:

- 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.

- The way the practice was clinically led and managed promoted the delivery of high-quality, person-centre care.
- There was a clear leadership structure. However, support for effective practice management was lacking. The practice proactively sought feedback from staff and patients, which it acted on.
- There was evidence of continuous learning and improvement at all levels of the organisation.

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

- Systems and processes to reduce risks to patient and staff safety needed strengthening.
- Risks to patients and staff had not adequately been assessed, in particular those relating to staff immunity status, infection prevention and control, appropriate background checks for staff, significant events and safety alerts.

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

- Systems and processes to reduce risks to patient and staff safety were lacking.
- There was limited evidence of improvements made following our inspection in November 2018.

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

- Ensure care and treatment is provided in a safe way to patients.

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

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

- Undertake risk assessments for any storage of hazardous substances for example, liquid nitrogen, storage of chemicals.
- Ensure all policies, procedures and protocols are regularly reviewed and appropriate for implementation.
- Maintain accurate recruitment records in line with practice policy and legislative requirements.
- Complete timely appraisals for all staff.
- Improve the support and implementation of practice managerial functions.

Overall summary

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 Primary Medical Services and Integrated Care

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 adviser and a practice manager adviser.

Background to Hilltops Medical Centre

Hilltops Medical Centre provides a range of primary medical services, including minor surgical procedures, from its location at Kensington Drive, Great Holm in Milton Keynes. It is part of the NHS Milton Keynes Clinical Commissioning Group (CCG). The practice holds a General Medical Services (GMS) contract for providing services, which is a nationally agreed contract between general practices and NHS England for delivering general medical services to local communities.

The practice serves a population of approximately 17,300 patients with an age-range in line with local averages. The practice population is largely White British, with 23% of the practice population being from Black and Minority Ethnicity backgrounds. The practice population is rapidly expanding with vast local housing development. The practice had seen an increase of approximately 800 patients over a ten-month period.

According to data published by Public Health England the area falls in the 'second least deprived decile' and is one of little deprivation. Average life expectancy for people living in the area is higher than local CCG and national averages. There is low unemployment and the practice supports patients in an area of new housing expansion.

The clinical team consists of two male senior GP partners, five salaried GPs (two male and three female), three female advanced nurse practitioners (ANP), two female

practice nurses, a diabetic specialist nurse, a paramedic, a male pharmacist (qualified to prescribe) and four health care assistants (one male and three female). The team is supported by a practice manager and a team of non-clinical, administrative staff.

Members of the community midwife and health visiting team operate regular clinics from the practice location. The practice is a training practice and accepts registrars every year. (Registrars are fully qualified and registered doctors training to become GPs). In addition, the practice supports medical students learning to become doctors and receives two new students every six weeks. The practice employs one female regular locum when additional clinical cover is required. Support is also provided by two pharmacists employed by the Milton Keynes Clinical Commissioning Group who visit the practice to support medicines optimisation and management.

The practice operates from a two-storey purpose-built property. Patient consultations and treatments take place on the ground level. There is a large car park outside the surgery, with disabled parking available. There is a pharmacy situated within the building but not attached to the practice.

Hilltops Medical Centre is open between 8am and 6.30pm Monday to Friday. Extended hours are provided on Tuesday, Wednesday and Thursday, when the practice is open from 7am to

6.30pm. Additional appointments are also offered alternate Saturdays, from 8.30am to 11.30am. The out of hours service can be accessed via the NHS 111 service. Information about this is available in the practice and on the practice website and telephone line.

The practice provides family planning, surgical procedures, maternity and midwifery services, treatment of disease, disorder or injury and diagnostic and screening procedures as their regulated activities.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>The provider had failed to do all that is reasonably practicable to mitigate risks to the health and safety of service users of receiving care or treatment.</p> <p>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 receipt and management of relevant Patient Safety Alerts, recalls and rapid response reports issued from the MHRA and through the Central Alerts System (CAS).• Risks associated with the lack of disclosure and barring services (DBS) checks for non-clinical staff had not been assessed.• The management of significant events and infection prevention and control (IPC) needed strengthening.• The practice had not consistently sought assurance on the immunity status of non-clinical staff. The practice had not assessed the resulting risks to patients and staff. <p>This was in breach of Regulation 12(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> |