

Newcastle Medical Centre

Inspection report

Boots The Chemist
Hotspur Way, Intu Eldon Square
Newcastle Upon Tyne
Tyne And Wear
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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

Inadequate



Are services safe?

Requires improvement



Are services effective?

Inadequate



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Inadequate



Overall summary

We carried out an announced comprehensive inspection at Newcastle Medical Centre on 25 February. This was as part of our ongoing inspection programme and to check on the areas we said the practice should improve on when we inspected in March 2018 (when the practice was rated as requires improvement overall).

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 the last inspection in March 2018 we rated the practice as requires improvement for providing effective, responsive and well led services because:

- Attainment levels for some areas of clinical practice were lower than local and national averages and we were yet to be assured that the changes made would show sustainable levels of performance.
- Patient satisfaction levels (on the National GP Patient survey) were below local and national averages and the practice did not have enough evidence to demonstrate the changes they had made had resulted in a sustainable improvement in patient satisfaction levels.
- We were not assured that the improvements had been fully embedded in the practice culture to ensure that improvement could be sustained. The practices approach to service delivery and improvement was reactive and focused on short term issues.

At this inspection, we found that the provider had addressed some but not all the concerns from the last CQC inspection.

At this inspection, Dr Lloyd Jones was registered as an individual, and as such was also the lead GP within the practice.

We rated this practice as inadequate overall. (Previous rating March 2018 – Requires Improvement; December 2016 and July 2017 – Inadequate)

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

- There was a lack of clinical leadership within the practice.
- Although there were effective arrangements in place to manage the policies, procedures and general management of the practice, there was not effective leadership, governance or strategy to support continued clinical improvement within the practice.
- Clinical attainment across several areas remained low. There was a lack of strategy, analysis, planning and implementation of detailed and achievable plans to support improvement in clinical attainment within the practice. We were not assured, given the governance arrangements in place, that this was likely to change in the future.

We rated the practice as **inadequate** for providing effective services because:

- Patients' needs were not always assessed, and care and treatment was not always delivered in line with current legislation, standards and evidence-based guidance supported by clear pathways and tools.
- Attainment levels for some areas of clinical practice continued to be lower than local and national averages and we were not assured there were effective plans in place to achieve sustainable levels of improvement. There was a lack of clinical leadership to support consistent application of care planning, and adherence to current evidence-based practice guidance.
- There was limited monitoring of the outcomes of care and treatment.

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

- There was an increase to the potential risk of harm for patients as there was limited assurance about safety. The provider could not assure us of effective systems for monitoring of clinical test results, management of changes to a patients' medicine received from other services and communication of patient safety and medicine alerts.

We rated the practice as **good** for providing safe, caring and responsive services because:

- 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.

Overall summary

- The practice had employed five salaried GPs which supported a stable clinical workforce and improved continuity of care. They had improved the complaints procedures to ensure patients were signposted how to escalate their complaint should they remain dissatisfied with the practice's response.

The area where the provider **must** make improvements as they are in breach of regulations is:

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

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the

process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP and a Nurse Practitioner specialist adviser.

Background to Newcastle Medical Centre

The Care Quality Commission (CQC) registered Dr Neil Daniel Lloyd-Jones to provide primary care services to around 15,300 patients from one location, which we visited as part of this inspection:

- Newcastle Medical Centre, Boots the Chemist, Hotspur Way, Intu Eldon Square, Newcastle Upon Tyne, Tyne And Wear NE1 7XR.

Dr Neil Daniel Lloyd-Jones is registered as an individual provider and as such is also the lead GP within the practice.

Newcastle Medical centre provides care and treatment to patients of all ages, based on a General Medical Services (GMS) contract agreement for general practice. The practice is part of the NHS Newcastle Gateshead clinical commissioning group (CCG).

The practice previously offered some private healthcare services for patients. This included those seeking travel vaccinations and advice, through the franchised MASTA travel clinic and some sexual health services through the franchised 'Better to Know' clinic. However, these were on hold at the time of the inspection, as the provider had conditions placed on their registration with the General Medical Council (GMC), which precluded them undertaking work outside the NHS. A salaried GP was in the process of training to lead this work and the practice

had stopped the provision of private healthcare until this training was complete. We have asked the provider to tell us when they plan to begin to provide this service again, so we can continue to monitor any risks this presents.

The surgery is located in Boots the Chemist in Eldon Square shopping centre, Newcastle City Centre. All consultation rooms are on the lower ground floor which can be accessed by stairs, lift or escalator. On-site car parking is not available due to the practice's city centre location but numerous car parks and good transport links are available nearby.

Newcastle Medical Centre provides care and treatment to patients from the Fawdon, Kingston Park, Gosforth, Kenton, Kenton Bar, Cowgate, Fenham, Spital Tongues, Jesmond, West Jesmond and Heaton areas of Newcastle Upon Tyne. The vast majority of patients are students who are studying at local universities and residing in nearby student accommodation. The practice population consists of a higher than average proportion of patients who are students or of working age. 93.3% of patients were reported as being in paid work or full-time education (CCG average 60.6% and England average 61.9%).

The surgery is open from 8am to 6.30pm on a Monday to Friday and from 8.30am to 5pm on a Saturday. The

service for patients requiring urgent medical attention out-of-hours is provided by the NHS 111 service and Vocare which is known locally as Northern Doctors Urgent Care Limited.

At the time of our inspection the practice consisted of:

- One lead GP (male);
- Five salaried GPs (two male and three female);
- A nurse manager, a nurse practitioner and a practice nurse (all female);
- One healthcare assistant (female);
- A practice pharmacist (male);
- An additional pharmacist (male) commissioned by the local clinical commissioning group, works with but is not directly employed by the practice;
- 9 non-clinical members of staff including a business manager, assistant business manager, office manager and a team of receptionists and administrators.

Information from Public Health England placed the area in which the practice is located in fifth most deprived decile. In general, people living in more deprived areas

tend to have a greater need for health services. Average male life expectancy at the practice is 74.4 years, compared to the national average of 79.2 years. Average female life expectancy at the practice is 80.6 years, compared to the national average of 83.2 years. However, only 1.1% of the practices' patient population are in the over 65 age group, with the majority of patients in the range of 15-44 years of age (at 92%). In particular, 64% are in the 20-29 age range (NHS Digital snapshot data December 2018).

70.1% of the practice population were white, 2.4% were mixed race, 21% were Asian, 3.0% were black and 3.4% were other races.

At 10%, the percentage of the practice population reported as having a long-standing health condition was much lower than the CCG average of 52.5% and national average of 51.2%. Generally, a higher percentage of patients with a long-standing health condition can lead to an increased demand for GP services.

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	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>We have imposed conditions on the registration of the provider.</p> <p>The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none">• The provider had not put in place the clinical leadership required to ensure effective governance that supported the quality and safety of the service for patients.• The provider was not familiar with the processes in place for the management of significant events, patient safety alerts and care planning for patients with long term conditions.• The practice's systems to assess, monitor and improve the quality and safety of the service had not been effective at supporting the improvements needed in clinical attainment.
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	