

Launceston Medical Centre

Inspection report

Landlake Road
Launceston
PL15 9HH
Tel: 01566772131
www.launcestonmedicalcentre.com

Date of inspection visit: 16 February 2022
Date of publication: 06/04/2022

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 Launceston Medical Centre on 16 February 2022. Overall, the practice is rated as Requires Improvement.

Safe – Requires Improvement

Effective – Good

Well-led – Requires Improvement

Following our previous inspection on 16 February 2017, the practice was rated Good overall and for all key questions.

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

Why we carried out this inspection

This inspection was a focused inspection. We have inspected and rated Safe, Effective and Well-led domains.

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Cornwall. To understand the experience of GP Providers and people who use GP services, we asked a range of questions in relation to urgent and emergency care. The responses we received have been used to inform and support system-wide feedback.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing,
- Completing clinical searches on the practice's patient records system and discussing findings with 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,
- information from the provider, patients, the public and other organisations.

Overall summary

We have rated this practice as Requires Improvement overall

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm, however we couldn't be assured this was maintained at all times.
- Patients received effective care and treatment that met their needs.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care, however, not all aspects of the governance were managed appropriately and that caused some shortfalls in the managerial overview. Systems were in place to monitor and review risk, however they were not fully embedded.

We found breach of Regulation 17 HSCA (RA) Regulations 2014 Good governance. The provider **must** make sure they are following up to date guidance and have processes in place and follow them to assure themselves that:

- All staff's mandatory training is up to date,
- Infection Prevention Control audit is carried out regularly,
- Emergency medicine is stored safely and securely,
- All long term conditions have appropriate monitoring,
- Relevant clinical staff have regular clinical supervision,
- Patient Group Directions are managed appropriately.

While we found a breach of Regulation 17 HSCA (RA) Regulations 2014 Good governance, we have also found an area of outstanding practice in provider employing full-time clinical psychologist, who is leading a mental health team in the practice and working towards improving access for people with poor mental health by offering up to 25 clinics a week.

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

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 completed clinical searches and records reviews without visiting the location.

Background to Launceston Medical Centre

Launceston Medical Centre is located in Launceston at:

Landlake Road

Launceston

Cornwall

PL15 9HH

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

The practice is situated within the Kernow Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 19,000. This is part of a contract held with NHS England.

Information published by Public Health England shows that deprivation within the practice population group is in the middle decile (five out 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 98.1% White and 0.9% Asian.

There is a team of 15 General Practitioners (GPs). The practice has a team of six nurses who provide nurse-led clinics for long-term conditions. The GPs are supported at the practice by a team of reception/administration staff. The practice manager, operations manager and assistant manager are based at the location to provide managerial oversight.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the GP location.

Extended access is provided locally by LIMI platform, where patients can book video consultation with a GP. Out of hours services are provided by 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	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Surgical procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Treatment of disease, disorder or injury	How the regulation was not being met: The practice had systems and processes in place that were not always operating effectively and failed to enable the registered person to assess, monitor and mitigate the risk relating to the health, safety and welfare of patients. In particular: <ul style="list-style-type: none">• Not all staff had their mandatory training up to date. That included Safeguarding and Basic Life Support training.• Infection Prevention Control audit was not carried out.• The monitoring of some of the long term conditions needed reviewing.• We were not be assured that emergency medicines were stored safely and securely with access restricted to authorised staff.• The clinical staff did not have formal clinical supervision.• Patient Group Directions were not managed appropriately. We found records of staff's names being added to a list post managerial authorisation.
Maternity and midwifery services	This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.