

Newgate Medical Group

Inspection report

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Date of inspection visit: 14-16 September 2021
Date of publication: 27/10/2021

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?		Requires Improvement	
Are services caring?		Good	
Are services responsive to people's needs?		Requires Improvement	
Are services well-led?		Good	

Overall summary

We carried out an announced inspection at Newgate Medical Group between 14 and 16 September 2021. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - requires improvement

Caring - good

Responsive - requires improvement

Well-led - good

Following our previous focused inspection on 24 July 2019, the practice was rated requires improvement overall and for the effective and well-led key questions, and rated good for the responsive key question. We did not inspect the safe and caring key questions during that inspection.

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

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on previous breaches of regulation.

How we carried out the inspection/review

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
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A site visit
- Conducting an electronic staff questionnaire

Our findings

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected

Overall summary

- 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 for all population groups.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- 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 adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.

However:

- Not all staff had completed safeguarding training to appropriate levels for their role.
- The practice's systems for the appropriate and safe use of medicines, including medicines optimisation, required review.
- The practice's process for management of medicine safety alerts required review.
- The practice was not meeting its target for childhood immunisation rates or cervical smear uptake.
- Telephone access and appointment booking processes required further improvement.

We found several areas of outstanding practice:

- The provider had assigned a dedicated GP to provide weekly cover at a large local school, which allowed children and young people to receive care, treatment and medical advice whilst at school.
- The practice employed reception staff who could speak other languages commonly spoken by the local community. This allowed patients to communicate directly with the practice in their own language without the need of an interpreter or translator.
- The practice had developed strong working relationships with several voluntary organisations and charities to allow patients, their families and their carers to receive dedicated help, advice and support.
- The practice participated in several local and national pilots, including a national diabetes reversal pilot and a national weight management pilot.

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

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

Although not a breach of regulations, the provider **should**:

- Improve telephone access to the practice for patients.
- Implement a robust system for the rechecking of staff professional registrations.
- Improve the management of the disposal of sharps bins.
- Improve childhood immunisation and cervical screening rates.
- Implement a robust system for alerting Public Health England of any notifiable diseases.
- Improve systems to identify carers.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Overall summary

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

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, and an additional CQC inspector who spoke with staff using video conferencing facilities and undertook a site visit.

Background to Newgate Medical Group

Newgate Medical Group is located in Worksop at:

Newgate Street, Worksop, Nottinghamshire, S80 1HP.

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

The practice is situated within the NHS Bassetlaw Clinical Commissioning Group (CCG) and Personal Medical Services (PMS) to a patient population of 30,334. This is part of a contract held with NHS England.

The practice is the sole practice within the Newgate primary care network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the fourth lowest decile (4 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 97.0% White, 1.3% Asian, 1.0% Mixed, 0.5% Black, and 0.2% Other.

The age distribution of the practice population closely mirrors the local and national averages.

There is a team of 11 GPs, four advanced nurse practitioners, one physician associate, one paramedic, four pharmacy team members, seven nurses, five healthcare assistants, three first contact physiotherapists and one link worker. The reception and administration teams provide administrative support, with the practice management, operations management and human resources teams providing 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, with patients seen at the practice face-to-face as appropriate.

The practice provides an extended access service, where late evening and weekend appointments are available. Out of hours services are provided by Bassetlaw Hospital.

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 Family planning services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <p>There was no proper and safe management of medicines. In particular:</p> <ul style="list-style-type: none">• Patients prescribed high risk medicines did not always receive the recommended monitoring and tests.• The practice did not store or manage all emergency medicines appropriately.• The practice did not store bottled medical oxygen safely.• The practice's systems for checking the temperatures of medical fridges was not robust.• The practice's systems for checking the expiry dates of medicines and consumables was not effective.• Not all medicine safety alerts had been actioned promptly. <p>Not all of the people providing care and treatment had the qualifications, competence, skills and experience to do so safely. In particular:</p> <ul style="list-style-type: none">• Not all staff had completed safeguarding training to an appropriate level. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>