

# Minster Medical Centre

## Quality Report

Sheppey Community Hospital,  
Plover Road,  
Minster on Sea,  
Minster,  
Kent  
ME12 3LT  
Tel: 01795 877714  
[www.minstermedicalcentre.nhs.uk](http://www.minstermedicalcentre.nhs.uk)

Date of inspection visit: 18 February 2015  
Date of publication: 14/05/2015

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.

## Contents

### Summary of this inspection

Overall summary	1
The five questions we ask and what we found	3

### Detailed findings from this inspection

Our inspection team	5
Background to Minster Medical Centre	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	6

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced focussed inspection on 18 February 2015. During the inspection we spoke with the administrative staff, examined staff files, policies and other documents.

Minster Medical Centre has not received a rating as this was a focussed inspection.

We undertook this inspection because we had received concerning information that indicated that the practice's processes for recruiting staff and for ensuring that staff met the regulatory standards might have been inadequate. Therefore the inspection focussed solely on the provider's compliance with Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

# Summary of findings

Upon inspection we found that the practice's recruitment procedures did meet the regulatory standards.

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

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### **Are services safe?**

Not Applicable

### **Are services effective?**

Not Applicable

### **Are services caring?**

Not Applicable

### **Are services responsive to people's needs?**

Not Applicable

### **Are services well-led?**

Not Applicable

## Summary of findings

# Minster Medical Centre

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our inspection team comprised a CQC inspector.

## Background to Minster Medical Centre

The Minster Medical Group is a GP practice located in an urban area of the Isle of Sheppey in Kent. It provides care for approximately 6000 patients. The practice population is similar to national averages. It has marginally more patients over 65 years than the national average.

It is not an area of high deprivation or of income deprivation. The number of people in paid work or full time education is about three quarters of the national average. It has about 50% more people receiving disability allowance than nationally. It has significantly more nursing home patients than the national average.

There are four GP partners, one female and three male.

The practice has a general medical services (GMS) contract with NHS England for delivering primary care services to local communities and an alternative medical provider service (APMS) contract in respect of other services.

Services are delivered from:

Sheppey Community Hospital,  
Plover Road,  
Minster on Sea,  
Minster,  
Kent.  
ME12 3LT.

## Why we carried out this inspection

We undertook this inspection because we had received concerning information that indicated that the practice's procedures for recruiting staff and for ensuring that staff met the regulatory standards might have been inadequate.

## How we carried out this inspection

Before visiting, we reviewed a range of information that we hold about the practice and asked other organisations to share what they knew. We carried out an announced visit on 18 February 2015. During our visit we spoke with the practice manager. We examined policies, staff files and other documents.

# Are services safe?

## Our findings

### Staffing and recruitment.

The practice had a recruitment policy that set out the standards it followed when recruiting GPs, nursing staff and administrative staff.

We looked at five out of six files for staff that had been recruited after April 2013. These were the staff to whom the requirements relating to workers, as set out in Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, applied. We found that they contained evidence that appropriate recruitment checks had been undertaken prior to employment. For example, proof of identification, references, qualifications, registration with the appropriate professional body and criminal records checks through the Disclosure and Barring Service (DBS).

The practice had a policy that set out the standards it followed when recruiting locum GPs. The practice had a contract with a locum agency. Under this contract the agency undertook to check:

- CV
- GMC status
- CRB disclosure
- Referees
- Verify identification
- Entitlement to work
- Occupational health check

- Inclusion on the performers list
- Annual appraisal
- Medical defence certificate

and they provided a checklist to the practice that demonstrated that they had done so.

The practice checked all the material supplied by the agency and also reviewed:

- CV for qualifications
- GMC register and any restrictions to practise that the locum might have
- The National Medical Performers List (This lists provide an extra layer of reassurance for the public that GPs, practising in the NHS, are suitably qualified, have up to date training, have appropriate English language skills and have passed other relevant checks such as with the Disclosure and Barring Service and the NHS Litigation Authority).

It was the practice's policy that locum staff produced an original document, before being allowed to practise, as proof of identity. In addition to the fact that the locum agency certified that they have examined an original document as part of the process of verifying a person's identity. We found that one locum had been able to practise for two days using a photocopy document. On the third day, when they were still not able to produce an original document, the practice dispensed with their services.

# Are services effective?

(for example, treatment is effective)

## Our findings

Not Applicable

# Are services caring?

## Our findings

Not Applicable



# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

Not Applicable

## Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

### Our findings

Not Applicable