

Oaklands Health Centre

Inspection report

Stade Street

Hythe

Kent

CT21 6BD

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www. www.oaklandshealthcentre.com

Date of inspection visit: 09/04/2016

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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?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Oaklands Health Centre on 9 April 2019 under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions.

At this inspection we followed up on breaches of regulations identified at a previous inspection on 16 March 2018.

At the last inspection in March 2018 we rated the practice as requires improvement overall because we had found that arrangements were ineffective for:

- Staff checks for recruitment.
- safeguarding and safety training
- general staff training
- formal locum GP induction.
- implementing new guidance

At this inspection most of these had been addressed.

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. The factors causing the practice to be rated as requires improvement impacted all the population groups and so we have rated all population groups as requires improvement.

We have rated this practice as requires improvement for providing safe services because:

- The practice did not have effective arrangements for the monitoring and actioning medicines safety alerts.

We have rated this practice as requires improvement for providing effective services because:

- The follow up system to improve quality outcomes for patients with diabetes was not effective.

- Patient outcomes could not always be identified as not all audits were used to promote quality improvement.

- Patient consent was not always recorded correctly.

We have rated this practice as requires improvement for providing well-led services because:

- Staff had clear roles and responsibilities, however there were failings in the governance systems and processes at the practice.

We have rated this practice as good for providing caring and responsive services because:

- Staff treated patients with compassion, kindness, dignity and respect.

- Patients could access care and treatment from the practice within an acceptable timescale for their needs.

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

The areas where the provider must make improvements are:

- Ensure that care and treatment is provided in a safe way for service users.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The areas where the provider should make improvements are:

- Improve the identification of carers to enable this group of patients to access the care and support they need.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Please refer to the detailed report and the evidence tables for further information

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. It included a GP specialist adviser and a practice manager specialist advisor.

Background to Oaklands Health Centre

Oaklands Health Centre is located at Stade St, Hythe, Kent. CT21 6BD. The practice is part of a wider network of GP practices. These practices, under the provider Channel Health Alliance, provide a minor illness service, a home visiting service and a physiotherapy service across the South East Kent Coast area.

The practice is registered with the CQC to carry out the following regulated activities; diagnostic and screening procedures, treatment of disease, disorder or injury, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice provides NHS services through a General Medical Services (GMS) contract to 11,500 patients. The practice is part of the South Kent Coast Clinical Commissioning Group Council (CCG) which is made up of 25 general practices.

The practice's clinical team is led by two partners, both male and three salaried GPs, all female. The GP team is supported by locum GPs. There are five practice nurses, There are two healthcare assistants and a phlebotomist. The clinicians are supported by a team of reception, administration and managerial staff.

The patient profile for the practice is different to that nationally. It has approximately twice as many patients aged over 70 and approximately half as many patients aged between 20 and 45. Information published by Public Health England, rates the level of deprivation within the practice population group as seven on the deprivation scale, this scale goes from one to 10, with one being the most deprived. Ninety seven percent of the population is white. Male life expectancy is 80 years compared to the national average of 79 years. Female life expectancy is 85 years compared to the national average of 83 years.

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>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">•The provider did not have effective arrangements in place for the monitoring and actioning medicines safety alerts. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider must establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">•The practice conducted minor surgery but there was no system to check that all histology results (reports that describe the tissue that has been sent for examination) had been received at the practice.•Consent to minor surgery was not audited and the patients consent had not been comprehensively recorded.

This section is primarily information for the provider

Requirement notices

- The arrangements for monitoring clinical outcomes, through the Quality and Outcomes Framework, did not identify clear opportunities for the practice to improve patient outcomes or staff training.

- The arrangements for improving clinical outcomes, through the Quality and Outcomes Framework, was sometimes ineffective, in particular for those patients with diabetes.

- There was ineffective governance of clinical auditing

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.