

# The Quintin Medical Practice

## Quality Report

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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 service

Good



Are services safe?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

The practice was rated requires improvement overall. It is now rated as good overall and good for providing safe services

We carried out a focused inspection on 24 April 2017 to check that the provider had followed their action plan and to confirm that they now met legal requirements. Continued breaches of legal requirements were found during that inspection within the safe domain. After the focused inspection, the practice sent us an action plan detailing what they would do to meet the legal requirements. We conducted a further focused inspection on 11 September 2017 to check that the provider had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements.

During our previous inspection on 24 April 2017 we found the following area where the practice must improve:

- Put a system in place to track the use of blank prescription stationery throughout the practice so that theft or misuse can be identified.

You can read the report from our last inspection, by selecting the 'all reports' link on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

During the inspection on 11 September 2017 we found:

- Effective arrangements for the tracking of blank prescription stationery had been put in place.

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**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?**

The practice is now rated as good for delivering safe services.

At our last inspection on 24 April 2017 we found that the practice did not have an effective system in place for the tracking of blank prescription stationery which meant that theft or misuse could be identified.

**Good**



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The practice was rated as good for the care of older people on 24 April 2017. This rating remains unchanged.

Good



### People with long term conditions

The practice was rated good for the care of people with long-term conditions on 24 April 2017. This rating remains unchanged.

Good



### Families, children and young people

The practice was rated as good for the care of families, children and young people on 24 April 2017. This rating remains unchanged.

Good



### Working age people (including those recently retired and students)

The practice was rated as good for the care of working age people (including those recently retired and students) 24 April 2017. This rating remains unchanged.

Good



### People whose circumstances may make them vulnerable

The practice was rated as good for the care of people whose circumstances may make them vulnerable 24 April 2017. This rating remains unchanged.

Good



### People experiencing poor mental health (including people with dementia)

The practice was rated as good for the care of people experiencing poor mental health (including people with dementia) on 24 April 2017. This rating remains unchanged.

Good



# The Quintin Medical Practice

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

The inspection was undertaken by a CQC inspector.

## Background to The Quintin Medical Practice

The Quintin Medical Practice provides general medical services to approximately 8,400 patients in the town of Hailsham and surrounding areas. It provides services from three different locations. The main surgery being The Quintin Medical Centre and two branch surgeries, Punnetts Town and Battle Road Medical Centre.

The practice has two GP partners and four salaried GPs. Two of the GPs are male and four are female. There are four practice nurses, two health care assistants, a paramedic practitioner, a practice manager, a finance manager and a team of administrative, secretarial and reception staff.

Data available to the Care Quality Commission (CQC) shows the practice serves a significantly higher number of patients over the age of 65 when compared to the national average although this is similar to the clinical commissioning group (CCG) average. The number of patients aged between 0-4, 5-14 and under 18 years of age is in line with CCG and national averages. Income deprivation is relatively low.

The Quintin Medical Centre, Hawkswood Road is open from 8am until 6.30pm Monday to Friday. Extended hours operate at this location on a Wednesday evening from 6.30pm until 8pm. The Punnetts Town branch is open from 8am until 12.30pm on a Monday, Tuesday, Wednesday and Friday and from 7.30am until 12.30pm every Thursday. The

Battle Road Medical Centre is open from 8am until 6.30pm Monday to Friday. Appointments can be booked over the phone, on line or in person at the surgery. Patients are provided with information on how to access the duty GP or the out of hour's service by calling the practice.

The practice provides a number of services and clinics for its patients including smoking cessation, asthma, diabetes, cervical smears, childhood immunisations, family planning, travel advice and minor surgery.

The practice provides services from the following locations:-

Quintin Medical Centre,

Hawkswood Road,

Hailsham,

East Sussex.

BN27 1UG

Quintin Medical Centre,

Punnetts Town,

East Sussex.

TN21 9DH

Battle Road Medical Centre

85 Battle Road

Hailsham

BN27 1UA

Our inspection took place at The Quintin Medical Centre, Hawkswood Road.

# Detailed findings

## Why we carried out this inspection

We carried out a comprehensive inspection of this service under Section 60 of the Health and Social Care Act 2008 on 16 September 2016 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Breaches of legal requirements were found. As a result, we undertook a focused inspection on 11 September 2017 to follow up on whether action had been taken to deal with the breaches.

## How we carried out this inspection

During our visit we:

- Spoke with the practice manager.
- Reviewed practice policies and procedures and prescription tracking records.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

# Are services safe?

## Our findings

At our previous inspection on 24 April 2017, we rated the practice as requires improvement for providing safe services. This was because the practice did not have effective procedures for monitoring and managing risks to patient and staff safety. We found that whilst blank prescription forms and pads were securely stored the practice did not have systems in place to monitor their use. These arrangements had improved when we undertook a follow up inspection on 11 September 2017. The practice had now implemented an effective system for tracking the use of blank prescription stationery.

### Overview of safety systems and process

At our last inspection we saw that the practice had updated its policies and procedures for the security of blank prescription stationery. Blank prescription forms and pads were securely stored. The practice had created a system for recording the serial numbers, where, when, and to whom blank prescriptions had been distributed. However, when we looked at the records we saw that they had not been

filled in correctly and were incomplete. For example, the dates ordered, the records of stock, dates received and dates issued to the doctors had not always been filled in. This was contrary to national guidance and the practice's own policy on ensuring the security of blank prescription stationery. The practice, therefore, had not yet put in place comprehensive systems to prevent theft and misuse of blank prescriptions.

During this inspection we saw that the practice had implemented an effective system for tracking the use of pre-printed prescription stationery stock. We saw that prescription stationery was kept in boxes inside a locked cabinet which could only be accessed by authorised personnel. Each day we saw that an accurate and complete record was kept of the distribution of pre-printed prescription form stock within the practice including the serial numbers, where, when and to whom the prescriptions have been distributed. At the end of the day prescription stationery was removed from the printers and returned to the locked cabinets in order to maintain the security of forms when consulting rooms were not in use.