

Dr Cassidy and Partners

Inspection report

1 Perrydown, Wastel
Beanhill
Milton Keynes
Buckinghamshire
MK6 4NE
Tel: 01908679111
www.ashfieldmc.co.uk

Date of inspection visit: 22 January 2019
Date of publication: 18/02/2019

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

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Dr Cassidy & Partners also known as Ashfield Medical Centre, on 16 May 2018. The overall rating for the practice was good with the practice rated as requires improvement for being effective and well-led.

From the inspection on 16 May 2018, the practice was told they must:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the practice was told they should:

- Undertake regular review and analysis of significant events and complaints to identify and trends and areas of risk or improvement.
- Undertake regular fire drills.
- Encourage eligible patients to undertake NHS health checks for those aged 40 to 74 years.
- Continue with efforts to improve uptake of national cancer screening programmes.
- Continue to identify and support carers in their population.
- Continue with efforts to improve patient satisfaction and performance in the national GP patient survey; with particular regard for patient experience during GP consultations and with the telephone system.
- Establish a structured meeting system for the practice team in line with staff feedback.

The full comprehensive report on the inspection carried out in May 2018 can be found by selecting the 'all reports' link for Dr Cassidy & Partners on our website at.

This inspection was an announced comprehensive inspection at Dr Cassidy and Partners undertaken on 22 January 2019 as part of our inspection programme to follow up on concerns identified at our previous inspection.

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 good overall and good for all population groups.

The practice is rated as requires improvement for providing safe services because:

- Not all safety systems were well governed and operating effectively. For example, those related to the management of safety alerts needed strengthening.

We found that:

- When incidents happened, the practice learned from them and improved their processes.
- Patients received effective care and treatment that met their needs.
- Systems for monitoring staff competencies and registrations had been developed.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- Patients we spoke with were positive about improvements made to the appointment system. However, patient's satisfaction in the national GP patient survey with access to the practice through the telephone system was low.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- The practice team displayed a willingness to learn and improve.

The areas where the provider **must** make improvements are:

- Ensure care and treatment is provided in a safe way to patients. (Please refer to the requirement notice section at the end of the report for more detail).

The areas where the provider **should** make improvements are:

- Continue with efforts to identify and support carers within the practice population.
- Continue with efforts to improve patient satisfaction with particular regard to the areas highlighted in the results of the national GP patient survey as being in need of improvement.
- Monitor staff training to ensure timely completion of mandatory training.
- Complete proposed testing for staff to provide assurance on staff immunity status.

Overall summary

- Continue with efforts to reduce prescribing of antibacterial and hypnotic medicines where appropriate.

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

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

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC inspector. The team included a GP specialist adviser and a practice manager specialist adviser.

Background to Dr Cassidy and Partners

Dr Cassidy and Partners, also known as Ashfield Medical Centre provides a range of primary medical services, including minor surgical procedures, from its location at Perrydown, Beanhill in Milton Keynes. It is part of the NHS Milton Keynes Clinical Commissioning Group (CCG). The practice holds a General Medical Services (GMS) contract for providing services, which is a nationally agreed contract between general practices and NHS England for delivering general medical services to local communities.

The practice serves a population of approximately 11,500 patients with slightly higher than average populations of males and females aged 0 to 18 years. There are slightly lower than national average populations of patients aged over 65 years. The practice population is largely White British, with 30% of the practice population being from Black and Minority Ethnicity backgrounds.

Information published by Public Health England, rates the level of deprivation within the practice population group as two on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

The clinical team consists of three male GP partners, a female GP partner, two advanced nurse practitioners (female), two practice nurses (female) and two health care assistants (both female). The team is supported by a practice manager and a team of non-clinical,

administrative staff. Members of the community midwife and health visiting team also operate regular clinics from the practice location. Trust community staff (district nurses) are also based at the premises. The practice is a teaching practice and accepts FY2 doctors every four months. FY2 doctors are trainee doctors in their second year of foundation training, the completion of which allows them to apply for further study and training in a specialised area of medicine. At the time of our inspection there was one FY2 doctor in situ.

The practice operates from a two-storey purpose built property. Patient consultations and treatments take place on the ground level. There is a large car park outside the surgery, with disabled parking available. There is a pharmacy and a dental practice situated within the building but not attached to the practice.

Dr Cassidy and Partners is open between 8am and 7pm Monday to Friday. The out of hours service can be accessed via the NHS 111 service. Information about this is available in the practice and on the practice website and telephone line.

The practice provides family planning, surgical procedures, maternity and midwifery services, treatment of disease, disorder or injury and diagnostic and screening procedures as their regulated activities.

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>The registered person had failed to do all that is reasonably practicable to mitigate risks to the health and safety of service users of receiving care or treatment. In particular we found:</p> <ul style="list-style-type: none">• The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions were not operated effectively, in particular in relation to the receipt and management of relevant Patient Safety Alerts, recalls and rapid response reports issued from the MHRA and through the Central Alerts System (CAS). <p>This was in breach of Regulation 12(2)(b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>