

Tunstall Primary Care

Inspection report

Tunstall Primary Care Centre Alexandra Park, Scotia Road Stoke On Trent Staffordshire ST6 6BE Tel: 03001230978 www.tunstallprimarycare.co.uk

Date of inspection visit: 18 Jun 2019 Date of publication: 12/07/2019

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 focused inspection at Tunstall Primary Care on 18 June 2019 as part of our inspection programme.

At this inspection, we followed up on breaches of regulations identified at our previous inspection in June 2018.

We decided to undertake an inspection of this service following our annual review of the information available to us. This inspection looked at the following key questions:

- Are services safe?
- Are services effective?
- Are services well-led?

We previously carried out an announced comprehensive inspection at Tunstall Primary Care on 22 and 26 June 2018 as part of our inspection programme. The practice was rated good overall and in all key questions except for safe which we rated as requires improvement. Requirement notices in relation to safe care and treatment and fit and proper persons employed were served. The full comprehensive report for the June 2018 inspection can be found by selecting the 'all reports' link for Tunstall Primary Care Centre on our website at www.cqc.org.uk.

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 in all key questions apart from safe which we rated as requires improvement. We rate all the population groups as good apart from families, children and young people which we rated as requires improvement.

We found that:

- Policies for safeguarding vulnerable adults and maintenance of the cold chain had been updated to reflect national guidance.
- Assessment of clinical staff immunity to potential healthcare acquired infections had been completed and risk assessments were in place where required.

- There were systems in place for monitoring uncollected prescriptions and tracking prescription stationery throughout the practice.
- Risk assessments had been completed to mitigate potential risks.
- All of the recommended emergency medicines were available at the main and branch practice.
- Patients prescribed a medicine used in the treatment of depression had been monitored in line with national guidance.
- There had been an improvement in attaining the recruitment documents required and a system of monitoring that professional registrations were in date had been implemented.
- Patients' needs were assessed, and care and treatment were delivered in line with current legislation.
- Staff were consistent and proactive in helping patients to live healthier lives.
- The practice had a clear vision and strategy to provide high quality sustainable care which was supported through a culture of continuous learning.

However:

- Systems for ensuring the practice had correctly identified children at risk were not effective.
- Not all female patients of child bearing age, prescribed a medicine used for the treatment of epilepsy and bipolar disorder, had a pregnancy prevention plan in place.
- The recruitment policy had not been updated to reflect all the recruitment requirements of Schedule 3 of the Health and Social Care Act 2008. Salaried GPs had not been provided with appraisals by the practice.
- Sharps' containers had not been replaced within three months after first use.
- Up to date fire drill logs, and health and safety checks were not readily available at the main practice.

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

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

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

 Monitor that sharps containers are changed within recommended guidelines.

Overall summary

- Continue to support non-clinical and clinical staff to complete safeguarding training at a level appropriate to their role.
- Carry out their plan to provide salaried GPs with annual appraisals.
- Liaise with the landlord of the main practice premises to provide reassurance that fire drills are logged, and health and safety checks are carried out and documented.

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

Dr Rosie Benneyworth BS BM BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care.

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Requires improvement	
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 Care Quality Commission (CQC) lead inspector and included a GP specialist adviser and a practice manager specialist adviser.

Background to Tunstall Primary Care

Tunstall Primary Care delivers services from two locations which we visited during our inspection:

- Tunstall Primary Care, Alexandra Park, Scotia Road Stoke-on-Trent Staffordshire ST6 6BE.
- Packmoor Medical Centre, Thomas Street, Packmoor, Stoke-on-Trent. ST7 4SS

The practice has good transport links and there is a pharmacy located nearby.

The provider is registered with Care Quality Commission (CQC) to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury. These are delivered from both sites.

Tunstall Primary Care is situated within the Stoke-on-Trent Clinical Commissioning Group (CCG) and provides services to 11,840 patients under the terms of a General Medical Services (GMS) contract. A GMS contract is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract. The practice is a training practice for GP registrars and undergraduate medical students from a nearby university.

The provider is a partnership that registered with the CQC in April 2013. The practice employs:

- Three male GP partners, five salaried GPs (four female and one male) and two GP registrars.
- Three practice nurses, two advanced nurse practitioners and a healthcare assistant.
- A practice manager and assistant practice manager.
- A care co-ordinator
- 12 members of administrative staff working a range of hours.

The practice area is one of high deprivation when compared with the national and local CCG area. Demographically 27.2% of the practice population is under 18 years old which is higher than the CCG average of 21.5% and the national average of 20.7% and 12.8% are aged over 65 years. This is lower than the CCG average of 17% and the national average of 17.3%. The percentage of patients with a long-standing health condition is 58.5% which is higher than the CCG average of 56.3% and national average of 51.2%. The National General Practice Profile describes the practice ethnicity as being 86.2% white British, 9.7% Asian, 1.4% black, 2.1% mixed race and 0.5% other non-white ethnicities. Average life expectancy is 76 years for men and 80 years for women compared to the national average of 79 and 83 years respectively.

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	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment How the regulation was not being met: The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:
	 Systems for ensuring the practice had correctly identified children at risk of harm were not effective. Not all patients of child bearing age, prescribed a medicine used for the treatment of epilepsy and bipolar disorder, had a pregnancy prevention plan in place. The recruitment policy had not been updated to reflect all the recruitment requirements of Schedule 3 of the Health and Social Care Act 2008.