

# Sleaford Medical Group

## 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

Are services safe?

# Key findings

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## Letter from the Chief Inspector of General Practice

Sleaford Medical Group (the provider) had been inspected previously on the following dates:

- 13 April 2017 under the comprehensive inspection programme. The practice was rated Inadequate overall and placed in special measures for a period of six months. Breaches of legal requirements were found in relation to governance arrangements within the practice. A warning notice was issued which required them to achieve compliance with the regulations set out in the warning notice by 24 August 2017.
- 20 September 2017 - A focused inspection was undertaken to check that they now met the legal requirements. As the practice had not made all the improvements to achieve compliance with the regulations a letter of concern was sent, and action plans were requested on a fortnightly basis to ensure the required improvements had been put in place.
- 19 December 2017 – a comprehensive inspection following a six month period of special measures. Insufficient improvements have been made such that there remains a rating of inadequate for this inspection. The practice was placed in special measures for a further period of six months. The Care Quality Commission therefore took action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their

registration or to varying the terms of their registration within six months if they do not improve. The service will be kept under review and if needed could be escalated to urgent enforcement action.

Reports from our previous inspections can be found by selecting the 'all reports' link for Sleaford Medical Group on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook this unannounced focused inspection on 20 March 2018 to check that they had now met the legal requirements of the Notice of Decision to impose conditions on their registration which was served on 22 December 2017 in relation to medication reviews. This report only covers our findings in relation to those requirements.

Our key findings from the areas we inspected for this focussed inspection were as follows:

- Since the inspection in December 2017 the practice had taken significant steps in order to ensure patients health was monitored in a timely manner to ensure medicines were being used safely and followed up on appropriately.
- New processes were in place and at the time of this inspection the practice had monitoring systems in place to ensure they were effective and kept patients safe from harm.

The areas where the provider **must** make improvements as they are in breach of regulations are:

# Summary of findings

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

The service will be kept under review and another inspection will be conducted within six months, and if

there is not enough improvement we will move to close the service by adopting our proposal to vary the provider's registration to remove this location or cancel the provider's registration.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**

Chief Inspector of General Practice

# Sleaford Medical Group

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector. The team included a GP Specialist Advisor and a member of the CQC medicines team.

## Background to Sleaford Medical Group

Sleaford Medical Group provides primary medical services to approximately 18,166 patients. It covers Sleaford and surrounding villages.

The practice offered a full range of primary medical services and was able to provide dispensing services to those patients on the practice list who lived more than one mile (1.6km) from their nearest pharmacy premises.

At the time of our inspection the practice had four partners (three male, one female), three salaried GP's, two locum GPs, one HR & Business Manager, one nurse supervisor, four minor illness nurses, eight health care assistants, one treatment room assistant, one practice co-ordinator, two reception supervisors, 10 medical receptionists, one dispensary manager, three dispensers, four dispensary assistants, two dispensary apprentices, 16 administration and data quality staff and one handyman.

The practice is a training practice and on the day of the inspection had three GP trainees. GP trainees are qualified medical practitioners who receive specialist training in General Practice.

The practice has a General Medical Services Contract (GMS). The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities.

Sleaford Medical Group is open from 8am to 6.30pm. Appointments are available from 8.40am to 11.10am and 3.40pm to 5.50pm on weekdays. The practice's extended opening hours on Tuesday, Wednesday and Thursday are particularly useful to patients with work commitments.

Sleaford Medical Group also ran a minor injuries unit (MIU). This was in addition to the GMS contract for the GP practice and was commissioned by the SouthWest Lincolnshire CCG under a service level agreement. The MIU is open from 8.30am until 8pm and on the day appointments are available for patients. The service is provided by practice nurses who have skills and experience in dealing with minor accidents or injuries which have occurred within 48 hours.

On the day appointments are also available for patients who have a minor illness. Appointments are available from 8.40am to 7.30pm. Appointments are bookable on the day with a primary care clinician who works alongside the duty doctor at the practice.

Sleaford Medical Group also provides an urgent care service at weekends and Bank Holidays which opens from 8.00am to 6.00pm. This was in addition to the GMS contract for the GP practice and was commissioned by the SouthWest Lincolnshire CCG under a service level agreement. This service is also available from 6.30pm to 8pm Monday to Friday. On arrival, patients are assessed and the injury treated by a trained nurse or doctor as appropriate. However in some cases it may be necessary to refer patients on to further treatment at a hospital. This service is available to patients whether or not they are registered with a GP, and can provide care for those not living in Sleaford or the surrounding area. The unit can care

## Detailed findings

for patients attending with both minor illnesses and injuries and is a walk in service. The patients' own GP will receive a summary of the care received following the consultation so their notes can be updated accordingly. Any patient who cannot be treated will be referred as appropriate.

The practice is located within the area covered by NHS SouthWest Lincolnshire Clinical Commissioning Group (SWLCCG).

The practice had a website which we found had an easy layout for patients to use. It enabled patients to find out a wealth of information about the healthcare services

provided by the practice. Information on the website could be translated in many different languages by changing the language spoken. For example, patients from eastern europe.

We inspected the following location where regulated activities are provided:-

Sleaford Medical Group, Riverside Surgery, 47 Boston Road, Sleaford, Lincs. NG34 7HD

Sleaford Medical Group had opted out of providing out-of-hours services (OOH) to their own patients. The OOH service is provided by Lincolnshire Community Health Services NHS Trust.

# Are services safe?

## Our findings

We carried out this unannounced inspection to review the practice's systems for appropriate and safe handling of medicines in relation to medication reviews as we found in December 2017 that patients' health was not always monitored in a timely manner to ensure medicines were being used safely and followed up on appropriately.

### At this inspection we found:-

#### Safe and appropriate use of medicines

- Patients' health was now being better monitored to ensure medicines were being used safely and followed up on appropriately. The practice involved more patients in regular reviews of their medicines but further work was needed to embed new practices and improve medical record-keeping.
- We found that reviews of patients medicines had been and were still taking place on the day of the inspection. Since the inspection in December 2017 the provider had provided a report every two weeks which outlined what the process was for patients who required a regular medication review. We were told that all patients were being offered a Face to Face or Telephone consultation where appropriate. Patients with long term conditions were being invited for an annual review and patients that declined or did not attend would be picked up in the new recall system that the practice had put in place. If a patient received a telephone consultation and further concerns were found the patient would be offered a face to face appointment to discuss further. On the patient electronic system an alert/icon was now in place on the patient record. This would enable clinicians to see when a medication review was due. In future information would also be added to the back of the patient prescription and letters would be sent out inviting patients for their review. The management team would now review medication review data at quality meetings going forward to ensure the process put in place was effective.
- The practice told us they had reviewed the system in place for the call and recall of patients to ensure going forward that patients with long term conditions and those on high risk medicines were monitored and involved in regular reviews of their medicines. On the day of the inspection the provided us with a number of lists of patient searches. We selected at random and looked at 40 patient records on Systm One (patient electronic record system).
- We reviewed 40 patient records in detail and found 37 of these patients had received a medicines review with an appropriate clinician within the last 12 months.
- 24 out of these 40 medication reviews had been carried out since our December 2017 inspection. These were well documented in 54% of records we looked at, but there was still room for further improvement in 46% where areas such as compliance, adverse effects, patient understanding of treatment, advice given and the rationale for prescribing some medicines had not been well recorded.
- We saw an increase in the number of patients who had received either a face to face or telephone review since our last inspection. Conducting a medicines review in discussion with the patient is particularly important for people who may be on multiple medicines, high risk medicines, or those with long term conditions. This is because it gives the doctor and patient the opportunity to discuss medicines compliance, adverse effects, and whether the medicine remains safe and appropriate for the patient.
- We found that the system in place for the management of high risk medicines included regular monitoring in accordance with national guidance. In patient records we looked at we found that patients on these medicines had been reviewed, were managed appropriately and regular monitoring had taken place and had been recorded in their medical notes.
- We also reviewed two complaints in relation to the safe management of medicines and found that both had been investigated in a satisfactory manner and one had included a reference to a recent Medicines and Healthcare products Regulatory Agency (MHRA) alert from November 2017 which related to a medicine that could give patients an irregular heartbeat.
- We will be undertaking a further inspection at Sleaford Medical Group in the next few months and will look again at medication reviews to ensure that the process has been embedded.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance  Continue to review the system in place in order to ensure patients health is monitored in a timely manner to ensure medicines are being used safely and followed up on appropriately.  This was in breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	