

# St Werburgh Medical Practice

#### **Inspection report**

98 Bells Lane Hoo Rochester Kent ME3 9HU Tel: 01634250523 www.stwerburgh.co.uk

Date of inspection visit: 19 June 2020 Date of publication: 03/08/2020

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.

## Overall summary

We carried out this inspection, at short notice to the provider, on 19 June 2020 to confirm that the practice had carried out their plan to meet the legal requirements in relation to these breaches in regulations. This report only covers findings in relation to those requirements. The practice was not rated as a consequence of this inspection.

We previously carried out an announced comprehensive inspection at St Werburgh Medical Practice on 5 and 6 November 2019 to confirm that the practice had carried out their plan to meet the legal requirement in relation to the breaches in regulations that we identified in our previous inspection on 20 November 2018. The overall rating for the practice was inadequate and the service was placed into special measures. Warning notices were issued against Regulation 12 (1) Safe care and treatment), Regulation 17 (1) Good governance and Regulation 18 (1) Staffing, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The details of these can be found by selecting the 'all reports' link for St Werburgh Medical Practice 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 found the provider has made some improvements including:

- Staff had received appraisals since our inspection on 5 and 6 November 2019.
- Management of the cold chain for the safe storage of medicines.

We found the provider had not made sufficient improvement in providing safe services regarding:

- There were gaps in the systems and processes to keep people safe and safeguarded from abuse.
- There were gaps in arrangements to assess, monitor and manage risks.
- Staff did not always have the information they needed to deliver safe care and treatment.
- The practice did not have systems for the appropriate and safe use of medicines.

• The practice did not always learn and make improvements when things went wrong.

We found the provider had not made sufficient improvement in providing effective services regarding:

- Patients' needs were not always assessed, and care and treatment was not always delivered in line with current legislation, standards and evidence-based guidance.
- Staff did not work together and with other organisations to deliver effective care and treatment.

We also found additional concerns in providing responsive services regarding:

- The practice did not communicate changes in opening hours clearly to patients.
- Complaints were not always satisfactorily handled in a timely way and complaints were not used to improve the quality of care.

We found the provider had not made sufficient improvement in providing well-led services regarding:

- Leaders could not demonstrate that they had the capacity and skills to deliver high quality sustainable care
- Leaders did not demonstrate that they had a credible strategy to develop sustainable care.
- The overall governance arrangement were ineffective.
- The practice did not have clear and effective processes for managing risks and issues.
- Systems and processes were not operating as leaders intended.
- The practice did not always act on appropriate and accurate information.
- There had not been sufficient improvement since our last inspection to address concerns.

We took urgent enforcement action and served an Urgent Suspension notice on the service provider's registration in respect of the regulated activities carried out at the registered location (St Werburgh Medical Practice, including the two branch practices at Stoke Village Hall and The Healthy Living Centre Gillingham). The urgent suspension took effect on 24 June 2020. We took this action as we believe that a person will or may be exposed to the risk of harm if we did not do so.

We are mindful of the impact of COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the

# Overall summary

COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

#### Our inspection team

Our inspection team consisted of a CQC lead inspector, a GP specialist advisor and a CQC inspection manager.

#### Background to St Werburgh Medical Practice

St Werburgh Medical Practice provides general medical services to approximately 11,150 patients. The two partners who are accountable for the service are also accountable for eight other registered locations providing a range of regulatory activities. This report relates only to the St Werburgh Medical Practice location. One of the partners is a GP and the other is non-clinical, neither of the partners work routinely on site at St Werburgh Medical Practice.

Data available to the Care Quality Commission (CQC) shows the number of patients from birth to 18 years old served by the practice is slightly higher than the average for England and other local practices. The number of patients aged 65 years and over is below the England average. The percentage of registered patients suffering deprivation (affecting both adults and children) is lower than the average for England (fourth most deprived decile).

The practice staff consists of a clinical lead GP, who is supported by five long term locums. This amounts to a whole time equivalent of 2.3 GPs (based on eight sessions per week). They are supported by an advanced nurse practitioner, one diabetic specialist nurse, a locum

respiratory nurse. This amounts to the whole time equivalent of 1.5 nurses. There are two healthcare assistants, an onsite management team and administrative staff and patient services staff.

This service is provided at the following sites and during this inspection we only visited St Werburgh Medical Practice:

St Werburgh Medical Practice, 98 Bells Lane, Hoo, Rochester, Kent, ME3 9HU.

Stoke Village hall, Mallard Way, Lower Stoke, Rochester, Kent, ME3 9ST.

The Healthy Living Centre, Balmoral Gardens, Gillingham, Kent, ME7 4PN.

Patients requiring a GP outside of normal working hours are advised to contact the NHS GP out of hours service NHS 111. Patients are informed how to access this service through the practice website and leaflet and by a recorded telephone message if they call the practice outside normal working hours.

For further details please see the practice website:

This section is primarily information for the provider

## **Enforcement actions**

## 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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment  Urgent Suspension
Surgical procedures	
Treatment of disease, disorder or injury	

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good
Family planning services	governance
Maternity and midwifery services	Urgent Suspension
Surgical procedures	
Treatment of disease, disorder or injury	