

Birchington Medical Centre

Inspection report

Minnis Road Birchington Kent CT7 9HQ

Date of inspection visit: 30 April 2019 Date of publication: 24/06/2019

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 | Requires improvement | |
|----------------------------------|----------------------|--|
| Are services safe? | Good | |
| Are services effective? | Requires improvement | |
| Are services caring? | Good | |
| Are services responsive? | Good | |
| Are services well-led? | Requires improvement | |

Overall summary

We carried out an announced comprehensive inspection at Birchington Medical Centre 30 April 2019 to follow up on concerns identified during our inspection on 28 November 2018.

The practice was first inspected on 17 April 2018 and found to be good overall with requires improvement in safe for their management of medicines. A follow up inspection was conducted on 28 November 2018 and the practice had failed to make sufficient improvement. A warning notice was issued in relation to management of medicines and we found regulatory breaches for safeguarding and poor governance. The practice was inspected on the 22 January 2019 to check compliance with the warning notice issued and we found the practice had met the requirements of the notice. A comprehensive inspection was undertaken on 3 April 2019 to ensure the practice was safe, effective, caring, responsive and well led.

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 requires improvement overall. We found the practice was good in safe, caring and responsive, but requires improvement in effective and well led. They have been rated as requires improvement for all population groups.

We rated the practice **good** for providing safe, caring and responsive care because:

• The practice provided care in a way that kept patients safe and protected them from avoidable harm.

- The practice had improved their management of medicines and had benefited from the appointment of a pharmacist who reviewed medicines for patients.
- Patients feedback on the practice was positive.
- 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.

We rated the practice as **requires improvement** for effective and well led because;

 The overall governance arrangements were not consistently effective for the training, development and appraisal of staff.

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

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

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

- Continue to strengthen monitoring systems to ensure the practice can demonstrate that members of the nursing team are appropriately registered.
- Continue to call monitor, to improve patient confidence in contacting the practice by telephone.

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

Rosie Benneyworth

Chief Inspector of General Practice

Population group ratings

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

Our inspection team

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

Background to Birchington Medical Centre

Birchington Medical Centre provides medical care Monday to Friday 8am to 6.30pm. Once a week the practice operates extended hours until 7.30pm. The practice is situated in the coastal town of Birchington in Thanet, Kent. It provides services to approximately 9000 patients in the locality.

The practice serves an affluent population with low levels of deprivation. It has a lower representation amongst its patient population of patients under the age of 18 years when compared with the local and national average. It provides more services to patients over 65 years of age than the local and national average.

The practice is owned and managed by two GP partners, one female and one male. They are supported by two male regular locum GPs. The practice nursing team consists of an advanced nurse practitioner, nurse prescriber, four practice nurses and four healthcare assistants. The practice employs a community matron and a healthcare assistant to provide outreach care to their elderly and house restricted patients. The practice has a pharmacist who conducts medicines reviews and is currently training to be a prescriber.

The administrative, secretarial and reception team are supported and overseen by the assistant practice manager and practice manager.

The practice does not provide out of hours services to its patients and there are arrangements with another provider (the 111 service/Integrated Care 24 limited) to deliver services to patients when the practice is closed. The practice holds a general medical service (GMS) contract with NHS England for delivering primary medical care services to local communities.

Services are delivered from: Birchington Medical Centre, Minnis Road, Birchington, Kent, CT7 9HQ.

The service is registered to deliver five regulated activities;

- · Diagnostics and screening
- Family planning
- Maternity and midwifery
- Surgical procedures
- Treatment of disease, disorder and injury.

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 | Regulation 17 HSCA (RA) Regulations 2014 Good governance There was a lack of systems and processes established and operating effectively to demonstrate good governance. |
| Treatment of disease, disorder or injury | Governance systems were not effective. The practice maintained a training schedule which showed staff were overdue mandatory training. The practice did not have a system for staff appraisal and could not demonstrate how health professionals maintained and updated their knowledge and skill base. This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. |