

Oakfield Health Centre, Practice 2



Inspection report

Oakfield Health Centre
Off Windsor Road
Gravesend
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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

Overall rating for this location	Requires Improvement	
Are services safe?	Requires Improvement	
Are services effective?	Requires Improvement	
Are services responsive to people's needs?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced inspection at Oakfield Health Centre. We conducted remote clinical searches on the practice's computer system on 3 August 2022 and conducted an onsite inspection of the practice on 4 August 2022 under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions.

The key questions at this inspection are rated as:

Safe – Requires Improvement

Effective – Requires Improvement

Responsive - Good

Well-led – Requires Improvement

Following our previous inspection on 10 January 2017, the practice was rated Good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Oakfield Health Centre on our website at www.cqc.org.uk.

Why we carried out this inspection

This inspection was a focused comprehensive inspection to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection focused on the following:

- Are services safe?
- Are services effective?
- Are services responsive in relation to access?
- Are services well-led?

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider

Overall summary

- Requesting evidence from the provider
- A short site visit

Our findings

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 rated the practice as **Requires Improvement** for providing safe services because:

- Appropriate standards of cleanliness and hygiene were met. However, improvements were required.
- Staff had the information they needed to deliver safe care and treatment. However, improvements were required. For example, oversight of the task and document management system.
- Improvements were required in relation to the monitoring and assessment of patients' health in relation to the use of high-risk medicines.
- Improvements were required in relation to the monitoring of medicines that required refrigeration.
- The practice did not have a documented risk assessment in place relating to some recommended emergency medicines that were not held in the practice. The practice stocked the medicines within 48 hours after the inspection.
- Improvements were required in relation to documenting evidence of learning and dissemination of information.
- Systems for managing safety alerts were not always effective.

We rated the practice as **Requires Improvement** for providing effective services because:

- Patients' needs were not always assessed, and care and treatment were not always delivered in line with current legislation, standards and evidence-based guidance supported by clear pathways and tools.
- Performance relating to cervical cancer screening required improvement.

We rated the practice as **Requires Improvement** for providing well-led services because:

- There were processes for managing risks, issues and performance. However, these were not always effective.

The provider sent evidence to show they had remedied the above findings within 48 hours after the inspection.

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 monitor and check that systems for the monitoring of medicines that require refrigeration are adhered to.

Overall summary

- Continue to implement and monitor the outcome of plans to improve performance relating to the uptake of childhood immunisations and cervical cancer screening.
- Continue to embed processes to ensure learning and dissemination of information is documented in relation to significant events.
- Review processes to ensure accurate read coding within patient care records.

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Oakfield Health Centre, Practice 2

Oakfield Health Centre is located at Off Windsor Road, Kent, DA12 5BW.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the Kent and Medway Integrated Care System and delivers General Medical Services (GMS) to a patient population of about 9,650.

The practice is part of a wider network of GP practices in Dartford, Gravesham and Swanley: Gravesend Alliance Primary Care Network (PCN).

Information published by Public Health England shows that deprivation score within the practice population group is four (out of ten). The lower the score, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 84.7% White, 8.1% Asian, 3.5% Black, 2.3% Mixed and 1.3% Other.

The number of patients aged 18 to 64 closely mirrors the local and national averages. The practice has a slightly higher than average proportion of patients under the age 18 and a slightly lower than average number of patients over the age of 65.

The practice consists of two GP partners (male) and three salaried GPs (male and female). The GPs are supported at the practice by; three advanced nurse practitioners (male and female), two practice nurses (female), one nurse practitioner (female), one healthcare assistant (female), two paramedics (male and female), one physician associate (female) and a team of reception, administration and medicines staff. The practice also employs one locum GP (female) directly.

The practice management team consists of the practice manager, operations manager, administration manager and reception manager; who provide managerial oversight. The practice also has the support of one paramedic, two pharmacists, one physiotherapist and three care coordinators via the NHS England Additional Roles Reimbursement Scheme (ARRS).

The practice is open between 8.30am and 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments. The practice offers extended hours every Monday, Wednesday, Thursday and Friday between 7am and 8.30am and every Tuesday and Wednesday between 6.30pm and 7pm.

Extended access is provided locally by the PCN, where late evening and weekend appointments are available. Out of hours services are provided by NHS 111 and Integrated Care 24 (IC24). NHS 111 and IC24 deals with urgent care problems when GP surgeries are closed.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Systems or processes were not established or where established were not operated effectively to ensure compliance with this part of the above Regulations. In particular:</p> <ul style="list-style-type: none">• Monitoring of some high-risk medicines were not always in line with best practice guidance.• Safety alerts were not always actioned in line with best practice guidance.• Processes for monitoring the task management and document system were not always effective.• Monitoring of patients with some long-term conditions did not always follow best practice guidance (patients with asthma who had been prescribed 12 or more inhalers, patients with asthma who have had two or more rescue steroids, patients receiving treatment for an underactive thyroid and patients with diabetic retinopathy). <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>