

Castle Medical Practice

Inspection report

Delce Road Rochester ME1 2EL Tel: 01634334203

Date of inspection visit: 20 June 2023 Date of publication: 22/08/2023

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? | Good | |
| Are services effective? | Good | |
| Are services caring? | Good | |
| Are services responsive to people's needs? | Good | |
| Are services well-led? | Good | |

Overall summary

We carried out an announced comprehensive inspection at Castle Medical Practice on 20 June 2023. Overall, the practice is rated as good.

The ratings for each key question are:

- Safe good
- Effective good
- Caring good
- Responsive good
- Well-led good

The full comprehensive report can be found by selecting the 'all reports' link for Castle Medical Practice on our website at www.cqc.org.uk.

Why we carried out this inspection:

We carried out an announced comprehensive inspection at Castle Medical Practice on 20 June 2023 under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions. The inspection was planned 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.

How we carried out the inspection:

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Requesting evidence from the provider.
- A site visit.
- Completing clinical searches on the practice's patient records system in line with all data protection and information governance requirements.
- Reviewing patient records to identify issues and clarify actions taken by the provider.

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.
- Information from the provider, patients, the public and other organisations.

We found that:

- The practice had clear systems, practices and processes to keep people safe and safeguarded from abuse.
- Appropriate standards of cleanliness and hygiene were met.
- Staff had the information they needed to deliver safe care and treatment.
- The practice had systems for the appropriate and safe use of medicines, including medicines optimisation.
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Overall summary

- The practice learned and made improvements when things went wrong.
- Patients' needs were assessed, and care and treatment was delivered in line with current legislation, standards and evidence-based guidance supported by clear pathways and tools. The provider was responsive to the findings of our inspection in relation to the care and treatment of patients with some long-term conditions where some improvements were required.
- The practice had a comprehensive programme of quality improvement activity and routinely reviewed the effectiveness and appropriateness of the care provided.
- Staff had the skills, knowledge and experience to carry out their roles.
- Staff treated patients with kindness, respect and compassion. Feedback from patients was positive about the way staff treated people.
- The practice organised and delivered services to meet patients' needs.
- People were able to access care and treatment in a timely way.
- Complaints were listened and responded to and used to improve the quality of care.
- There was compassionate, inclusive and effective leadership at all levels.
- The practice had a culture which drove high quality sustainable care.
- There were clear responsibilities, roles and systems of accountability to support good governance and management.
- There were clear and effective processes for managing risks, issues and performance. Required improvements identified by our inspection were addressed and action taken immediately.
- The practice involved the public, staff and external partners to sustain high quality and sustainable care.

Whilst we found no breaches of regulations, the provider **should**:

- Continue to ensure the practice's computer system alerts staff of vulnerable adults where there are safeguarding concerns as well as all family and other household members of those adults.
- Consider revising medicines management so that all action taken by staff when breaches of the cold chain are identified is recorded to help demonstrate vaccines remain safe to use.
- Continue to ensure best practice guidance is followed when care and treatment is delivered to all patients with long-term conditions.
- Continue improving uptake of childhood immunisations and cervical screening by eligible patients.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Please refer to the detailed report and the evidence tables for further information.

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) Lead Inspector. The team included a GP Specialist Advisor.

Background to Castle Medical Practice

The registered provider is Medway Practices Alliance Limited which is a primary care at scale organisation that delivers general practice services at three registered locations in England.

Castle Medical Practice is located at Rochester Healthy Living Centre, Delve Road, Rochester, Kent, ME1 2EL. The practice is situated within the NHS Kent and Medway Integrated Care Board (ICB) and has a general medical services contract with NHS England for delivering primary care services to the local community.

As part of our inspection we visited Castle Medical Practice, Rochester Healthy Living Centre, Delve Road, Rochester, Kent, ME1 2EL, where the provider delivers regulated activities.

Castle Medical Practice has a registered patient population of approximately 5,020 patients. Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth lowest decile (4 of 10). The lower the decile, 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 8% Asian, 86% White, 2.5% Black, 2.5% Mixed, and 1% Other.

There are arrangements with other providers to deliver services to patients outside of the practice's working hours.

The practice staff consists of both of the provider's clinical directors, 2 salaried GPs, 1 practice manager, 1 practice nurse, 1 healthcare assistant, 1 pharmacist, 1 paramedic, 1 phlebotomist as well as reception staff and other administration staff. The practice also employs locum GPs via an agency when required. Practice staff are also supported by the Medway Practices Alliance Limited management team.

Medway Practices Alliance Limited is registered with the Care Quality Commission (CQC) to deliver the following regulated activities at Castle Medical Practice: diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures; treatment of disease, disorder or injury.