

Ashwell Medical Centre

Inspection report

Ashwell Road
Manningham
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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 caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Ashwell Medical Practice on 13 February 2019. The overall rating for the practice following that inspection was requires improvement. The key questions of caring and responsive along with all population groups were rated as requires improvement. The inspection report for that inspection can be found by selecting the 'all reports' link for Ashwell Medical Practice on our website at.

This inspection was an announced comprehensive inspection, which we carried out on 10 March 2020, to check progress the provider had made to address concerns previously raised and make the necessary improvements.

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 provided by the practice,
- information from the provider, patients, the public and other organisations.

At this inspection we have rated the practice as requires improvement overall, and for providing safe and well-led services. We rated the practice as requires improvement for providing effective services to the population groups of families, children and young people and working age people, and therefore requires improvement for effective overall.

We rated the practice as good for providing a caring and responsive service and for providing care to the four population groups of older people. People with long term conditions, people whose circumstances make them vulnerable, people experiencing poor mental health (including people with dementia).

We found that:

- The practice did not always provide care in a way that kept patients safe and protected them from avoidable harm. This was because the systems in place did not adequately ensure the security of blank prescription

stationery, some Patient Group Directions were not valid, equipment and clinical supplies which were past their use by date were still in use and named patient medicines were kept in unlocked cabinets.

- The practice had recruited new staff to support the running of the service. This included a practice nurse and a patient experience lead.
- Patients did not receive effective care and treatment that met their needs. Key quality indicators showed further reduction in performance including uptake of childhood immunisation and cancer screening.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice patient participation group was committed to supporting patients, particularly with healthy lifestyle interventions, such as healthy eating information events.
- Staff were engaging with patients and providing information for patients whose first language was not English.

The areas where the provider must make improvements are:

- Ensure care and treatment is provided in a safe way to patients.
- 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 encourage and improve uptake rates for childhood immunisations.
- Continue to encourage and improve uptake rates for cancer screening programmes, particularly those relating to cervical screening.
- Develop systems to monitor and track referrals.
- Improve systems for reviewing complaints and concerns to ensure learning arising from these is captured and embedded into processes for continuous improvement.

Population group ratings

Older people	Good	
People with long-term conditions	Good	
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	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser and a second CQC inspector.

Background to Ashwell Medical Centre

Ashwell Medical Centre is located on Ashwell Road, Manningham, Bradford, West Yorkshire BD8 9DP. The practice provides services for around 7,758 patients under the terms of the Personal Medical Services (PMS) contract. The practice building is accessible for those with a mobility issue and has parking on site. The practice is a member of NHS Bradford Districts Clinical Commissioning Group (CCG).

The practice population catchment area is in an area of high deprivation, being classed as within the first most deprived decile in England (with the first decile being the most deprived and the tenth decile being the least deprived). The age profile of the practice shows that it serves a higher than average number of younger people with 33.5% of the practice population being aged under 18 years as opposed to the CCG average of 24% and a national average of 21%. Average life expectancy for the practice population is 75.4 years for males and 80.3 years for females (CCG average is 77.7 years and 81.8 years respectively, and the England average is 79 years and 83 years respectively). The ethnicity of the practice population is predominantly Asian (71%) with 78.5% of the local population belonging to a BME (black and minority ethnic) population group.

Ashwell Medical Centre is registered with the Care Quality Commission to provide:

- Diagnostic and screening procedures
- Family planning,
- Maternity and midwifery services
- Treatment of disease, disorder or injury.

Ashwell Medical Centre is a training practice, and staff within the practice are accredited GP trainers and appraisers. The clinical team consists of two male and two female GPs (three GP partners and one salaried GP); two GP registrars (female) and one FY2 Doctor (male). In addition, the wider clinical team consists of one advanced nurse practitioner (female), one advanced practitioner (female), one senior practice nurse (female) and two (female) practice nurses and four healthcare assistants.

The clinical team is supported by a practice manager, an assistant practice manager, a data manager, a patient experience lead and a team of reception and administrative staff. The previously awarded ratings are displayed as required in the practice and on the practice's website.

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 Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>The equipment being used to care for and treat service users was not safe for use. In particular:</p> <ul style="list-style-type: none">• We found an opened swab kit present amongst other medical supplies.• Expired equipment and supplies were present amongst other items which were ready to use. <p>There was no proper and safe management of medicines. In particular:</p> <ul style="list-style-type: none">• The provider had failed to ensure the proper and safe management of named-patient medicines found in a number of rooms, which were all unlocked in the morning and then locked when the practice closed. These were all present in unlocked cabinets.• Blank prescriptions were not recorded or tracked adequately in line with NHS Counter Fraud guidance. <p>Managing and storing substances and equipment safely, whilst mitigating infection control risks was limited.</p> <p>In particular:</p> <ul style="list-style-type: none">• Processes for managing all substances hazardous to health were incomplete, with data sheets not present for all substances and cleaning items stored in multiple locations including an upstairs shower.• Infection prevention and control risks had not been completely mitigated, for example, waste bins which were not lidded were present in a number of clinical rooms and patient toilets.• There were lack of processes for ensuring equipment was regularly cleaned and synchronised where required.

This section is primarily information for the provider

Requirement notices

This was in breach of Regulation 12 (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Regulated activity

Diagnostic and screening procedures
Family planning services
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

How the regulation was not being met:

There was a lack of oversight of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.

In particular we found:

The provider did not have a system in place to monitor equipment and supplies, to remove items which had passed their use by dates, or to monitor checks of emergency medication and equipment

Confidentiality was not consistently maintained.

In particular we found:

- Confidential patient test results present in amongst management files.
- Confidential patient feedback present in amongst other management files.

This was in breach of Regulation 17(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014