

Brook Medical Centre

Inspection report

Ecton Brook Road
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NN3 5EN
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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 Brook Medical Centre on 6 November 2019 as part of our inspection programme. This was the first inspection at the practice under its current registration.

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 and effective services because:

- The practice did not have clear systems and processes to keep patients safe.
- Receptionists had not been given sufficient guidance on identifying deteriorating or acutely unwell patients. They were not always aware of actions to take in respect of such patients.
- There was no fire risk assessment, health and safety risk assessment or premises risk assessment in place.
- Staff were not clear on who the safeguarding lead was at the practice.
- There was limited monitoring of the outcomes of care and treatment and more clinical oversight was needed.
- Some performance data was below local and national averages.

We rated the practice as **good** for providing caring and responsive services because:

- 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 providing well-led services because:

- Some of the overall governance arrangements were ineffective due to a lack of clinical oversight.
- The practice did not have clear and effective processes for managing risks, issues and performance.
- The practice did not always act on appropriate and accurate information.

These areas affected all population groups so we rated all population groups as **requires improvement**.

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.

(Please see the specific details on action required at the end of this report).

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

- Ensure clinical waste is safely managed in line with the practice's policy.
- Review information and awareness for reception and administrative staff in relation to recognising and managing sepsis.
- Review arrangements for storing blank prescriptions safely.
- Strengthen the induction process for locum GPs and the supervision and appraisal system for all staff working at the practice.

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

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 nurse specialist advisor.

Background to Brook Medical Centre

Brook Medical Centre is located on Ecton Brook Road, Northampton, NN3 5EN. The provider is the owner of the premises and was looking to extend the building at the time of our inspection. The practice is part of a wider network of GP practices within Northamptonshire. The practice serves the local community, which has been subject to significant housing development over recent years, resulting in an increase in patient numbers at the practice.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice provides NHS services through a General Medical Services (GMS) contract to 6,359 patients. The practice is part of the City Clinical Commissioning Group (CCG) which is made up of 69 general practices.

The practice has three GP's and a regular locum locum GP. The practice employs four advance nurse

practitioners, two practice nurses and two health care assistants as well as a team of administrative and reception staff. The practice manager oversees the running of the practice.

Standard appointments with GPs and nurse practitioners are 15 minutes long. Standard appointments with practice nurses are 10 minutes long. Patients who have previously registered to do so may book appointments online. The provider can carry out home visits for patients whose health condition prevents them attending the surgery.

The practice has opted out of providing an out-of-hours service. However, the provider is available outside usual surgery hours, with the practice's phone line being routed to an answering service, which will pass on messages. Otherwise, patients calling the practice when it is closed relate to the local out-of-hours service provider via NHS 111.

The patient profile for the practice has an above-average under 18 population. The locality has a higher than average deprivation level.

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	Regulation 17 HSCA (RA) Regulations 2014 Good governance There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	