

# Kingfisher Family Practice

## Inspection report

Retford Primary Care Centre  
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Date of inspection visit: 14 August 2019  
Date of publication: 11/10/2019

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?

Requires improvement



Are services effective?

Good



Are services well-led?

Requires improvement



# Overall summary

We carried out an announced focused inspection at Kingfisher Family Practice on 14 August 2019 as part of our inspection programme.

We decided to undertake an inspection of this service following our annual review of the information available to us. This inspection looked at the following key questions:

- Are services safe?
- Are services effective?
- Are services 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 rated the practice as **Requires Improvement** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe.
- The practice did not have appropriate systems in place for the safe management of medicines.
- Recruitment procedures had not been followed.

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

- The practice did not have clear and effective processes for managing risks.

We rated the practice **Good** for providing effective services because:

- Patients received effective care and treatment that met their needs.

Following the inspection, the practice provided a detailed action plan and evidence that some areas of risk had been immediately addressed.

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

- Ensure that care and treatment is provided in a safe way.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed. Ensure specified information is available regarding each person employed.

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

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

- Review and improve processes for enabling GP cards for access to electronic patient records and safeguarding information.
- Review and improve provision of training for staff who undertake chaperone duties.
- Review the fire risk assessment.
- Review and improve systems to monitor staff training.
- Review and improve systems to ensure all PGDs have been signed appropriately.
- Review and improve systems for recording hospital only prescription medicines in patients records.
- Review and improve checks of the emergency equipment in line with the Resuscitation Council guidance.
- Review and implement systems for stock checks of medicines held in doctors' bags.
- Review systems for safe storage and tracking of blank prescriptions through the practice in line with guidance.
- Review and improve systems to ensure National Institute for Health and Social Care Excellence (NICE) guidelines are implemented.
- Review and improve systems to monitor nurse's registration is maintained.
- Review and improve childhood immunisation uptake rates to meet World Health Organisation (WHO) targets.

## **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

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

## Our inspection team

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

## Background to Kingfisher Family Practice

Kingfisher Family Practice is located at Retford Primary Care Centre.

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 has nine GP partners, five male and four female, a nurse practitioner and five practice nurses. There are three healthcare assistants, a phlebotomist, a practice manager, an assistant practice manager and an extensive administrative team.

The practice has a contract with the Bassetlaw Clinical Commissioning Group (CCG). The practice provides General Medical Services (GMS) for 13,682 patients.

The practice catchment area is classed as being within one of the less deprived areas in England. The practice scored six on the deprivation measurement scale; the deprivation scale goes from one to 10, with one being the most deprived. People living in more deprived areas tend to have greater need for health services. National General Practice Profile describes the practice ethnicity as being 97.1% white British, 1.3% Asian, 0.5% black, and 1% mixed and 0.1% other non-white ethnicities.

The practice demographics show a slightly higher than average percentage of people in the 65+ year age group. Average life expectancy is 79 years for men and 83 years for women compared to the national average of 79 and 83 years respectively. The general practice profile shows that 70% of patients registered at the practice have a long-standing health condition, compared to 58% locally and 51% nationally.

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><b>How the regulation was not being met...</b></p> <p><b>There was no proper and safe management of medicines. In particular:</b></p> <ul style="list-style-type: none"><li>• The prescribing competence of non-medical prescribers was not regularly reviewed, and we saw some NICE guidance in relation to prescribing had not been followed by all staff.</li><li>• Medicines reviews and monitoring of high-risk medicines was not being undertaken effectively.</li><li>• Provision of emergency medicines had not been risk assessed in line with the Resuscitation Council recommended list of medicines. Systems to check emergency medicines were not well organised and did not include information such as accurate expiry dates. Emergency medicines were not well organised, and one medicine could not be easily located by staff.</li></ul> <p><b>This was in breach of Regulation 12(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</b></p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p><b>How the regulation was not being met...</b></p> <p><b>The registered person's recruitment procedures did not ensure that only persons of good character were employed. The registered person had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed. In particular:</b></p>

This section is primarily information for the provider

## Requirement notices

- Not all staff had had DBS checks completed prior to employment and there had been no risk assessment to support this decision.
- Satisfactory evidence of conduct in previous employment had not been obtained for a clinician and a non-clinical member of staff.

This was in breach of Regulation 19(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.