

# Brockhurst Medical Centre

## Inspection report

139-141 Brockhurst Road  
Gosport  
Hampshire  
PO12 3AX  
Tel: 02392 583564  
[www.brockhurstmedicalcentre.com](http://www.brockhurstmedicalcentre.com)

Date of inspection visit: 13 May 2019  
Date of publication: 14/06/2019

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?

Inadequate



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



# Overall summary

Previously we carried out an announced comprehensive inspection at Brockhurst Medical Centre on 18 February 2019.

We served warning notices to the provider following a breach of regulation 12, Safe Care and Treatment, of the Health and Social Care Act 2008. We also issued a requirement notice in relation to regulation 17, Good Governance.

We carried out an announced focused follow-up inspection at Brockhurst Medical Centre on 13 May 2019 to confirm that the practice had met the legal requirements in relation to the warning notice served after our previous inspection in February 2019. This report covers our findings in relation to the warning notice only. This means the ratings from our inspection in February 2019 remain the same.

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.

**At this inspection we found that the requirements of the warning notice had been met in relation to Regulation 12, Safe Care and Treatment. However, we identified a further breach of Regulation 12. We served a requirement notice in relation to this breach.**

We found that:

- There were improvements in the Docman system including a written policy and procedure and instructions to staff.
- High Risk medicines were being appropriately monitored.
- The advanced nurse practitioner (ANP) was prescribing within her own competency.

However, we found that:

- There were a high number of documents requiring coding on the Docman system causing a significant delay in diagnoses being coded onto the system.
- In addition, there were errors identified which meant there was a delay for two patients receiving medicines prescribed in secondary care.

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.
- Ensure care and treatment is provided in a safe way.

The full report published on 26 April 2019 should be read in conjunction with this report. The practice remains rated a requires improvement until a full comprehensive inspection is carried out by the Care Quality Commission.

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

**Rosie Benneyworth**

Chief Inspector of General Practice BM BS BMedSci MRCGP

## Population group ratings

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

## Our inspection team

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

## Background to Brockhurst Medical Centre

Brockhurst Medical Centre is located at 139-141 Brockhurst Road, Gosport, PO12 3AX.

The practice provides services under a general medical services contract. The practice has approximately 5,700 registered patients. The practice is in an area of high physical and social deprivation. Gosport falls within the top 10% nationally of areas with high deprivation. The practice is part of the NHS Fareham and Gosport Clinical Commissioning Group.

The practice is registered with the Care Quality Commission 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's clinical team consists of two GP partners with a whole time equivalent (WTE) of 0.7, one full time advanced nurse practitioner partner, one practice nurse and one health care assistant. The administration team is led by a practice business manager and consists of a reception supervisor, four receptionists and four administrators.

The practice has opted out of providing an out-of-hours service. Patients are able to access an out of hours service at Gosport War Memorial Hospital.

You can access practice information online at [www.brockhurstmedicalcentre.com](http://www.brockhurstmedicalcentre.com)

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>The provider had not ensured that care and treatment was provided in a safe way for service users.</p> <p>In particular we found:</p> <ul style="list-style-type: none"><li>• The coding system was not consistently safe. We found errors in coding.</li></ul> <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</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 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>How the regulation was not being met:</b></p> <p>The practice had not ensured that systems and processes had been established and operated effectively to assess, monitor and improve the quality and safety of the services provided.</p> <p>In particular we found:</p> <ul style="list-style-type: none"><li>• There was no oversight of cleaning processes to maintain infection prevention and control and a lack of completed documentation.</li><li>• There was no effective oversight of training to ensure staff completed required training and a lack of previous training records which may have evidenced completed training.</li><li>• No system to ensure clinical supervision was provided regularly.</li><li>• No system to ensure written consent was obtained for minor surgical procedures.</li></ul>

This section is primarily information for the provider

## Requirement notices

- No monitoring to ensure all care plans were current and up to date for patients with long term conditions.
- No documented monitoring to ensure patients referred with a two week wait time were seen within that time.
- No evidence of disseminated learning from complaints.
- No system of regular staff meetings to ensure effective engagement with staff.

**This was in breach of Regulation 17 (1) (a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.**