

# St Mary's Island Surgery

## Inspection report


Edgeway  
St. Marys Island  
Chatham  
ME4 3EP  
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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

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Inadequate 

Are services caring?

Requires improvement 

Are services responsive?

Inadequate 

Are services well-led?

Inadequate 

# Overall summary

We carried out an announced comprehensive inspection at St Mary's Island Surgery on 9 July 2019. The overall rating for the practice was Requires Improvement. The full comprehensive report on the July 2019 inspection can be found by selecting the 'all reports' link for St Mary's Island Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

After our inspection in July 2019 the practice wrote to us with an action plan outlining how they would make the necessary improvements to comply with the regulations.

We carried out an announced comprehensive follow-up inspection on 14, 15, 17, 20 and 21 January 2020 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 9 July 2019. This report covers findings in relation to those requirements.

## This practice is now rated as Inadequate overall.

The key questions at this inspection are rated as:

Are services safe? – Inadequate

Are services effective? – Inadequate

Are services caring? – Requires Improvement

Are services responsive? – Inadequate

Are services well-led? – Inadequate

We rated the practice as **Inadequate** for providing safe services because:

- The practice needed to make further improvements to systems, practices and processes to help keep people safe and safeguarded from abuse.
- The practice needed to make further improvements to the way risks to patients, staff and visitors were being assessed, monitored or managed.
- Although the practice had made some improvements, staff still did not always have the information they needed to deliver safe care and treatment.
- The practice needed to make further improvements to the arrangements for medicines management to help keep patients safe.

We rated the practice as **Inadequate** for providing effective services because:

- Care and treatment were still not always delivered in line with current legislation, standards and evidence-based guidance.
- The practice needed to make further improvements to their programme of quality improvement activity and how they routinely reviewed the effectiveness and appropriateness of the care provided.
- Child immunisation uptake rates were still lower than the target percentage of 90% or above in all four indicators.
- The practice's performance in four out of five cancer indicators had deteriorated.
- All staff were still not up to date with all essential training.
- All staff were still not receiving regular appraisals.
- The practice did not always act on incoming correspondence from other organisations in a timely manner.

We rated the practice as **requires improvement** for providing caring services because:

- National GP patient survey results had improved since our last inspection in July 2019 and feedback we received from patients was predominantly positive about their experience of being involved in decisions about care and treatment. However, we also received negative feedback from patients about the care they received regarding: some staff being rude; delays with referrals to other providers for tests; investigations and treatment not being carried out in a timely manner; and difficulties in obtaining repeat prescriptions.

We rated the practice as **inadequate** for providing responsive services because:

- The practice organised services to meet patients' needs. However, there were still not sufficient staff with which to deliver services to meet patients' needs.
- Requests for home visits were still not always being triaged by a clinician in a timely manner.
- People were still not able to access care and treatment from the practice within an acceptable timescale for their needs.

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

- Local clinical leadership was now limited, remained complex and still did not always function as intended by the provider.

# Overall summary

- The processes and systems to support good governance and management were not always effective.
- The practice needed to make further improvements to their processes for managing risks and issues.
- The practice needed to make further improvement to adequately manage and improve some performance that fell below local and national averages.
- Completed clinical audit cycles that drove improvement were limited.
- The practice did not always act upon incoming appropriate and accurate information.

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.
- Ensure sufficient numbers of suitably qualified, competent, skilled and experienced persons are deployed to meet the fundamental standards of care and treatment.
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out their duties.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.

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

- Stock the emergency antibiotic cefotaxime as soon as it becomes available again to order.
- Provide details of the Parliamentary and Health Service Ombudsman when replying to all complainants.
- Revise the system to help keep all governance documents up to date.

I am placing the service in special measures. Services placed in special measures will be inspected again in six months. If insufficient improvements have been made such that there remains a rating of Inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement, we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service reassurance that the care they get should improve.

**Dr Rosie Benneyworth** MB BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

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

## Population group ratings

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

## Our inspection team

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

## Background to St Mary's Island Surgery

- The registered provider is DMC Healthcare Limited which is a primary care at scale organisation that delivers general practice services at four registered locations in England.
- St Mary's Island Surgery is located at Edgeway, St Mary's Island, Chatham, Kent, ME4 3EP. The practice has an alternative provider medical services contract with NHS England for delivering primary care services to the local community. The practice website is [www.stmarysislandsurgery.co.uk](http://www.stmarysislandsurgery.co.uk).
- As part of our inspection we visited St Mary's Island Surgery, Edgeway, St Mary's Island, Chatham, Kent, ME4 3EP as well as: Sunlight Surgery, 105 Richmond Road, Gillingham, Kent, ME7 1LX; Pentagon, Pentagon Shopping Centre, 30-34 Military Road, Chatham, Kent, ME4 4BB; Medway NHS Healthcare Centre, Balmoral Gardens Healthy Living Centre, Green Suite, Gillingham, Kent, ME7 4PN; and Twydall Green, Gillingham, Kent, ME8 6JY, where the provider delivers registered activities.
- St Mary's Island Surgery has a registered patient population of approximately 28,500 patients.
- There are arrangements with other providers (MedOCC) to deliver services to patients outside of the practice's working hours.
- The practice staff consists of two salaried GPs (male), one advanced nurse practitioner (female), two practice nurses (female), two healthcare assistants (female), one pharmacist practitioner (female), two pharmacists (female), two assistant practice managers, as well as reception and administration staff. The practice also employs locum GPs directly as well as via an agency. Practice staff are also supported by the DMC Healthcare Limited management staff.
- St Mary's Island Surgery is registered with the Care Quality Commission to deliver the following regulated activities: diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures; treatment of disease, disorder or injury.

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>Care and treatment was not always provided in a safe way for service users.</b></p> <p><b>The service provider was not:</b></p> <p><b>Assessing the risks to the health and safety of service users of receiving the care and treatment and doing all that is reasonably practicable to mitigate any such risks. In particular:</b></p> <ul style="list-style-type: none"><li>• The fire risk assessment for the Pentagon branch surgery stated that the premises was the Sunlight Centre branch surgery.</li><li>• Fire extinguishers at the Pentagon branch surgery were overdue maintenance.</li><li>• Fire drills at the Sunlight Centre branch surgery and the Pentagon branch surgery were overdue.</li><li>• The broken and loose closure mechanism of the front door to St Mary's Island Surgery had not been identified by the practice's health and safety risk assessment and was not included in any action plan.</li><li>• The project plan document that listed planned improvements to St Mary's Island Surgery did not contain any timescales for the listed works.</li><li>• Loose tape on the floor of the reception area at the Pentagon branch surgery had not been identified by the health and safety risk assessment.</li><li>• There was no effective system for the routine management of legionella at the Sunlight Centre branch surgery, the Pentagon branch surgery, the Medway NHS Healthcare Centre branch surgery and the Twydall Green branch surgery.</li></ul> <p><b>Ensuring that there were sufficient quantities of equipment or medicines supplied by the service provider to ensure the safety of service users and to meet their needs. In particular:</b></p>

This section is primarily information for the provider

## Requirement notices

- There was inconsistent provision of home visit bags for staff to use across St Mary's Island Surgery and its branches.
- There were no spare defibrillation pads at the Sunlight Centre branch surgery.
- There was no diclofenac available for emergency use at the Twydall Green branch surgery.

### **Ensuring the proper and safe management of medicines. In particular:**

- Six Patient Group Directions (PGDs) at St Mary's Island Surgery had expired.
- Nine PGDs at the Sunlight Centre branch surgery were invalid.
- Medicines that required refrigeration were not always stored in line with Public Health England guidance at the Sunlight Centre branch surgery, the Pentagon branch surgery, the Medway NHS Healthcare Centre and the Twydall Green branch surgery.
- Incoming correspondence regarding changes to patients' prescribed medicines was not always managed in a timely manner.

### **Assessing the risk of, and prevent, detect and control the spread of, infections, including those that were healthcare related. In particular:**

- The infection prevention and control audits at St Mary's Island Surgery and Medway NHS Healthcare Centre branch surgery were incomplete.
- The infection prevention and control risk assessment action plan did not contain any action / solution to the issues of carpeted floors in rooms at St Mary's Island Surgery where invasive procedures were carried out.
- Clinical waste was not always managed in line with current best practice guidance at the Twydall Green branch surgery.

**This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.**

## Regulated activity

Diagnostic and screening procedures  
Family planning services

## Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing

This section is primarily information for the provider

## Requirement notices

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

The service provider had failed to deploy sufficient numbers of suitably qualified, competent, skilled and experienced persons in order to meet the requirements of this Part. In particular:

- The lead member of staff for safeguarding only worked at St Mary's Island Surgery two days per week.
- On the day of our inspection of St Mary's Island Surgery, using the practice's own capacity planning matrix, showed that additional staff needed to be employed to provide the number of appointments required per 1,000 patients each week.

This was in breach of Regulation 18(1) 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 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

**Recruitment procedures were not established or operated effectively to ensure only fit and proper persons were employed. In particular:**

- The provider was unable to demonstrate that they had carried out a risk assessment of employing a non-clinical member of staff when convictions were present on their DBS check.
- One reference record for one non-clinical member of staff was from the provider themselves.

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

This section is primarily information for the provider

## Enforcement actions

### 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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance <b>Warning Notice issued.</b>
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	