

Warders Medical Centre

Inspection report

East Street
Tonbridge
Kent
TN9 1LA
Tel: 01732770088

Date of inspection visit: 3 December 2019
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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

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Warders Medical Centre on 3 December 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:

- Safe
- Effective
- Caring
- Responsive
- 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 good overall and for the key questions with the exception of safe which was rated as requires improvement. We rated them as good for all the population groups.

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

- Patients on high risk medicines were not always monitored appropriately.
- Safety alerts were not always acted on.
- Staff were not aware of practice access/storage of midazolam for emergency treatment of seizures. Medicines and prescription security were insufficient.
- Disclosure and barring service checks were not always conducted on relevant staff before they commenced in post.
- There were some gaps in safeguarding and infection control training.
- Staff vaccinations were not monitored in line with Public Health England guidance.

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

- The practice had systems to keep clinicians up to date with current evidence-based practice. We saw that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance.

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

- Staff treated patients with care and compassion.

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

- The practice organised and delivered services to meet patients' needs. Access to appointments was good and patients could access care and treatment in a timely way.

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

- There was a clear leadership structure and staff felt supported by management.

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

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

The provider should:

- Continue to ensure their newly implemented protocol for DBS checks is effective.
- Improve staff vaccination records in line with Public Health England (PHE) guidance.
- Record action and learning from fire drills.
- Continue to monitor their cervical screening and childhood immunisation uptake, in accordance with their action plan.

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	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
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 CQC inspector. The team included a GP specialist advisor and a practice manager specialist advisor.

Background to Warders Medical Centre

Warders Medical Centre is located at East Street, Tonbridge, Kent, TN9 1LA. The practice is located in two buildings, one a converted house and the other a converted bungalow. A branch surgery is located at The Village Hall, Penshurst, Kent, TN11 8BP.

The practice building is arranged over three storeys, with all the patient accessible areas being located on the ground floor. Additionally, there is a ground floor level building a short distance from the main practice, known to staff and patients as 'Little Warders', where patient consultations, out of hours services and a private travel clinic is operated from. At Penshurst Surgery, the practice building is arranged over two storeys, with all the patient accessible areas being located on the ground floor. The practices are accessible to patients with mobility issues, as well as parents with children and babies. Penshurst Surgery is able to provide dispensary services to those patients on the practice list who live more than one mile (1.6km) from their nearest pharmacy premises. The practice is a training practice which hosts medical students, foundation year two students and GP Registrars (ST1 – ST3).

The local clinical commissioning group (CCG) is the NHS West Kent CCG. Warders Medical Centre is registered with

the Care Quality Commission to provide the following regulated activities: Treatment of disease, disorder or injury, Diagnostic and screening procedures, Maternity and midwifery services and Surgical procedures

The practice has approximately 18,487 registered patients. The practice staff consists of nine GP partners (male and female), three female salaried GPs and two (male/female) GP registrars. There were four female practice nurses and two healthcare assistants and a team of dispensers. There was a practice manager, an assistant practice manager and a team of reception and administrative staff.

The practice is in one of the least deprived areas of Kent. A higher than average proportion of patients are in work or full-time education and there is less unemployment among the practice population. There is a higher proportion of patients under the age of 18 and a marginally higher proportion of patients over the age of 75. Life expectancy is higher than average, for men it is 81 years compared with the national average of 79 years and for women it is 86 years compared with the national average of 83 years. There is a significantly smaller proportion of patients living with a long-standing health condition.

Out of hours services can be accessed via the NHS 111 service.

More information in relation to the practice can be found on their website:

www.warders.co.uk

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>There was insufficient safe management of medicines. In particular:</p> <ul style="list-style-type: none">• Patients on high risk medicines were not being sufficiently monitored.• Systems for ensuring medicines and prescription security were insufficient.• The provider had not assessed the risk of not having certain emergency medicines available.• Legionella and health and safety risk assessments had not been carried out. <p>There was additional evidence that safe care and treatment was not being provided. In particular:</p> <ul style="list-style-type: none">• Disclosure and barring service checks were not being obtained before relevant staff commenced in post. <p>This was in breach of regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>How the regulation was not being met...</p> <p>The provider did not always ensure that persons employed by the service in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as necessary to enable them to carry out the duties they are employed to perform. In particular;</p>

This section is primarily information for the provider

Requirement notices

- There were gaps in mandatory training records for some staff, including GPs.

This was in breach of regulation 18 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.