

# Braithwell Road Surgery

## Inspection report

Maltby Service Centre  
Braithwell road  
Maltby  
S66 8JE  
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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 Braithwell Road surgery on 17 December 2018.

At this inspection we followed up on breaches of regulations identified at a previous inspection in April 2018.

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 requiring refrigeration.
- Recruitment procedures had not been followed in the recruitment of non-clinical staff.

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

- There was limited monitoring of the outcomes of care and treatment.
- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.

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

- While the practice had made some improvements since our inspection in April 2018, it had not appropriately addressed the Requirement Notice in relation to health and safety and staff training. At this inspection we also identified additional concerns that may put patients at risk in relation to recruitment and storage of medicines requiring refrigeration.
- Whilst the practice had a clear vision and strategy there was a lack of monitoring to ensure objectives were achieved.
- The overall governance arrangements were not always effective.

- The practice did not have clear and effective processes for managing risks.
- The practice did not always act on appropriate and accurate information.
- We saw little evidence of systems and processes for learning, continuous improvement and innovation.

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

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.
- There were high levels of patient satisfaction with the service.

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 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. 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 update the safeguarding policy and procedure with the new practice manager's details.
- Review and update the children at risk register.
- Review and update systems to check clinical staff registration is up to date.
- Review and improve reception staff training for their role in the management of patients with severe infections such as sepsis.

# Overall summary

- Review systems for checking immunisation status for all staff including GPs in line with the Department of Health Immunisation against infectious disease guidance (the Green Book).
- Review and improve systems for monitoring patients on high risk medicines so the information is accessible to all clinicians.
- Review and improve systems for involvement in monitoring prescribing in the practice.
- Review and improve the complaints procedure to include information about how to escalate complaints.
- Review and improve systems to support the requirements of the duty of candour.
- Review and improve patient engagement.
- Review and improve systems for monitoring curtains in consultation rooms are cleaned in line with current national guidance.

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

**Professor Steve Field** CBE FRCP FFPH FRCGP Chief Inspector of General Practice

## 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 adviser.

## Background to Braithwell Road Surgery

The provider, Dr Chandra Raolu, registered with the CQC in June 2017. He had been one of the partners in the previous provider partnership for the service.

The location, Braithwell Road Surgery, is situated within a purpose-built surgery in a building known as Maltby Services Centre in Maltby, Rotherham. This centre was built in 2008 and provides accommodation for Local Authority offices, leisure facilities and NHS services. The surgery operates over two floors but all the patient facilities are on the ground floor.

The practice provides General Medical Services (GMS) for 3,257 patients in the NHS Rotherham Clinical Commissioning Group (CCG) area. The practice is situated in one of the more deprived areas nationally. The practice has a higher than average number of patients aged over 65 years.

There is a principle male GP and a salaried male GP. The nursing team comprises of one nurse practitioner, a practice nurse and a health care assistant. There is a practice manager and administration and reception teams.

The practice reception hours are 8am to 6.30pm, Monday to Friday. Surgery times are 8am to 6.30pm Monday to Friday. Extended hours are provided 6.30pm to 7.30 pm every Wednesday.

Longer appointments are available for those who need them and home visits and telephone consultations are available as required. Out of hours services are accessed via the practice for pre-bookable evening appointments 6.30pm to 8.30pm and Saturday and Sunday morning appointments provided at local hub surgeries or via NHS 111.

The practice provides the following regulated activities:

Diagnostic and screening procedures

Treatment of disease, disorder or injury

Family planning

Maternity and midwifery services

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 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 registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none"><li>• There was limited evidence of clinical audit of the quality of care and outcomes for patients.</li><li>• There was a lack of management understanding and oversight of health and safety matters including risk assessment.</li><li>• There was a lack of monitoring the cold chain for medicines requiring storage in a refrigerator and associated records had not been maintained appropriately and in accordance with the policy and procedure.</li></ul> <p>This was in breach of regulation 17 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 Treatment of disease, disorder or injury	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p><b>How the regulation was not being met:</b></p> <p>The registered person had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they were employed to perform. In particular:</p>

This section is primarily information for the provider

## Requirement notices

- There was a lack of records to evidence GPs had received up-to-date safeguarding training appropriate to their role.
- There was a lack of records to evidence staff had received training in health and safety matters.
- There was a lack of management oversight of medical alerts and actions taken.
- There was a lack of evidence the practice manager had received training, support and supervision for their role.

**This was in breach of regulation 18 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  
Treatment of disease, disorder or injury

### Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

**How the regulation was not being met:**

**The registered person's recruitment procedures did not establish whether staff were able, by reasons of their health and after reasonable adjustments, to properly perform tasks intrinsic to the work for which they would be employed. In particular:**

- An assessment of staff health was not undertaken.

**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:**

- DBS checks had not been obtained prior to employment. Risk assessments had not been completed to support this action.
- Satisfactory evidence of conduct in previous employment concerned with the provision of services relating to (a) health or social care; or (b) children or vulnerable adults had not been obtained prior to employment.

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