

# Cross Plain Health Centre

## Inspection report

84 Bulford Road

Durrington

Salisbury

Wiltshire

SP4 8DH

Tel: 01980 652221

[www.crossplainhealthcentre.nhs.uk/](http://www.crossplainhealthcentre.nhs.uk/)

Date of inspection visit: 11 September 2018

Date of publication: 18/10/2018

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 summary

**We carried out an announced focused inspection at Cross Plain Health Centre on 11 September 2018, to follow up on a Warning Notice we issued following our previous inspection on 11 June 2018. We did not rate the practice as part of this inspection.**

On 11 June 2018 we carried out an announced focused inspection at Cross Plain Health Centre in response to concerns that were reported to us. We found there were breaches in the regulations relating to staffing and good governance. Following this inspection, we sent the practice a Warning Notice setting out why they were failing to meet the regulations relating to staffing and requiring them to become compliant with this regulation by 31st August 2018. The full report on the June 2018, inspection can be found by selecting the 'all reports' link for Cross Plain Health Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This report covers the announced follow up focused inspection we carried out at Cross Plain Health Centre on 11 September 2018, to review the actions taken by the practice to improve the quality of care and to confirm that the practice was meeting legal requirements in relation to staffing.

At this inspection we found the practice had made significant changes to their systems and procedures, and the failings we itemised in the Warning Notice had all been addressed. In a few areas we found the new systems and processes were not yet fully embedded.

- The practice system for managing patients service requests was in line with recognised guidance.
- The practice had changed their staffing structure and no longer employed staff in the role of GP Assistant or Front Line Practitioner.
- We found the non-registered clinicians we spoke with, such as a trainee Assistant Practitioner, to be working within their areas of competency and were providing safe and supportive care that had been appropriately reviewed by a suitably qualified clinician.
- The practice could not evidence all staff had received the training they had determined was essential for their role. This was a breach of the regulations relating to staffing.

However, during the inspection we found the practice could not evidence all staff had received the training they had determined was essential for their role. This was a breach of the regulations relating to staffing.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- The practice must ensure that persons employed by the practice receive such appropriate training as is necessary to enable them to carry out the duties they are employed to perform.

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

- Review their policies, procedures and other documents such as staff job descriptions to ensure the new staffing structure, policies, procedures and terminology are consistent.
- Ensure appropriate documents describe the limits of non-registered clinicians authority to make clinical decisions or take action.

This service will be re-inspected no longer than six months after the report is published.

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

## Population group ratings

## Our inspection team

Our inspection team was led by a CQC lead inspector and included a GP specialist adviser.

## Background to Cross Plain Health Centre

Cross Plain Health Centre is a GP practice located on the southern edge of Salisbury Plain in Wiltshire. It is one of 47 practices within the Wiltshire Clinical Commissioning Group (CCG) area and has around 6,440 patients. The practice is one of five in the locality area of Amesbury.

The practice premises includes two consulting rooms and one treatment room on the ground floor, and one consulting room on the first floor which is mainly used for counselling services.

The practice has branch surgeries in Tidworth and Shrewton.

The practice is registered to provide the following activities:

- Diagnostic and screening procedures;
- Family planning;
- Maternity and midwifery services;
- Surgical procedures;
- Treatment of disease, disorder or injury.

The practice provides a number of services and clinics for its patients including childhood immunisations, family planning, minor surgery and a range of health lifestyle management and advice including asthma management, diabetes, heart disease and high blood pressure management.

The practice has a dispensary offering pharmaceutical services to those patients on its practice list who live more than one mile (1.6km) from their nearest pharmacy premises.

The practice provides some services, such as services for the elderly, in partnership with the other practices in the Amesbury locality.

The practice served an area with a high number of military personnel and their families. They have a lower than average number of patients who are over 75, a higher than average number of military veterans and a higher than average turnover of patients. Data available shows a measure of deprivation in the local area recorded a score of 9, on a scale of 1-10, where a higher score indicates a less deprived area. (Note that the circumstances and lifestyles of the people living in an area affect its deprivation score. Not everyone living in a deprived area is deprived and not all deprived people live in deprived areas). The area the practice serves has relatively low numbers of patients from different cultural backgrounds. 96% of the practice population describes itself as white British. Average male and female life expectancy for patients at the practice is 82 years and 86 years respectively, which is similar to the Wiltshire average and in line with the national average of 79 and 83 years respectively.

The area has one of the highest population growth rates in the country and was anticipating a significant number of additional military families moving to the area next year as part of a military rebasing plan.

There are two GP partners, one salaried GP, (who was on maternity leave at the time of our inspection) and five retainer GPs, (one of whom was on maternity leave at the time of our inspection). (Retainer GPs are GPs who are receiving additional support to help them stay in the profession). Two of the GPs are male and six females. Some work part-time, making a full-time equivalent of 2.6 GPs. They are supported by a team of Assistant Practitioners and a nursing team of three practice nurses, one healthcare assistant and two mental health support workers. There is a dispensing team and an administrative team led by the practice manager who is also a partner.

The practice surgeries at Durrington and Tidworth open from 8am to 1pm, and 2pm to 6.30pm. Monday to Friday. The surgery at Shrewton has more restricted opening hours and details are available in the surgery on the practice website. When the surgery is closed for lunch, there is an emergency number to get through to the practice.

The practice has opted out of providing a full Out of Hours service to its own patients. Patients can access an Out Of Hours GP service by calling NHS 111. Information about how to access this service was available in the surgery and on their website.

The practice has a General Medical Services contract with NHS England (a locally agreed contract negotiated between NHS England and the practice).

The practice provides services from the following sites:

- Durrington Surgery, 84 Bulford Road, Durrington, Wiltshire, SP4 8DH.
- Tidworth Surgery, Beacon House, Station Road, Tidworth, Wiltshire, SP9 7NN.
- Shrewton Surgery, High Street, Shrewton, Salisbury, Wilts, SP3 4DB.

The practice has a website containing further information. It can be found here: [www.crossplainhealthcentre.nhs.uk](http://www.crossplainhealthcentre.nhs.uk)

# Are services effective?

## Background to staffing issues at Cross Plain Health Centre

On previous inspections in December 2016 and August 2017 we noted that the practice was employing GP Assistants.

The practice told us that they had experienced significant difficulties in recruiting the number of clinical staff they required, particularly GPs. They assessed this difficulty was likely to remain or worsen in line with recognised national trends. They also assessed that their staffing requirements were going to increase due to:

- Significant increase in the local population over the coming years
- Planned retirement of GPs.

In order to meet their staffing requirements, the practice decided to recruit Physicians Assistants. However, they found they were unable to recruit qualified Physicians Assistants and modified their staffing structure to include staff working in other roles such as Front Line Practitioners and GP Assistants. At the time of time of our last inspection in June 2018, there was limited national guidance on the training and use of some of these roles in GP practices. We saw evidence the practice was engaged with the national development of these roles.

- The practice had engaged and discussed their plans with Wiltshire Clinical Commissioning Group (CCG), Royal Colleges, Health Education England, the Local Medical Committee and local Universities.
- The practice had been awarded money to support the development work by the CCG using their Innovation Fund. They submitted progress reports to the CCG on a quarterly basis.

On 11 June 2018 we carried out an announced focused inspection in response to concerns that were reported to us. We found:

- The practice was failing to ensure that persons employed by the practice receive such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they are employed to perform. More specifically, we found:

- The practice system for ensuring that staff working in the role of a GP Assistant were only allocated tasks within their area of competence was inadequate. We found unqualified staff were sometimes working without adequate supervision.
- We found the practice system for ensuring staff working in the role of a GP Assistant had the appropriate skills for tasks they was not effective.

## What we found on this inspection

On 11 September 2018, we carried out an announced focused inspection at Cross Plain Health Centre to follow up on the staff issues we found on our previous inspection in June 2018 and set out in a Warning Notice we sent to the practice. On this inspection we found:

- The practice had reviewed and made significant changes to their staffing structure and how tasks were allocated to staff to ensure staff worked within their areas of competence.
- The practice no longer employed staff in the role of GP Assistant and they told us they no longer used this term to describe staff.
- We looked in detail at the practice system for responding to patients visiting or phoning the practice. Clinical support workers (CSW) were the first point of contact for patients. If the CSW was unable to deal with the patients needs, the patient was put on a list to be contacted by the duty team. The duty team consisted of a duty GP and a “Registrant”, who was defined as a clinician with a registered qualification, such as a nurse, paramedic or physiotherapist. The duty team was usually supported by other staff with more limited clinical training such as a Senior Health Care Assistant. The registrant worked through the list of patients needing to be contacted and either contacted them directly or passed this role to another member of staff, where the evidence provided by the CSW suggested this was the most appropriate action. The registrant was able to consult with the duty GP, either in person, by phone or by instant messaging using the practice computer system, if required and/or make them an appointment with the appropriate clinician. The practice had a clear “Who does what” chart to help the registrant ensure tasks passed to other staff were within their areas of competence. The registrant recorded their

# Are services effective?

actions and other appropriate information in the patients records and these were reviewed by the duty doctor. We found this system for managing patients requests to be in line with recognised guidance.

- We looked at the practice system for determining the areas of competence of non-registered clinicians, such as Health Care Assistants (HCA), Senior Health Care Assistants (SHCA) and Mental Health Support Workers. The practice told us a person's clinical competence was usually determined by training followed by observation from an appropriately qualified clinician. We saw records for three non-registered clinicians which evidenced the training given and practice observation. The practice told us some training had been done in-house by GPs who had not used any externally validated guidance or criteria. The practice told us they had been advised there was new guidance being published by the Local Medical Committee in the next few weeks relating to determining competence of a non-registered clinicians and it was their intention to review their policies and procedures following publication of this document.
- We were told three non-registered clinicians were currently doing an Assistant Practitioner in Health foundation degree on an apprentice scheme and their clinical competency would be determined by the coursed accredited processes."
- During the inspection we interviewed two non-registered clinicians. We discussed their role, areas of competency, training and the support that was available to them. We discussed in detail and looked at the clinical records of six clinical interventions, including phone and face to face consultations. We found these staff to be working within their areas of competency. The clinical notes evidenced safe and supportive care that had been appropriately reviewed by a suitably qualified clinician. These findings are in line with what we found on our previous inspection in June 2018, when we interviewed two other non-registered clinicians.
- We saw the practice was continuing to engage with local and national developments in relation to staff roles in GP practice. They had been accredited as a training placement for students doing the Physicians Associates masters degree course.
- We saw evidence the practice had reviewed their staffing structure and had decided not to use some role titles such as Front Line Practitioner and GP Assistant. We looked at six staff files and saw that they had been reviewed and updated. The practice had issued new job descriptions and contracts of employment for some staff to reflect the new staffing structure.
- We found some of the recent changes made by the practice were yet fully embedded. For example, the practice told us they were no longer using the term GP Assistant in their staffing structure. However, we found a few documents such as a patient information leaflet on the waiting room notice board and some of the practice guidance and policy documents that still used this term. We saw a number of staff had been issued with revised job descriptions with new job titles, but in one case the new job title had not been changed in the body of the job description.
- We found the policies, procedures and guidance documents we read in relation to staffing and staff roles lacked clarity about the limits of non-registered clinicians roles to make clinical decisions and take action. We spoke to the practice about this and they told us staff knew the limits of their authority, however, they also wished to empower staff to develop their skills and limitations on staff would be different for each depending on skills and experience.
- We reviewed the staff training records for children and adult safeguarding, and the Mental Capacity Act which the practice had determined were essential training for all staff, in line with recognised guidance. There was no evidence nine staff including, two GPs and three other staff working in a clinical role, had received training in the Mental Capacity Act. This meant the practice could not confirm these staff had the competencies for their role and was a breach of the regulations relating to staffing.

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	Regulation 18 HSCA (RA) Regulations 2014 Staffing
Family planning services	How the regulation was not being met...
Maternity and midwifery services	You are failing to ensure that persons employed by the practice receive such appropriate support, training, professional development, supervision and appraisal as is necessary to enable them to carry out the duties they are employed to perform. Specifically:
Surgical procedures	There was no evidence all staff had received the training the practice had determined was essential for their role, such as training in the Mental Capacity Act.
Treatment of disease, disorder or injury	