

# Botley Medical Centre

## Inspection report

Elms Road  
Botley  
Oxford  
OX2 9JS  
Tel: 01865248719  
[www.botleymedicalcentre.co.uk](http://www.botleymedicalcentre.co.uk)

Date of inspection visit: 7 April 2021  
Date of publication: 01/06/2021

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?

Requires Improvement 

Are services well-led?

Inadequate 

# Overall summary

We carried out an announced inspection at Botley Medical Centre on 7 April 2021 to identify if improvements had been made following our previous inspection and due to risks highlighted to CQC. These included concerns reported about leadership and governance within the practice. Overall, the practice is rated as Inadequate. This rating is based on significant concerns we have identified regarding patient care and governance arrangements during the inspection.

Ratings:

Safe - Inadequate

Effective - Requires improvement

Well-led - Inadequate

We previously inspected Botley Medical Centre in October 2019 and rated the practice requires improvement. We issued requirement notices to the practice and requested an action plan for improvements.

The full reports for previous inspections can be found by selecting the 'all reports' link for Botley Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

## Our findings

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 Inadequate overall and Requires Improvement for all population groups.**

We found that:

# Overall summary

- The practice did not always provide care in a way that kept patients safe and protected them from avoidable harm. There was a lack of monitoring for patients prescribed medicines and lack of action following reviews and tests.
- There were omissions in the recording and monitoring of patient care. Patients did not always have an accurate record of their care requirements on the patient record system.
- There was a lack of coherent governance structures to ensure quality improvements were made where required and that risks to patients were identified and acted on.
- During the pandemic there had been challenges caused by staff absences and staff leaving the practice.
- Training was not monitored or always undertaken by staff to ensure they had the skills and knowledge to work with patients.
- There were systems to identify risks to patients who called the practice requesting services. However, these were not always communicated to staff appropriately.
- The practice was involved in the national programme of vaccinating the population against Covid-19.
- The premises and equipment were well maintained.

We found two breaches of regulations. The provider **must**:

- **Ensure care and treatment is provided in a safe way for service users**
- **Establish and effectively operate systems or processes to ensure compliance with the requirements of relevant legislation and regulations**

I am placing this service in special measures. Services placed in special measures will be inspected again within 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 the reassurance that the care they get should improve.

**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

<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 and supported by a second inspector, who both spoke with staff using video conferencing facilities and undertook a site visit. The team included two GP specialist advisors, and a member of the CQC medicines team. They completed clinical searches and records reviews without visiting the location. The specialist advisors also spoke with staff using video conferencing facilities.

## Background to Botley Medical Centre

Botley Medical Centre is located in Oxford:

Elms Road

Botley

Oxford

OX2 9JS

The practice has a branch surgery at:

Kennington Surgery

200 Kennington Rd

Kennington,

Oxford

OX1 5PY

We visited the main location only during this inspection.

The provider is registered with CQC to deliver the following Regulated Activities:

- Diagnostic and Screening Procedures
- Maternity and Midwifery Services
- Treatment of Disease, Disorder or Injury
- Surgical Procedures
- Family Planning Services

These are delivered from both sites.

The practice is situated within the Oxfordshire Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of about 16,000 patients. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called a primary care network (PCN).

The practice provides medical services to the local community including some students at Harcourt Hill campus of Oxford Brookes University. The area has lower deprivation among its population, and a lower ethnic diversity compared to other parts of Oxford City.

There are four GP partners, two salaried GPs and locum GPs working at the practice. The clinical team includes an advanced nurse practitioner, one practice nurse, a clinical pharmacist and two health care assistants. The clinical team are supported by a practice manager and a team of administration and reception staff.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments can be booked on the day only and a duty doctor system is used to assess the urgency of patients' needs.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face, then the patient is offered a choice of either the main GP location or the branch surgery.

The practice has opted out of providing out of hours services to their patients. There are arrangements in place for services to be provided when the practice is closed and these are displayed at the practice, in the practice information leaflet and on the patient website. Occasionally, out of hours services are provided during protected learning time by another provider who also provide out of hours service after 6.30pm, weekends and bank holidays. This service is accessed by calling NHS 111.

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are 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 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</b></p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none"><li>-The provider was not operating effective systems and processes to monitor patient care and ensure care tasks were undertaken.</li><li>-The provider did not effectively assess, monitor or improve the quality and safety of the services provided in the carrying on of the regulated activities.</li><li>-The provider did not ensure the safety and welfare of service users and others who may be at risk which arise from the carrying on of the regulated activity.</li></ul>
Regulated activity	Regulation
Maternity and midwifery services Family planning services Diagnostic and screening procedures 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 provided provided in a safe way for service users.</b></p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none"><li>-Patients on high risk medicines were not being monitored to ensure their safety and well-being.</li><li>-Records were not maintained appropriately to ensure effective recording of patient care.</li><li>-Safety alerts were not acted on to ensure patients were prescribed medicines safely.</li></ul>

This section is primarily information for the provider

## Enforcement actions

-Patients at risk of conditions were not being identified and assessed appropriately to ensure their safety and welfare.