

# Farrow Medical Centre

## Inspection report

177 Otley Road  
Bradford  
West Yorkshire  
BD3 0HX  
Tel: 01274 637031  
Website: [www.farrowmc.co.uk](http://www.farrowmc.co.uk)

Date of inspection visit: 07/08/2019  
Date of publication: 27/09/2019

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?

Requires improvement



Are services well-led?

Inadequate



# Overall summary

We carried out an announced comprehensive inspection at Farrow Medical Practice on 5 December 2018. The overall rating for the practice was inadequate.

Three warning notices were issued by the Care Quality Commission after the December 2018 inspection for breaches of Regulations 12, safe care and treatment, Regulation 18, staffing and Regulation 17, good governance of the Health and Social Care Act 2008, Staffing (regulated activities) Regulations 2014.

A further focused inspection was undertaken on 28 May to review compliance with the warning notices issued for the breaches of Regulations 12 and 17 and any actions taken by the provider. We found that some improvements had been made. However, following the inspection we issued a requirement notice for Regulation 17, good governance for continuing non-compliance regarding the management of complaints, significant events and safety alerts.

This inspection carried out on 7 August 2019, was an announced comprehensive inspection of the service which also reviewed in detail the breach of Regulation 18 (staffing) from the December 2018 inspection.

**We have rated this practice at this inspection as requires improvement overall.**

The report for the 28 May 2019 inspection and previous inspection reports can be found by selecting the 'all reports' link for Farrow Medical Practice on our website at [www.farrowmc.co.uk](http://www.farrowmc.co.uk).

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

- The provider did not have appropriate systems in place for the safe management of vaccines and the cold chain.
- The provider had not taken steps to ensure that all actions related to the management of infection prevention and control were completed.
- The provider did not always learn and make improvements when things went wrong.

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

- The provider had not sufficiently improved their response to patient complaints. The response and management of complaints did not follow NHS guidance or the provider's own policy. On the day of inspection, we found that it was difficult to track and follow a complaint through to completion or see how learning was shared.

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

- We found an overall reduction in the number of children being brought for vaccinations in 2018/2019.
- Data showed that outcomes for some patients with long term conditions were below CCG and national averages with high exception reporting, for example respiratory issues.

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

- While the practice had made some improvements since our inspections on 5 December 2018 and 28 May 2019 it had not adequately addressed the Warning Notice and subsequent Requirement Notice in relation to Regulation 17, good governance of the Health and Social Care Act 2008, Staffing (regulated activities) Regulations 2014.
- The provider could not demonstrate that all the systems and processes in place at the practice kept people safe. The provider had reviewed the system for the documentation, discussion, review and management of complaints and significant events. However, we found that overall governance at the practice remained ineffective.

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

- Staff dealt with patients with kindness and respect and involved them in decisions about their care. Patient feedback was positive and the results of the National GP patient survey 2019 showed that the practice had scored higher than their CCG average in every question. Results were also better than or comparable to national averages.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

# Overall summary

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.

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

- Complete all of the required improvements and actions identified relating to the management of infection prevention and control.
- Improve meeting notes to reflect the discussions held and allow all members of the team the opportunity to be involved in the continual evaluation and improvement of services for patients.

This service was placed in special measures on 27 February 2019. Insufficient improvements have been made such that there remains a rating of inadequate for at least one population group, key question or overall. Therefore, we

are taking action in line with our enforcement procedures to vary the terms of their registration with CQC. The service will remain in special measures for a further period of six months, be kept under review and if needed could be escalated to urgent enforcement action. Another inspection will be conducted within six months, and if there is not enough improvement we may take action to begin the process of preventing the provider from operating the service.

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. The team included a GP specialist adviser and a second CQC inspector.

## Background to Farrow Medical Centre

Farrow Medical Centre is located at 177 Otley Road, Bradford, BD3 0HX and provides services for 7,308 patients. The location is within a purpose-built building which is easily accessible and has car parking and a pharmacy onsite. GP services have been provided in the current location for approximately 100 years.

The surgery is situated within the Bradford City Clinical Commissioning Group (CCG) and provides services under the terms of a primary medical services (PMS) contract. This is a contract between general practices and NHS Bradford City CCG for the delivery of services to the local community.

The provider is registered with the Care Quality Commission (CQC) to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The National General Practice Profile states that 45% of the practice population is from an Asian background with a further 8% of the population originating from black, mixed or other non-white ethnic groups.

There is a higher than national average number of patients aged under 24 which is in keeping with the area, with less patients aged over 50 than the national average. However, there are more patients in this age group than is generally found within the CCG.

Information published by Public Health England, rates the level of deprivation within the practice population group as one, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. People living in more deprived areas tend to have a greater need for health services. Nationally, the average number of times a person visits their GP in a year is five. CCG statistics show that in Bradford City the average number of visits is between nine and 11. Data shows that 17% of the practice population is unemployed compared to the CCG average of 13% and the national average of 5%. Male life expectancy is 75 years compared to the national average of 79 years. Female life expectancy is 79 years compared to the national average of 83 years.

There are five partners at the practice, four of these are GPs (three female and one male) and one female partner is a nurse, all of whom work part-time. In addition, there are three salaried GPs, one of whom was on maternity

leave during our inspection and two regular locum GPs who work at the practice. Other clinical staff include a practice nurses, three part time healthcare assistants (HCAs), and two practice pharmacists.

One HCA, also has a dual role and is the practice wellbeing worker. A further HCA is training to be a student nurse.

The clinical team are supported by a practice manager, an assistant practice manager and a team of non-clinical staff.

The practice is an accredited training practice, and supports the development and training of GP registrars, medical students and pre-registration pharmacy students.

The practice is open between 8am and 6pm Monday to Friday. Appointments are available during morning and afternoon clinics.

The practice is a member of a federated healthcare group of practices which offers extended access appointments at three 'hub' sites across the city. Appointments are available between 6.30pm and 9.30pm Monday to Friday and between 10am and 1pm on Saturday and Sunday. Patients have the opportunity to see a GP, nurse, physiotherapist or a healthcare assistant. Additional appointments are also available at a neighbouring practice between 6.30pm and 9pm on Wednesday evenings as part of a network of practices who are working together.

During the inspection we saw that the previously awarded ratings were displayed.