

The Cottons Medical Centre

Inspection report


The Cottons
Meadow Lane, Raunds
Wellingborough
Northamptonshire
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Date of inspection visit: 4 December 2019
Date of publication: 13/02/2020

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?	Good 
Are services caring?	Good 
Are services responsive?	Good 
Are services well-led?	Inadequate 

Overall summary

We carried out an announced comprehensive inspection at The Cottons Medical Centre on 4 December 2019. This was due to the length of time since the last inspection.

Following our review of the information available to us, including information provided by the practice, we focussed our inspection on the following key questions:-

Are they safe?

Are they effective

Are they caring

Are they responsive to people's needs?

Are they 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 Inadequate overall.

- The practice had a leadership structure but some of the governance arrangements in place were not effective.
- Patients were at risk of harm because some systems and processes in place were not effective to keep them safe.
- Risks to patients were assessed but the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe.

We rated the practice as Inadequate for providing a Safe service. We found:-

- The practice did not have an effective system in place to safeguard service users from abuse and improper treatment.
- Patients were at risk of harm because some systems and processes in place were not effective to keep them safe.
- The practice had systems for the appropriate and safe use of medicines, including medicines optimisation.

We rated the key questions of Effective, Caring and Responsive at Good overall along with the population groups.

We rated the practice as Inadequate for providing a well-led service . We found:-

- We found a lack of leadership and governance relating to the overall management of the service. The practice was unable to demonstrate strong leadership in respect of safety.
- The arrangements in place for managing risks were not effective.
- Meeting minutes did not contain enough detail to provide information to staff.
- The practice had a programme of quality improvement activity and routinely reviewed the effectiveness and appropriateness of the care provided.
- The practice organised and delivered services to meet patients' needs.
- The practice had a number of policies and procedures to govern activity.

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

- Ensure care and treatment is provided in a safe way to patients.
- Ensure patients are protected from abuse and improper treatment.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

More detail can be found in the requirement and enforcement section at the end of the report.

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

- Review the business continuity plan to ensure identified risks are mitigated.
- Monitor exception reporting to ensure current system is effective.
- Improve the recording of significant events and complaints to include learning and actions taken.
- Take action to improve patient satisfaction.
- Ensure meeting minutes include all areas of practice governance and allow opportunities for learning.

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

Overall summary

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

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, 2nd CQC Inspector and a GP specialist advisor.

Dr Rosie Bennyworth, Chief Inspector of Primary Medical Services joined the inspection as an observer.

Background to The Cottons Medical Centre

The Cottons Medical Centre provides a range of services under a General Medical Services (GMS) contract which is a nationally agreed contract between general practices and NHS England.

The practice's services are commissioned by Northamptonshire Clinical Commissioning Groups (CCG).

The practice serves a population of approximately 9,933 patients.

Patient demographics reflect the national average and information published by Public Health England, rates the level of deprivation within the practice population group as eight, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The service at the practice is provided by three GP partners, two salaried GPs, three Nurse Practitioners, two Nurses and one Health Care Assistant. The team is supported by a Practice Manager, one Deputy Practice Manager, one Senior Administrative Assistant, five Administrative Assistants and five Receptionists/Care Navigators.

The practice is open between 8am and 6.30pm Monday, Tuesday, Wednesday and Friday and late evening on a Thursday until 7.30pm.

The practice population is predominantly white British (97.5%) along with small ethnic populations of Asian (0.9%) and mixed race (0.9%).

The Cottons Medical Centre has one location registered with the Care Quality Commission (CQC).

The Cottons Medical Centre is located at Meadow Lane, Raunds, Wellingborough. NN9 6UA

and provides the regulated activities of Family planning, Treatment of disease, disorder or injury, Surgical procedures, Diagnostic and Screening procedures and Maternity and Midwifery services.

The local NHS trusts at Kettering General Hospital and Northampton General Hospital NHS Trust provides health visiting and community nursing services to patients at this practice.

As part of the East Northants locality extended access hub appointments are provided from

Harborough Field Surgery, 160 Newton Road, Rushden. NN10 0GP.

Harborough Field Surgery

Patients can access extended hours appointments. Additional same day and booked appointments are provided by GPs, Nurse Prescribers, Clinical Pharmacists, Practice Nurses and other clinicians outside of the core General Practice hours.

6.30pm to 8pm Monday to Friday

8.30am to 12 midday Saturday and Sunday

Bank Holidays 8.30am to 12 midday

When the practice is closed patients are directed to contact the out-of-hours GP services by calling the NHS 111 service.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment
Family planning services	The practice had not done all that was reasonably practicable to mitigate the risks.
Maternity and midwifery services	For example, actions required for the premises, fire safety, legionella, prescription security, secure clinical waste bins.
Surgical procedures	The practice had not, in all cases, ensured that care planning had taken place and been reviewed in a timely manner.
Treatment of disease, disorder or injury	Regulation 12 (1), (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

This section is primarily information for the provider

Enforcement actions

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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 13 HSCA (RA) Regulations 2014 Safeguarding service users from abuse and improper treatment We found systems and processes were not established or operated effectively to ensure compliance with safeguarding service users from abuse and improper treatment. Regulation 13 (1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance We found that the provider was not ensuring that systems and processes are established and operated effectively to ensure compliance with the requirement in regulations 4 to 20A of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The practice did not have systems in place to enable you to regularly assess and monitor the quality of the services provided in the carrying on of the regulated activity. This resulted in issues that threatened the delivery of safe and effective care which had not been identified or adequately managed. In particular:- The system in place for patient safety alerts was not effective.

This section is primarily information for the provider

Enforcement actions

The system for the summarisation of patient records was not effective.

The practice used remote consultations without adequate governance arrangements in place.

Regulation 17 (1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014