

# Silverstone Circuits Medical Centre

## Inspection report

Medical Centre,  
The Jimmy Brown Centre, Silverstone Circuit,  
Silverstone  
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Date of inspection visit: 10 December 2021  
Date of publication: 31/01/2022

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		Good	
Are services safe?		Good	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Good	

# Overall summary

We carried out an announced comprehensive inspection at Silverstone Circuits Medical Centre on Friday 10 December 2021.

This was the service's first inspection since it registered with CQC in November 2019.

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.
- Information from the provider, patients, the public and other organisations.

How we carried out the inspection:

During the inspection, we visited all areas of the service. We spoke with the Medical Services Manager, Medical Services Manager (Designate), Chief Medical Officer, Head of Operations, paramedics and nursing staff.

We have rated this service as Good overall.

We found that:

- The service had good systems to ensure patients received safe and effective care and treatment.
- There was an effective system to identify and safeguard people from abuse.
- The service routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines.
- Staff involved and treated people with compassion, kindness, dignity and respect. Patient feedback received by the service was very positive.
- Patients could access care and treatment within their preferred timescales.
- Leaders were visible and approachable.
- There was continuous learning and improvement.

The areas where the provider should make improvements are:

- The provider should ensure cleaning schedules are completed to their entirety.
- The provider should strengthen their system to manage staff recruitment, training and appraisal.

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Our inspection team

Our inspection team was led by a CQC inspector. The inspection team included a second CQC Inspector and a CQC GP National Clinical Advisor.

## Background to Silverstone Circuits Medical Centre

Silverstone Circuits Medical Centre is operated by Silverstone Circuits Limited. The service is located within the grounds of Silverstone Circuit in Northamptonshire which is one of the main motorsport centres in England.

The service provides emergency medical care within the grounds of the circuit. There is a large medical centre including reception area, treatment rooms, observation bays, staff areas, a training suite and offices. There is an x-ray room only used in the peak of the motorsport season and led by a visiting radiographer.

There is a control centre where visiting first aid organisations and emergency vehicle crews can be co-ordinated during events and race days.

The service has four emergency cars and five emergency ambulances which are used to provide emergency medical care for racing drivers, motorbike riders and visitors within the grounds of Silverstone Circuit.

Any further treatment required, including surgical procedures, are carried out at one of the local hospitals. There is a helipad outside the building with direct access to the medical centre building and treatment rooms. During the peak motorsport season there are helicopters available for quick transfer to a local hospital.

Medical staff work at the service under practising privileges (whereby a medical practitioner is granted permission under a licenced agreement between individual medical professionals and a private healthcare provider to work in an independent hospital or clinic, in independent private practice, or within the provision of community services) and on a sessional basis, including doctors, paramedics and nurses. The staff team is led by a Circuit's Head of Operations, a Medical Services Manager and a Chief Medical Officer. Following our inspection, there was a change in personnel, whereby the Medical Services Manager (Designate) assumed responsibility for the service and became the Registered Manager.

The service is registered to provide the following regulated activities:

- Treatment of disease, disorder or injury.
- Diagnostic and screening procedures.

The medical centre operates on days and times to suit the activities ran by Silverstone Circuit.

# Are services safe?

## Safety systems and processes

### The service had clear systems to keep people safe and safeguarded from abuse.

- The service had appropriate safety policies, which were regularly reviewed and communicated to staff. They outlined clearly who to go to for further guidance. The service had systems to safeguard children and vulnerable adults from abuse.
- The provider carried out Disclosure and Barring Service (DBS) checks as part of recruitment checks.
- All staff had received up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns.
- The provider ensured that facilities and equipment were safe, and that equipment was maintained according to manufacturers' instructions. There were systems for safely managing healthcare waste.
- There were systems to manage infection prevention and control. The infection prevention and control audit had been updated in May 2021. The medical centre was visibly clean. However, we saw some gaps in cleaning audits and cleaning logs. The centre had been closed for periods of time due to a lack of activity during the COVID 19 pandemic. At the time of the inspection, there was very few racing events due to the end of the racing season for winter. The cleaning audits and logs had previously been completed fully and the service had recently moved to new recording forms. The managers assured us these would be completed fully moving forward, even during times of low activity.

## Risks to patients

### There were systems to assess, monitor and manage risks to patient safety.

- There were arrangements for planning the number and mix of staff needed.
- There were suitable medicines and equipment to deal with medical emergencies which were stored appropriately and checked regularly.
- Staff had received training to help them assess any changes in patient's health to identify when emergency help was needed. Staff had received advanced life support training.

## Information to deliver safe care and treatment

### Staff had the information they needed to deliver safe care and treatment to patients.

- We reviewed five sets of patient medical notes which were clearly written and appropriately managed by the service.
- The service had systems for sharing information with local hospitals where necessary. Patients were given a discharge summary to share with their GP if appropriate.

## Safe and appropriate use of medicines

### The service had reliable systems for appropriate and safe handling of medicines.

- The service did not prescribe medicines.
- Processes were in place for checking emergency medicines and staff kept accurate records of medicine stocks.

## Track record on safety and incidents

### The service had a good safety record.

# Are services safe?

- There were risk assessments and policies in relation to safety issues.
- The service monitored and reviewed activity. This helped it to understand risks and gave a clear, accurate and current picture that led to safety improvements.

## Lessons learned and improvements made

### The service learned and made improvements when things went wrong.

- There was a system for recording and acting on significant events and incidents.
- The service kept a log of risks and action taken. We saw a risk assurance framework dated December 2021 which recorded the risks, actions and the accountable person for each risk.
- There were adequate systems for reviewing and investigating when things went wrong.
- The provider was aware of and complied with the requirements of the Duty of Candour. The provider encouraged a culture of openness and honesty.

# Are services effective?

## Effective needs assessment, care and treatment

**We saw that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance.**

- There were arrangements in place to ensure patients' immediate and ongoing needs were assessed.
- Clinicians had enough information to make decisions about a course of treatment.
- We saw no evidence of discrimination when making care and treatment decisions.

## Monitoring care and treatment

**The service was involved in quality improvement activity.**

- The service used information about care and treatment to make improvements. We saw a review of healthcare activity for 2021 to enable the targeting of resources for future events.
- The service made improvements following information obtained from audits. For example, we saw an audit from 2019 which reviewed where on-site crashes occurred the most. Following the audit, the service had made improvements in recording the site of a crash.

## Effective staffing

**Staff had the skills, knowledge and experience to carry out their roles.**

- All staff were qualified to the appropriate level for their role.
- Relevant professionals (medical and nursing) were registered with the General Medical Council (GMC) or the Nursing and Midwifery Council and were up to date with revalidation.
- Staff told us they were attracted to the roles as they had an interest in motor sport. Therefore, the service had a medical team who were highly motivated and qualified in their areas of work.
- Staff were encouraged and given opportunities to develop their skills.
- The provider did keep up to date records of skills, qualifications and training. However, these were managed manually in many separate records. It was difficult for managers to find information and have oversight of staff to enable effective management and oversight of staff recruitment, training and appraisal.

## Coordinating patient care and information sharing

**Staff worked together, and worked well with other organisations, to deliver effective care and treatment.**

- Patients received coordinated and person-centred care.
- All patients were advised to share details of their treatment with their registered GP.
- Patient information was shared appropriately on discharge from the service. The service had direct links with local hospitals and made them aware when there were large events.

## Consent to care and treatment

**The service obtained consent to care and treatment in line with legislation and guidance.**

- Staff understood the requirements of legislation and guidance when considering consent and decision making.

# Are services caring?

## Kindness, respect and compassion

### Staff treated patients with kindness, respect and compassion.

- The service sought feedback on the quality of clinical care patients received.
- Feedback from patients in a patient survey carried out by the provider between April and September 2021 was extremely positive about the way staff treated people. All people who completed the survey said they would recommend the service to friends and family.
- The service gave patients timely support and information.
- We saw the service went above and beyond to ensure visitors to the circuit were comfortable. For example, on hot summer days the service provided facilities for visitors including event shelters and water mist sprays to keep people cool, prevent people overheating and becoming unwell. The service treated any visitors to the circuit free of charge and treated visitors, spectators and those taking part in races with equal importance.

## Involvement in decisions about care and treatment

### Staff helped patients to be involved in decisions about care and treatment.

- Interpretation services were available for patients who did not have English as their first language.
- Patients had sufficient time to make an informed decision about the choice of treatment available to them.

## Privacy and Dignity

### The service respected patients' privacy and dignity.

- The service recognised the importance of people's dignity and respect. There were different treatment rooms to maintain privacy during busy events. There was a quiet room available for families if needed that had been decorated to give a homely feel.

# Are services responsive to people's needs?

## Responding to and meeting people's needs

**The service organised and delivered services to meet patients' needs. It took account of patient needs and preferences.**

- The provider understood the needs of their patients and improved services in response to those needs. For example, providing vehicles on site at specific places where accidents are most likely occurred or where there are the largest crowds.
- The facilities and premises were appropriate for the services delivered.
- People in vulnerable circumstances could access and use the service on an equal basis to others.

## Timely access to the service

**Patients were able to access care and treatment from the service within an appropriate timescale for their needs.**

- Patients had timely access to treatment. The service offered on-site emergency response.
- Documents viewed demonstrated that at times of high activity waiting times were short and managed appropriately.

## Listening and learning from concerns and complaints

**The service took complaints and concerns seriously and responded to them appropriately to improve the quality of care.**

- Information about how to make a complaint or raise concerns was available.
- The service informed patients of support available to them should they not be satisfied with the outcome of their complaint or how the complaint was handled.
- The service had complaint policy and procedures in place.
- There had been no complaints about the service during 2021.

# Are services well-led?

## Leadership capacity and capability;

### Leaders had the capacity and skills to deliver high-quality, sustainable care.

- Leaders were knowledgeable about issues and priorities relating to the quality and future of services. They understood the challenges and were addressing them.
- Leaders were visible and approachable.

## Vision and strategy

### The service had a clear vision and credible strategy to deliver high quality care and promote good outcomes for patients.

- The service had a realistic vision and strategy and supporting business plans to achieve priorities.
- We saw the service had a quality and improvement plan which included short-term and long-term goals to provide clarity of priorities.

## Culture

### The service had a culture of high-quality sustainable care.

- The service focused on the needs of patients.
- The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.
- Staff could raise concerns and were encouraged to do so.
- We spoke with four staff who said they really enjoyed working for the service.
- There were processes for ensuring staff had received an annual appraisal.
- The service actively promoted equality and diversity. Staff had received equality and diversity training.

## Governance arrangements

### There were clear responsibilities, roles and systems of accountability to support good governance and management.

- Structures, processes and systems to support good governance and management were clearly set out, understood and effective. However, we found areas where oversight of general cleaning during times of low activity, recruitment checks and management of training records required strengthening.
- Staff were clear on their roles and accountabilities.
- Leaders had established policies, procedures and activities to ensure safety and assured themselves that they were operating as intended.
- There were robust arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

## Managing risks, issues and performance

### There were clear and effective processes for managing risks, issues and performance.

# Are services well-led?

- There was an effective process to identify, understand, monitor and address current and future risks including risks to patient safety.
- The service had processes to manage current and future performance.

## **Appropriate and accurate information**

### **The service acted on appropriate and accurate information.**

- Quality and operational information was used to ensure and improve performance. Performance information was combined with the views of patients.
- Quality and sustainability were discussed in relevant meetings where all staff had sufficient access to information.

## **Engagement with patients, the public, staff and external partners**

### **The service involved patients, the public, staff and external partners to support high-quality sustainable services.**

- The service encouraged and heard views and concerns from the patients, staff and external partners and acted on them to shape services.

## **Continuous improvement and innovation**

### **There were systems and processes for learning, continuous improvement and innovation.**

- There was a focus on continuous learning and improvement.
- Learning from patients was shared and used to make improvements.