

Brighton Health and Wellbeing Centre

Inspection report

18-19 Western Road Hove East Sussex BN3 1AE Tel: 01273772020 www.brightonhealthandwellbeingcentre.co.uk

Date of inspection visit: 8 Oct 2019 Date of publication: 13/12/2019

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	Good	
Are services safe?	Requires improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

Overall summary

We carried out an inspection of Brighton Health and Wellbeing Centre on 8 October 2019 following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a significant change to the quality of care provided since the last inspection.

This inspection focused on the following key questions: safe, effective and well-led services.

Due to the assurance received from our review of information we carried forward the ratings for the following key questions: caring and responsive.

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.

Overall this practice is rated as good.

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

- Appropriate recruitment checks were not always completed.
- Infection prevention and control was not always well managed. This included a lack of evidence to demonstrate regular audits, a staff vaccination programme and evidence of completed cleaning.
- The practice could not demonstrate there was an effective system for the production of Patient Specific Directions.
- The systems in place to monitor the storage of refrigerated medicines and vaccines were not implemented effectively.

At this inspection our key findings were:

- We observed staff interacting positively with patients, who were treated with kindness and respect. Feedback from patients who used the service was consistently positive.
- The service had systems to record, investigate and monitor significant events and safety alerts. When incidents did happen, the practice learned from them and improved their processes.

- The service ensured that care and treatment was delivered according to evidence- based research or guidelines.
- Staff maintained the necessary skills and competence for their role and to support the needs of patients.
- The dedicated practice pharmacy team evidenced an effective monitoring and review process for patients prescribed high risk medicines.
- The culture of the service encouraged candour, openness and honesty.
- Staff were proud to work at the practice and told us they felt well supported, both professionally and personally.
- Patients had access to additional services and could self-refer or drop in to groups, such as a Saturday singing group and healing arts group.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

- Ensure that care and treatment is provided in a safe way.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.

(Please see the specific details on action required at the end of this report).

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

- Review the level of training provided to staff for child and adult safeguarding.
- Review and strengthen the guidance and training provided to staff on sepsis and serious infection.
- Strengthen the recorded details on patient group directions to include the organization name.
- Continue to monitor and take action to improve performance for areas that are not in line with targets, including for patients with diabetes, smoking or alcohol status for those with a mental health condition, and the uptake of childhood immunization and cervical screening.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Overall summary

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 lead inspector. The team included a GP specialist advisor and a practice manager specialist advisor.

Background to Brighton Health and Wellbeing Centre

Brighton Health and Wellbeing Centre is located at 18-19 Western Road, Hove, East Sussex, BN3 1AE. The practice has good transport links and there is a pharmacy nearby.

Brighton Health and Wellbeing Centre is registered with the CQC to provide the regulated activities; Treatment of disease, disorder or injury; Surgical procedures; Diagnostic and screening procedures; Maternity and midwifery services and Family planning.

The practice is situated in the NHS Brighton and Hove Clinical Commissioning Group (CCG) and provides services to 14,880 patients under the terms of a general medical services (GMS) contract. The practice runs a number of services for its patients including; sexual health advice and family planning, chronic disease management, smoking cessation, health checks and travel vaccines and advice.

Private complementary therapies are available; either drop in or pre-booked. This service is separately registered as an independent health service with the Care Quality Commission. Patients were also provided with access to healing arts activities to support their health and wellbeing through an arts project, funded through the Brighton Health and Wellbeing Centre's charity. The charity helps fund courses of complementary therapies and healing arts services available at the Centre, for those in need on low income.

There are currently two registered partners; one GP (female) and one managing partner. There are five salaried GPs (three female, two male). The practice told us they would be updating their registration to add two additional GP partners. There are two advanced nurse practitioners, four nurse practitioners, three practice nurses, and three health care assistants. There are two pharmacists. GPs and nurses are supported by the practice manager, an administration manager and a team of reception/administration staff.

Data available to the Care Quality Commission (CQC) shows the number of patients from birth to 18 years old served by the practice is slightly below the national average. The number of patients aged 85 years and over is below to the national average. The number of patients in paid work or full-time education was above the national average. The National General Practice Profile states that 88% of the practice population is from a white background with a further 12% of the population originating from black, Asian, mixed or other non-white ethnic groups. Information published by Public Health England rates the level of deprivation within the practice population group as five, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is comparable to the national average of 79 years. Female life expectancy is comparable to the national average of 83 years.

Brighton Health and Wellbeing Centre is open from Monday to Friday between 8am and 6:30pm. The practice offers extended opening on Tuesday evenings until 8pm and on Saturdays from 8:30am to 11:30am.

Appointments can be booked over the telephone, online or in person at the surgery. Patients are provided information on how to access an out of hour's service by calling the surgery or viewing the practice website.

When the practice is closed patients are asked to call 111, which is a free 24-hour helpline to help patients access the appropriate out of hours care. The out of hours service offers appointments from 6am to 8am on weekday mornings and throughout the day and evening during weekends. Alternatively, patients can see a doctor or nurse 7 days a week at the walk-in clinic at the Brighton Station Health Centre. The Centre is open from 8am to 8pm every day of the year.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	 Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment How the regulation was not being met: The provider was unable to demonstrate effective systems or processes to assess the risk of, and prevent, detect and control the spread of, infections, including those that are health care associated. This included audit, recording of cleaning and processes to maintain staff vaccination. The provider could not demonstrate there was an effective system for the production of Patient Specific Directions. The systems in place to maintain medicines management processes, including the proper and safe storage of medicines, were not implemented effectively. This was in breach of regulation 12(1) 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 19 HSCA (RA) Regulations 2014 Fit and proper persons employed How the regulation was not being met: The registered person's recruitment procedures did not ensure that only persons of good character were employed. In particular: • The provider was unable to demonstrate evidence of satisfactory conduct in previous employment. This was in breach of regulation 19(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.