

Adelaide Medical Centre

Inspection report

Adelaide Road
Andover
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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?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced comprehensive inspection at Adelaide Medical Centre on 27 February 2020 following our annual regulatory review of the information available to us. This inspection looked at the following key questions:

- Are the services provided at this location effective?
- Are the services provided at this location caring?
- Are the services provided at this location well-led?

The practice's annual regulatory review did not indicate that the quality of care had potentially changed in relation to provision of Safe and Responsive services. As a result, the ratings of 'good' from the practice's previous comprehensive inspection from 2016 still stand in those key questions.

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 Good overall but Requires Improvement for providing well-led services. We have rated this practice as Good for all population groups.

We found that:

- Patients received effective care and treatment that met their needs.
- The practice had increased its cervical screening uptake in the previous 12 months but remained below the national target of 80% uptake.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Feedback from patients was positive about the way staff treated them.

- The way the practice was led and managed promoted the delivery of high-quality, person-centre care but it had not considered and mitigated the risks surrounding some of its systems and processes. For example, there was no formal process relating to the monitoring of blank prescription stationery, or any associated risk assessments relating to Disclosure and Barring Service checks for non-clinical staff.
- The practice did not have full oversight of GP training records. We found GPs were often completing their training via a different training provider to the rest of the practice.
- Quality improvement activities helped to direct and drive improvement at the practice.

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:

- Continue to improve uptake for cervical screening to ensure the practice's meets the national target of 80%.
- Review how the practice is assured that all staff, including GPs, are in line with practice's training requirements.
- Review guidance on when to notify CQC regarding changes at the practice, including any absences of accountable staff members in a timely manner.

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 lead inspector. The team included a GP specialist advisor and a second CQC inspector.

Background to Adelaide Medical Centre

Adelaide Medical Centre is located at Adelaide Road, Andover, Hampshire SP10 1HA. The surgery has good public transport links.

The provider is registered with CQC to deliver the following Regulated Activities from its one location:

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

The practice is in the process of adding the Regulated Activity for providing maternity and midwifery services to its CQC registration.

Adelaide Medical Centre is situated within the West Hampshire Clinical Commissioning Group (CCG) and provides services to approximately 9,000 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is currently a partnership of two GP partners which registered with the CQC in February 2013. The provider is in the process of adding four new partners to

its CQC registration following our annual regulatory review. The practice employs a salaried GP, an advanced nurse practitioner, a practice nurse, and two health care assistants. The practice has a GP retainer and a trainee GP. The non-clinical team of receptionists, administrators and a medical secretary is led by a practice manager, supported by an assistant practice manager and a reception manager. The practice is part of a Primary Care Network with other local GP practices in the area as well as a member practice of the local GP Federation.

There are higher than the national average number of patients over the age of 65 years, and fewer patients aged under 18 than the national average. The National General Practice Profile states that approximately 96% of the practice population is from a White background with the remaining 4% 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 eight, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male and female life expectancy is the same as the national average of 79 and 83 years respectively.

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 Family planning services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• The arrangements for identifying, recording and managing risks, issues and implementing mitigating actions were not operated effectively, in particular in relation to the management of emergency medicines, monitoring blank prescription stationery, and undertaking Disclosure and Barring Service (DBS) checks. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>