

# High Glades Medical Practice

## Inspection report


9A Upper Church Road  
St Leonards on Sea  
Hastings  
East Sussex  
TN37 7AT  
Tel: 01424 754678  
[www.highgladesmedicalcentre.nhs.uk](http://www.highgladesmedicalcentre.nhs.uk)

Date of inspection visit: 22 January 2019 to 23  
January 2019  
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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?

Requires improvement 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

## This practice is rated as Good overall.

The key questions at this inspection are rated as:

Are services safe? – Good

Are services effective? – Requires Improvement

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out an announced comprehensive inspection at High Glades Medical Practice on 22 and 23 January 2019 under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions. The inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

At this inspection we found:

- There was an effective system for reporting and recording significant events.
- The practice's systems, processes and practices helped to keep people safe.
- Risks to patients, staff and visitors were assessed, monitored and managed in an effective manner.
- Staff had the information they needed to deliver safe care and treatment to patients.
- The arrangements for managing medicines in the practice helped keep patients safe.
- The practice learned and made improvements when things went wrong.
- Performance for diabetes, asthma, COPD, hypertension and mental health related indicators for 2017 / 2018 was significantly below local and national averages. The practice demonstrated innovation in the way they were addressing performance issues. However, action was ongoing.
- Published results showed the childhood immunisation uptake rates for the vaccines given were higher than the target percentage of 90% or above in all four indicators.
- Staff had the skills, knowledge and experience to carry out their roles.
- Staff involved and treated patients with compassion, kindness, dignity and respect.

- Patients were able to access care and treatment from the practice within an acceptable timescale for their needs.
- Results from the national GP patient survey showed that patients' satisfaction with how they could access care and treatment was in line with local and national averages.
- There were clear responsibilities, roles and systems of accountability to support good governance and management locally and at provider management team level.
- The practice had a vision to deliver high quality care and promote good outcomes for patients. However, none of the staff we spoke with were aware of the vision.
- There were processes and systems to support good governance and management locally and at provider management team level.
- The practice was proactive at involving patients, the public, staff and external partners to support high-quality sustainable services.

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:

- Revise the security of staff only areas of the practice to restrict access by unauthorised persons.
- Continue to ensure all patient group directions are kept up to date.
- Continue to implement and monitor the action plan in response to the monitoring of the temperature of refrigerators used to store medicines and consider introducing inventories of medicines stored at the practice as well as keep records of any audit checks.
- Continue to work with the local Clinical Commissioning Group to reduce the prescribing of hypnotics.
- Continue to implement and monitor the action plan to further enhance systems to identify and follow up children living in disadvantaged circumstances and who were at risk.

**Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

# Overall summary

**Please refer to the detailed report and the evidence tables for further information.**

## Population group ratings

Older people	Good	
People with long-term conditions	Requires improvement	
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)	Requires improvement	

## Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a second CQC Inspector, GP Specialist Adviser and a Practice Manager Specialist Adviser.

## Background to High Glades Medical Practice

- The registered provider is Sydenham House Medical Group which is a primary care at scale organisation that delivers general practice services at seven registered locations in England.
- High Glades Medical Practice is located at 9A Upper Church Road, St Leonards on Sea, Hastings, East Sussex, TN37 7AT. The practice has a general medical services contract with NHS England for delivering primary care services to the local community. The practice website address is [www.highgladesmedicalcentre.nhs.uk](http://www.highgladesmedicalcentre.nhs.uk).
- At the time of our inspection one of the GP partners was in the process of being added to the partnership registration with CQC.
- As part of our inspection we visited High Glades Medical Practice, 9A Upper Church Road, St Leonards on Sea, Hastings, East Sussex, TN37 7AT as well as Silver Springs Medical Practice, Beaufort Road, St Leonards on Sea, East Sussex, TN37 6PP, where the provider delivers registered activities.
- High Glades Medical Practice has a registered patient population of approximately 17,000 patients. The practice is located in an area with a higher than average deprivation score.
- There are arrangements with other providers (IC24) to deliver services to patients outside of the practice's working hours.
- The practice staff consists of three GP partners (two male and one female), three salaried GPs (all female), one locum GP (female), one GP Registrar (female), one practice manager, three nurse practitioners (all female), five practice nurses (all female), one paramedic practitioner (male), three healthcare assistants (all female) as well as one pharmacy technician, reception and administration staff. Practice staff are also supported by the Sydenham House Medical Group management team.
- High Glades Medical Practice is registered with the Care Quality Commission to deliver the following regulated activities: diagnostic and screening procedures; family planning; maternity and midwifery services; treatment of disease, disorder or injury; surgical procedures.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>Systems or processes were not established and operated effectively to ensure compliance with the requirements in this Part. Such systems or processes did not enable the registered person to;</b></p> <p><b>Assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity. In particular:</b></p> <ul style="list-style-type: none"><li>• Performance for diabetes, asthma, COPD, hypertension and mental health related QOF indicators for 2017 / 2018 was below local and national averages.</li></ul> <p><b>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</b></p>