

The Medical Centre Group

Inspection report

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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 to people's needs?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at The Medical Centre Group. We conducted remote clinical searches on the practice's computer system on 5 December 2022 and conducted an onsite inspection of the practice on 6 December 2022 under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions.

Overall, the practice is rated as Good.

The key questions at this inspection are rated as:

Safe – Good

Effective – Requires Improvement

Caring – Good

Responsive - Good

Well-led – Good

The full reports for previous inspections can be found by selecting the 'all reports' link for The Medical Centre Group on our website at www.cqc.org.uk

Why we carried out this inspection

This was a comprehensive inspection 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.

The inspection focused on the following:

- Are services safe?
- Are services effective?
- Are services caring?
- Are services responsive in relation to access?
- Are services well-led?

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

Overall summary

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system and discussing findings with the provider.
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

Our findings

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.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.
- The practice had systems and processes to keep people safe.
- Appropriate standards of cleanliness and hygiene were met.
- The practice learned when things went wrong.
- The practice demonstrated that staff had the skills, knowledge and experience to carry out their roles.
- There was evidence of systems and processes for learning, continuous improvement and innovation.
- There was a proactive approach to understanding the needs of different groups of people and to deliver care in a way that meets these needs.
- The practice had identified areas where there were gaps in provision locally and had taken steps to address them.
- Our clinical record searches found improvement was required in relation to the safe management and monitoring of some high-risk medicines, safety alerts and patients with long-term conditions.

We found one breach of regulation. The area where the provider **must** make improvements are:

- The provider must ensure there are effective systems and processes to ensure person centred care.

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

- Continue to take steps to ensure there are alerts placed on all family and other household members of children on the at-risk register.
- Continue to monitor and review their action plan in relation to the management of patients diagnosed with chronic kidney disease stages four or five, hypothyroidism, diabetic retinopathy and potential missed diagnosis of chronic kidney disease stage three, four or five.
- Continue to monitor and improve the practice's system for acting on Medicines and Healthcare products Regulatory (MHRA) safety alerts to help ensure processes are being followed and embedded.

Overall summary

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector and a second CQC inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to The Medical Centre Group

The Medical Centre Group is located at The Shepway Medical Centre, 10a Northumberland Court, Northumberland Road, Maidstone, Kent, ME15 7LN. The practice is a training practice for trainee GPs.

The practice has a branch surgery at The Grove Green Medical Centre, Unit 1 Minor Centre, Grove Green, Maidstone, Kent, ME14 5TQ. We conducted an onsite visit to the branch surgery as part of this inspection.

The practice offers services from both the main practice and the branch surgery. Patients can access services at either surgery.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

The practice is situated within the Kent and Medway Integrated Care System and delivers General Medical Services (GMS) to a patient population of about 14,930. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices in West Kent: Maidstone Central Primary Care Network (PCN).

Information published by Public Health England shows that deprivation score within the practice population group is six (out of ten). The lower the score, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 94.4% White, 8.2% Asian, 0.9% Black, 1.6% Mixed and 0.3% Other.

The number of patients aged 18 to 64 and over the age of 65 closely mirrors the local and national averages. The practice has a slightly higher than average proportion of patients under the age of 18.

The practice consists of five partners (male and female) and six salaried GPs (male and female). The GPs are supported at the practice by three GP Registrars (male and female); three practice nurses (female); one advanced clinical practitioner (male); two advanced nurse practitioners (male and female); four health care assistants (female); two clinical pharmacists (male and female) and a team of reception and administration staff. The practice management team consist of a practice manager, deputy practice manager, operations manager, assistant practice manager, reception manager and senior administrator who provide managerial oversight. All staff provide cover at both practices.

Both practices are open between 8am and 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the PCN, where late evening and weekend appointments are available. Out of hours services are provided by NHS 111 and Integrated Care 24 (IC24). NHS 111 and IC24 deals with urgent care problems when GP surgeries are closed.

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 were not being met. The provider must send CQC a report that says what action they are 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 9 HSCA (RA) Regulations 2014 Person-centred care</p> <p>How the regulation was not being met:</p> <p>The practice did not have effective systems and processes to ensure person centred care. In particular:</p> <ul style="list-style-type: none">• Not all patients with asthma who were prescribed 2 or more rescue steroids in the last 12 months had received a review 7 days after the prescription of the rescue steroids.• Not all patients prescribed high-risk medicines had received the required reviews and monitoring in line with national guidance. In particular, patients prescribed potassium sparing diuretics and gabapentin.• Some medicine reviews we reviewed did not contain sufficient detail in line with national guidance. <p>This was in breach of Regulation 9 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>