

Marybrook Medical Centre

Inspection report

Marybrook Street
Berkeley
Gloucestershire
GL13 9BL
Tel: 01453810228
www.marybrookmedicalcentre.co.uk

Date of inspection visit: 4 Feb 2020 Date of publication: 30/04/2020

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

Overall summary

We carried out an announced comprehensive inspection at Marybrook Medical Centre on 4 February 2020 as part of our inspection programme.

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 the practice as inadequate overall and requires improvement for all population groups.

We found that:

- Processes to respond to significant events and identify learning, were not effective.
- Processes to ensure the practice held appropriate emergency medicines were not effective.
- Processes to mitigate risk were not always effective.
- There was not effective oversight of staff training.
- Processes to ensure recruitment checks were consistently conducted including for locum staff, were not effective
- Achievement for annual health reviews was below local and national averages.

- Processes to ensure privacy and dignity for patients were not embedded.
- Complaints were not consistently responded to in line with policy.
- There was a heavy reliance on locum staff and there was not effective oversight to ensure they received the appropriate training and information.
- Policies and procedures were not fully embedded to ensure compliance with the regulations.

Areas were the provider **must** make improvements are:

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Areas where the provider **should** make improvements are:

- Review arrangements for the safe storage of emergency medicines and equipment.
- Identify actions to improve the patient experience.

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

Rosie Benneyworth

Chief Inspector of PMS and Integrated Care

Population group ratings

Older people	Requires improvement
People with long-term conditions	Requires improvement
Families, children and young people	Requires improvement
Working age people (including those recently retired and students)	Requires improvement
People whose circumstances may make them vulnerable	Requires improvement
People experiencing poor mental health (including people with dementia)	Requires improvement

Our inspection team

Our inspection team was led by a CQC inspector and the team included a GP specialist advisor and a second CQC inspector.

Background to Marybrook Medical Centre

Marybrook Medical Centre is located at:

Marybrook St

Berkeley

GL139BL

In October 2018 Marybrook Medical Centre was taken over by the provider Church Street Medical on a temporary contract. This provider was still in post when we inspected on 4 February 2020. The provider can be located at:

The Devereux Centre

Barton Road

Tewkesbury

GL20 5GJ

The new permanent provider is due to take over practice services from 1 April 2020.

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, surgical procedures and family planning.

Marybrook Medical Centre is situated in the Gloucestershire Clinical Commissioning Group (CCG) and provides services to approximately 5,034 patients under the terms of an alternative provider medical services (APMS) contract.

The provider consists of five GP partners but only one of the partners worked from Marybrook Medical Centre. The practice clinical team consisted mostly of locum staff, however they did employ a practice nurse, a healthcare assistant and a phlebotomist. The clinical team was supported by reception and administration teams. The practice manager had recently left the practice in December 2019 and an interim practice manager had been brought in from within the provider organisation to support staff.

When the practice is not open, patients are directed to the NHS 111 service.

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 Processes to mitigate risk to the health, safety and welfare of people using the service, were not fully effective. For example; fire, health and safety, infection prevention and control, and legionella. The practice had not ensured that they held appropriate emergency medicines and they had not assessed the impact of this. Processes to obtain appropriate patient specific directions prior to the administration of medicines, were not embedded. This was a 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 17 HSCA (RA) Regulations 2014 Good governance How the regulation was not being met There was not effective oversight of staff training including locum staff. There was not effective oversight of recruitment procedures including for locum staff. Practice systems to monitor performance were not effective. Processes to ensure privacy and dignity for patients were not embedded. The practice did not have a formal process to ensure compliance with the duty of candour. There were not effective systems to recognise and monitor learning identified as a result of complaints and significant events.

This section is primarily information for the provider

Requirement notices

- Oversight to ensure compliance with practice policy was not always effective.
- Assurance processes to ensure consistent and accurate coding on patient records were not embedded.
- The practice no longer had processes to support the dissemination and sharing of information.

This was a breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulation Activities) Regulations 2014.