

Community Specialist Services, Southern Hampshire Primary Care Alliance Headquarters (HQ)

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?	Inspected but not rated	

Overall summary

This service is rated as Good overall.

At our previous inspection on 16 and 17 July 2019 we rated the service as Good overall but Requires Improvement for Safe. This was because we found a breach of regulation relating to the provision of Safe care and treatment.

This announced desk based review, carried out on 5 May 2021, was to confirm that the provider had carried out their plan to meet the legal requirements in relation to the breach of regulations that we identified at our previous inspection.

Since our last inspection on 16 and 17 July 2019, the provider had deregistered two other locations known as GPEA Services Waterlooville hub, and GPEA Services Fareham hub, Fareham Community Hospital, as those services were now centrally managed under the Community Specialist Services location. Those two services primarily provided GP extended hours services to patients living in Fareham, Gosport and South East Hampshire from Fareham Community Hospital and Waterlooville Health Centre. We previously inspected those two services on 16 and 17 July 2019 and rated them both as Good overall. However, we rated the provision of Effective services for both services as Requires Improvement. This was because we found a breach of regulation relating to Good governance at each service.

During this desk based review, carried out on 5 May 2021, we also reviewed evidence in relation to the previously registered locations known as GPEA services Waterlooville, and GPEA Services Fareham Hub, Fareham Community Hospital. This was to confirm that legal requirements in relation to a previous breach in both services had been complied with. Although we reviewed the evidence as part of this desk based review, to provide assurances to users of those services, it has not changed the ratings shown in this report. This is because the ratings in this report relate to Community Specialist Services only.

The key questions are rated as:

Are services safe? – Good

Community Specialist Services provides a phlebotomy service across the Gosport and Hayling Island areas and delivers a cardiology outpatient contract to patients living in Gosport and Fareham. It subcontracts with Portsmouth Cardiac Associates who provide specialist Consultant level medical staff in the cardiology service. Since 15 October 2020, when GPEA Waterlooville hub and GPEA Fareham hub, Fareham Community Hospital locations were deregistered, Community Specialist Services had also become responsible for the provision of extended access GP appointments in Fareham, Gosport and South East Hampshire.

During this desk based review we found that the service had made improvements since our last inspection on 16 and 17 July 2019. We found the service was now meeting the regulations previously breached and the rating for Safe has been amended accordingly.

At this desk based review we found:

- The provider had installed a new human resources (HR) management system which facilitated close monitoring of all types of training at all levels.
- Appropriate risk assessments were in place in relation to access to emergency medicines, health and safety and requirements relating to the premises.
- Staff felt supported, informed and part of a team, due to instant messaging software which enabled timely communication with all colleagues.

Overall summary

• The provider had installed a new clinical patient records system called EMIS web, which ran alongside other clinical systems used by local GPs such as EMIS. This meant the provider owned their own records allowing auditing and clinical reviews of records.

Since our last inspection on 16 and 17 July 2019 the service had appointed the Head of Governance, Quality and Safety as the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

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Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

This follow up desk based review was undertaken by a CQC lead Inspector.

Background to Community Specialist Services, Southern Hampshire Primary Care Alliance Headquarters (HQ)

Southern Hampshire Primary Care Alliance (SHPCA) is a federation of GP Practices reaching from Bordon in Hampshire, down the A3 corridor to Fareham and Gosport, and across to Hayling Island. Patients from all practices, can access the services including those who are registered with practices who are not members of the federation.

SHPCA provides an extended hours GP service called Integrated Primary Care Access Service (IPCAS) and also delivers phlebotomy and cardiology outpatient services. As part of its response to COVID-19 IPCAS is operating from 8am to 10.30pm to support GP practices to assess patients with known or suspected COVID-19 infection. The service also runs a virtual ward, monitoring oxygen levels at home for patients diagnosed with COVID-19 and supports the Clinical Assessment Service (CAS) for patients referred from NHS111 requiring clinical assessment. We did not review information in relation to the CAS or the virtual ward service during this desk based review.

The IPCAS service brings together traditional in hours, extended hours and out of hours (OOH) into a single seven day service open 8am to 10.30pm. As part of the COVID-19 response the service offers care and treatment from two red hub sites and two green hub sites. Patients would attend a red hub if they had COVID-19 symptoms. Patients book routine appointments or same day care appointments through their own GP practice. The service also receives referrals from the Clinical Assessment Service (CAS) where, following clinical triage, a face to face appointment is considered necessary. Consultations may be face to face or remote. Staff supporting the IPCAS service are mostly not directly employed by the alliance but are employed by member practices. They work on a sessional basis and are paid by the Alliance for shifts worked. However, the alliance does contract some shifts from locum GPs.

The phlebotomy service is provided to practices in Hayling Island and some practices in Gosport. The service is available through three local hubs and patients access the service by booking in with their own GP practice.

The cardiology outpatient service is provided to patients in Gosport and Fareham. SHPCA have a subcontract arrangement with Portsmouth Cardiac Associates who provide Consultant Cardiologist medical staff to the service. The service offers an alternative to referral into secondary care cardiology services for those patients requiring first line non-invasive investigation. The cardiology service is intended as a non-urgent service. It can investigate palpitations, dizzy spells, suspected heart murmurs, breathlessness with unidentified cause, atrial fibrillation and pre-existing known cardiac conditions which are deteriorating. Access to the service is via GP referral.

The phlebotomy service is provided at:

Gosport Medical Centre, Bury Road, Gosport, PO12 3AQ.

Monday and Friday 8am to 2.30pm

Tuesday, Wednesday and Thursday 8am to 5pm

Solent View Medical Practice, Manor Way, Lee-on-Solent, PO13 9JG

Monday and Friday 8am to 4pm

Tuesday, Wednesday and Thursday 8am to 2.30pm

The Elms Practice and Waterside Medical Practice, Hayling Island Health Centre, Elm Grove, Hayling Island, PO11 9AP

Monday to Thursday 8am to 2pm

Friday 8am to 12pm

Rowner Health Centre, 143 Rowner Lane, Gosport, PO13 9SP

Wednesday, Thursday and Friday 8am to 6pm

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The cardiology service is provided at:

Rowner Health Centre, 143 Rowner Lane, Gosport, PO13 9SP

Three times per month on a Wednesday 2.30pm to 5.30pm

The IPCAS service is provided from:

Forton Medical Centre (red hub), Whites Place, Gosport, PO12 3JP

Monday to Sunday 8am to 10.30pm

Porchester Health Centre (Green hub), West Street Porchester. PO16 9TU

Monday to Friday 6.30pm to 10.30pm

Saturday and Sunday 8am to 10.30pm

Waterlooville Health Centre (Red hub), Dryden Close, Waterlooville, PO7 6AL

Monday to Sunday 8am to 10.30pm

The Swan Surgery (Green hub), Swan Street, Petersfield, GU32 3AB

Monday to Friday 6.30pm to 10.30pm

Saturday and Sunday 8am to 10.30pm

Information about this provider can be found at www.shpca.net.

Prior to this review, we reviewed information we held about the service, publicly available information and information provided as part of the pre-inspection request. This helped us plan the inspection.

We used various methods to carry out our review of the various services. These included interviewing staff and review of documents.



Are services safe?

We rated safe as Good because:

At our previous inspection on 16 and 17 July 2019 we found:

- The service was not able to demonstrate that all staff had completed safeguarding training.
- Access to emergency medicines at Rowner Health Centre had not been risk assessed.
- Assurances were not in place in relation to health and safety at host sites.
- The provider did not follow policy and undertake environmental risk assessments at its head office.

At this desk based review we found:

- The provider had installed a new human resources (HR) management system which facilitated close monitoring of all types of training at all levels. Assurance was provided through downloaded reports from the system that safeguarding training for phlebotomists was either up to date or that required updates had been booked in.
- We found appropriate risk assessments were in place in relation to access to emergency medicines at Rowner Health Centre.
- We found systems were in place in relation to health and safety at host sites to provide assurances to Community Specialist Services.
- We found a quality governance planner had been developed to provide assurance that regular checks were undertaken in relation to all aspects of governance including requirements relating to premises.

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse.

- At our last inspection on 16 and 17 July 2019 we found there were gaps in staff training records. Not all phlebotomists had completed level one safeguarding training.
- At this review we found that the provider had installed a new purpose built human resources (HR) management system. The system provided assurances that staff across all types of service provision had appropriate documentation in place to ensure safe recruitment. In addition, it also maintained a record of training for all staff and provided automated reminders when training needed to be updated or renewed. Staff who did not have appropriate documentation and training in place were unable to book shifts. This did not apply to phlebotomists who were not required to book shifts. The operations manager for phlebotomy told us they downloaded reports every two weeks to check the training status of phlebotomists. Phlebotomists were supported to complete any outstanding training.
- At our last inspection we found the alliance had not undertaken any environmental risk assessments for the part of the building they rented.
- At this desk based review, we found office risk assessments were in place in relation to fire safety, lone working, slips trips and falls and manual handling. These helped staff to understand how to keep safe whilst at work.

Risks to patients

There were systems to assess, monitor and manage risks to patient safety.

- At our last inspection on 16 and 17 July 2019 we found appropriate checks had not been made to provide assurance that cardiology staff sourced form Portsmouth Cardiac Associates (PCA) had adequate professional indemnity insurance in place.
- At this review we found that there was a system in place to check professional indemnity insurance for cardiac consultants. PCA administrative staff provided evidence of professional indemnity insurance on a regular basis.



Are services safe?

Safe and appropriate use of medicines

The service was not a prescribing service. Cardiologists made recommendations to patients' GPs as appropriate.

- At our last inspection on 16 and 17 July 2019 we found that emergency medicines at Rowner Health Centre, where the cardiology service was provided from, were stored on a different floor to the consulting rooms and this had not been risk assessed and the risk mitigated.
- At this desk based review, we found that an appropriate risk assessment was in place and that test runs had been carried out to determine the length of time taken to access emergency medicines should they be needed.
- At this inspection we found a quality governance planner had been developed to provide assurance that regular checks were undertaken in relation to all aspects of governance including health and safety assurance checks at host sites.

Track record on safety and incidents

The service had a good safety record.

 At our last inspection on 16 and 17 July 2019 we found that the alliance had an agreement with host sites to ensure safety of premises although it had not sought regular formal assurances, for example, compliance with fire safety and legionella risk.



Are services effective?

The rating for effective has not changed since our last inspection on 16 and 17 July 2019.

During the previous inspection on 16 and 17 July 2021 we inspected GPEA, Waterlooville hub and GPEA, Fareham hub, Fareham Community Hospital which had been deregistered and now form part of Community Specialist Services. During this inspection we reviewed evidence to confirm that previous identified breaches from GPEA Waterlooville hub and GPEA Fareham hub, Fareham Community Hospital, had been complied with.

At our previous inspection, of the two GPEA services mentioned above, on 16 and 17 July 2019 we found:

- There were gaps in the monitoring of staff training.
- The provider did not have systems to keep clinicians up to date with evidence based guidance. There was a lack of opportunity for clinical discussion.
- There was limited quality monitoring of the service because the service did not own the patient records and had restricted access to them.

At this desk based review we found:

- A new bespoke HR Management system called Sensei had been developed which provided automated updates to staff when refresher training was due to be completed. It also did not allow staff to book shifts if their training was not up to date. Administrative staff from Portsmouth Cardiac Associates (PCA) provided evidence of assurance that PCA staff delivering the contract were up to date with their mandatory training. The provider used Sensei to download daily reports, create email groups and messaging groups and told us it was a very useful tool for underpinning all staffing related activities.
- The provider had set up groups on an instant messaging application. There were separate groups for each shift which were used frequently throughout the shift for administrative or peer support. Staff reported this positively, stating the groups had helped them to feel part of a team, as they were able to contact others across the whole patch, not just the few in the same building as them. There were also buddy systems in place.
- The provider circulated key information to clinicians via email such as Medicines and Healthcare products Regulatory Agency (MHRA) updates and any changes to local guidance. NICE guidance was available to clinicians through the new clinical system called EMIS web by using Ardens templates. Ardens is a designer of multi-morbidity templates to help manage patients with multiple long term conditions.
- The provider had developed a newsletter to ensure learning from complaints or incidents was shared appropriately with staff. The newsletter was also intended as a 'getting to know you' tool, introducing different members of staff each week.
- The provider had installed a new clinical system called EMIS web, which ran alongside other clinical systems used by local GPs such as EMIS. This meant the provider owned their own records allowing auditing and clinical reviews of records (0.5% of each clinician's records per month) but also the provider had access to the patients' records held by their own registered GP practice, and vice versa.
- The new clinical system had provided greater opportunity for auditing, although some auditing activity was in the early stages or still being developed. We reviewed audits in relation to cervical screening, phlebotomy and anonymised reviews of patient consultations by lead clinicians.