Mayflower Medical Group - Stirling Road Surgery

Inspection report

Stirling Road
Plymouth
PL5 1PL
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www.accesshealthanddental.co.uk/access-health-care

Date of inspection visit: 26 May 2021
Date of publication: 05/08/2021

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?	Inadequate
Are services caring?	Requires Improvement
Are services responsive to people's needs?	Inadequate
Are services well-led?	Inadequate

Overall summary

We carried out an announced inspection at Mayflower Medical Group- Stirling Road Surgery on 21 and 26 May 2021. Overall, the practice is rated as Inadequate

Safe - Inadequate

Effective - Inadequate

Caring – Requires Improvement

Responsive – Inadequate

Well-led - Inadequate

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:

- 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
- A pre site visit staff questionnaire.

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 Inadequate overall and inadequate for Safe, Effective, Responsive and Well Led and all population groups. We have rated Caring as Requires Improvement.

We rated the practice as inadequate for providing Safe services because:

Overall summary

- We found the practice's system for managing patient and drug safety alerts did not ensure medicines were prescribed safely. We found the practice had not properly actioned any of the three alerts we reviewed. There was no evidence to show the practice had taken action to protect patients from avoidable harm.

- The practice did not evidence a safe system to ensure patients on high risk medicines were appropriately managed in a timely way.

- The practice did not fully evidence that patients had a structured and comprehensive medicine review. We identified reviews had been coded on the clinical system but there was no evidence in the clinical records of a structured medicine review or consultation with the patient.

- The practice did not have a system to learn and make improvements when things went wrong.

We rated the practice as inadequate for providing Effective services because:

- The practice could not provide assurances that patients were coded appropriately and that patients received necessary monitoring.

- The practice could not provide assurances that patients presenting with symptoms indicating a serious illness, would be followed up in a timely way.

- There was limited monitoring of the outcomes of care and treatment.

- There was no evidence to demonstrate Clinical audits were used to drive continuous improvement.

We rated the practice as requires improvement for providing caring services because:

- Feedback from patients raised concerns about staff attitude and access to timely information.

- There were not effective processes to ensure staff remained qualified and competent for their role.

We rated the practice as inadequate for providing responsive services because:

- Patients experienced difficulties accessing care and treatment

- Complaints were not used to drive improvements at the practice.

We rated the practice as inadequate for providing well led services, because:

- There was limited evidence that there was a cohesive system of governance in place to drive change to improve how the service was delivered including ensuring that a safe and effective service was provided

- The practice did not have clear and effective processes for managing risks, issues and performance.

We found three breach of regulations. The provider **must**:

Overall summary

- Ensure care and treatment is provided in a safe way to patients with an effective programme of monitoring and support to meet their needs.

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

- Establish effective systems to ensure that staff had received appropriate, support, training, professional development, supervision and appraisal to enable them to carry out the duties they are employed to perform.

The provider **should**:

- Ensure that safeguarding alerts are put on records of parents of children with safeguarding concerns to highlight any issues when a parent attends.

- The provider should look for ways to improve outcomes for patients with long-term conditions.

- The practice should continue to monitor and improve how patients could access the cervical screening programme.

- The provider should look for ways to identify carers to ensure support was offered.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to

varying the terms of their registration within six months if they do not improve. The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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

Our inspection team

Our inspection team was led by a CQC lead inspector and a 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 Mayflower Medical Group - Stirling Road Surgery

Maylower Medical Group is located in Pymouth at:

Mayflower Medical Group- Stirling Road

Stirling Road

Plymouth

PL5 1LP

The practice has 5 branch surgeries at:

Ernesettle Medical Centre

Ernesettle Green

Plymouth

PL5 2ST

Mount Gould Medical Centre

200 Mount Gould Road

Plymouth

PL4 7PY

Trelawny GP Surgery

45 Ham Drive

Plymouth

PL2 2NJ

Mannamead Surgery

22 Eggbuckland Road

Mannamead

Plymouth, PL3 5HE

Collings Park Surgery (currently closed)

57 Eggbuckland Road

Hartley

Plymouth

PL3 5JR

We only visited the Mayflower Medical Centre- Stirling Road Surgery as part of this inspection activity.

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

The practice offers services from the main practice and the branch surgeries. Patients can access services at all surgeries.

The practice is situated within the Devon Clinical Commissioning Group (CCG) and delivers Alternative Provider Medical Services (APMS) service to a patient population of about 38,900. Mayflower Medical Group has evolved over the past four years as Independent Practitioner Practices and other organisations resigned their contracts to provide GMS/PMS services. Access Health Care Ltd was commissioned to run the practices and prepare for a procurement process that is now due to occur in April 2022. The Practice is exclusively a salaried service, Access Health Care Ltd being a subsidiary of Devon Doctors a Community Interest Company. Mayflower Medical Group use the Devon Doctors shared services for HR, finance and some governance processes.

Information published by Public Health England report deprivation within the practice population group as two on a scale of 1 to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

The age distribution of the practice population closely mirrors the local and national averages.

There is a team of six salaried GPs two of which are clinical leads and a team of remote GPs. The practice team also consisted of advanced nurse practitioners, practice nurses, healthcare assistants and paramedics. They were supported by a management team, administrators and call handlers.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most appointments, following an EConsult were telephone consultations. If the patient was in need of a face-to-face appointment then the patient is offered a choice of either the main GP location or one of the branch surgeries.

Out of hours services are provided by Devon Doctors.

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 Treatment of disease, disorder or injury Surgical procedures	Regulation 18 HSCA (RA) Regulations 2014 Staffing **Regulation 18 HSCA (RA) Regulations 2014 Staffing** **How the regulation was not being met:** The provider could not give assurance that sufficient numbers of staff were employed to make sure they could meet patients care and treatment needs. The Mayflower Medical Group had not ensured that staff had received appropriate, support, training, professional development, supervision and appraisal. • The practice was unable to demonstrate that all staff had received a regular appraisal and that appraisals or supervisions were conducted by an appropriate person. • Not all staff had received an induction programme to ensure they were supported and competent to carryout their role. This was in breach of Regulation 18 (1) and (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This section is primarily information for the provider

Enforcement actions

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	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment **Care and treatment must be provided in a safe way for service users** **Section 29 Warning Notice: This was regarding:** • There was not a system for effective recorded information to support that prescribers' competencies and decision making was checked by GPs. • The Mayflower Medical Group did not have effective governance procedures for patients prescribed high risk medicines to ensure they received appropriate monitoring. • Processes were not established to ensure patients affected by Medicines and Healthcare products Regulatory Agency (MHRA) alerts, were routinely reviewed. • We found that you were unable to provide reassurance that you have arrangements in place to take appropriate action if there was a clinical emergency requiring Basic Life Support (BLS). This was in 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 Surgical procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance

This section is primarily information for the provider

Enforcement actions

Treatment of disease, disorder or injury

Maternity and midwifery services

Regulation 17 HSCA (RA) Regulations 2014 Good Governance

Section 29 Warning Notice: This was regarding:

- There was limited evidence that there was a cohesive system of governance in place to drive change to improve how the service was delivered including ensuring that a safe and effective service was provided.
- There were not adequate systems to ensure oversight of significant events and that learning was identified, actioned and shared effectively.
- You were unable to evidence that you had effective oversight of complaints received and that all complaints had been acted on in line with practice policy and national guidance and used to monitor and drive improvement.
- You could not provide evidence that you had systems in place to ensure staff employed worked within their competencies.

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