

Wigmore Medical Centre

Inspection report

114 Woodside Road Wigmore Gillingham Kent ME8 0PW Tel: 01634 231752 www.wigmoremedicalcentre.co.uk

Date of inspection visit: 3 and 4 December 2019 Date of publication: 20/01/2020

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

Overall summary

We carried out an announced comprehensive inspection at Wigmore Medical Centre on 2, 3 and 8 April 2019. The overall rating for the practice was Inadequate. The full comprehensive report on the April 2019 inspection can be found by selecting the 'all reports' link for Wigmore Medical Centre on our website at www.cqc.org.uk.

After our inspection in April 2019 the practice wrote to us with an action plan outlining how they would make the necessary improvements to comply with the regulations.

We carried out an announced comprehensive follow-up inspection on 3 and 4 December 2019 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 2, 3 and 8 April 2019. This report covers findings in relation to those requirements.

This practice is now rated as Requires Improvement overall.

The key questions at this inspection are rated as:

Are services safe? - Requires Improvement

Are services effective? – Requires Improvement

Are services caring? - Good

Are services responsive? – Inadequate

Are services well-led? - Requires Improvement

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

- The practice had made improvements to systems, practices and processes to help keep people safe and safeguarded from abuse. However, further improvements were required.
- The practice had made improvements to the way risks to patients, staff and visitors were being assessed, monitored or managed.
- Staff had the information they needed to deliver safe care and treatment. However, individual care records, including clinical data, were not always written and managed in line with current guidance and relevant legislation.
- The practice had made improvements to the arrangements for medicines management to help keep patients safe. However, further improvements were still required.

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

- Care and treatment were not always delivered in line with current legislation, standards and evidence-based guidance.
- The practice had carried out improvement activities and exception rates for Quality and Framework Outcomes (QOF) indicators were now in line with or lower than local and national averages. However, improvements to performance for one diabetes indicator and the hypertension indicator were now required.
- Staff were now up to date with all essential training.
- Staff were now receiving regular appraisals.

We rated the practice as **good** for providing caring services because:

- Staff involved and treated patients with compassion, kindness, dignity and respect.
- Results of the national GP patient survey had improved in relation to patient satisfaction scores for their overall experience of Wigmore Medical Centre.

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

 The limited access for people with mobility issues and the lack of an accessible patient toilet at the branch surgery remained and did not comply with The Equality Act 2010.

We rated the practice as **requires improvement** for providing well-led services because:

- The practice had taken effective action to adequately manage risks found at our last inspection in April 2019. However, further improvements were required.
- The practice had taken effective action to adequately manage and improve performance that, at the time of our inspection in April 2019, fell below local and national averages. However, improvements to performance for one diabetes indicator and the hypertension indicator were now required.
- The limited access for people with mobility issues and lack of an accessible patient toilet at the branch surgery remained and had not been effectively managed in a timely manner.
- Improvements to clinical audit activity was now driving quality improvement to patient care.

Overall summary

The areas where the provider **must** make improvements

- Ensure care and treatment is provided in a safe way to patients.
- Ensure all premises and equipment used by the service provider is fit for use.
- 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:

• Continue to monitor and improve national GP patient survey patient satisfaction scores.

As our inspection on 3 and 4 December 2019 found that the provider had not fully met the Requirement Notices issued after the April 2019 inspection, we imposed conditions on Wigmore Medical Centre's registration with the Care Quality Commission. The conditions were:

- The registered provider must not carry on any regulated activities at the branch surgery at Hempstead Medical Centre, 144 Hempstead Road, Hempstead, Gillingham, Kent, ME7 3QE without the prior consent of the CQC and until such time as the following actions have been carried out at the branch surgery at Hempstead Medical Centre, 144 Hempstead Road, Hempstead, Gillingham, Kent, ME7 3QE:
- A fire risk assessment is carried out at the branch surgery at Hempstead Medical Centre, 144 Hempstead Road, Hempstead, Gillingham, Kent, ME7 3QE by a relevantly qualified organisation external to the practice and action has been taken in response to all findings of the fire risk assessment;

- Reasonable adjustments are carried out at the branch surgery at Hempstead Medical Centre, 144 Hempstead Road, Hempstead, Gillingham, Kent, ME7 3QE to ensure that the premises comply with The Equality Act 2010.
- A patient accessible toilet is installed at the branch surgery at Hempstead Medical Centre, 144 Hempstead Road, Hempstead, Gillingham, Kent, ME7 3QE.

This service was placed in special measures in April 2019. Although improvements have been made these are insufficient such that there remains a rating of inadequate for responsive and all patient population groups. I am placing the service into special measures for a further six months.

Services placed into special measures will be inspected again within six months. If, after re-inspection, the service has failed to make sufficient improvement, and is still rated as 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 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 six months, and if there is not enough improvement we will move to close the service.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

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

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 Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser and a practice manager specialist advisor.

Background to Wigmore Medical Centre

- The registered provider is Wigmore Medical Centre.
- Wigmore Medical Centre is located at 114 Woodside Road, Wigmore, Gillingham, Kent, ME8 0PW. 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.wigmoremedicalcentre.co.uk.
- As part of our inspection we visited Wigmore Medical Centre, 114 Woodside Road, Wigmore, Gillingham, Kent, ME8 0PW and Hempstead Medical Centre, 144 Hempstead Road, Hempstead, Gillingham, Kent, ME7 3QE, where the provider delivers registered activities.
- Wigmore Medical Centre has a registered patient population of approximately 4,500 patients. The practice is located in an area with a lower than average deprivation score.

- There are arrangements with other providers (MedOCC) to deliver services to patients outside of the practice's working hours.
- The practice staff consists of three GP partners (one male and two female), one practice manager, one practice nurse (female), one clinical pharmacist, one phlebotomist as well as reception, administration and cleaning staff. The practice also employed locum GPs directly.
- Wigmore Medical Centre 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.

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	Regulation 12 HSCA (RA) Regulations 2014 Safe care and
Family planning services	treatment
Maternity and midwifery services	Care and treatment were not always provided in a safe way for service users.
Treatment of disease, disorder or injury	The service provider was not:
	Ensuring the proper and safe management of medicines. In particular:
	 Medicines that required refrigeration were not always being stored and monitored in line with Public Health England guidance to ensure they remained safe and effective in use.
	This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Treatment of disease, disorder or injury

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

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;

Assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity (including the quality of the experience of service users in receiving those services). In particular:

 Processes to manage current and future performance had not been sufficiently effective. For example, improvements to performance for one diabetes indicator and the hypertension indicator. This section is primarily information for the provider

Requirement notices

Assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk which arise from the carrying on of the regulated activity. In particular:

• The provider was unable to demonstrate they had taken into consideration risks from: staff not referring to the COPD Gold Standard guidance when carrying out patient reviews; and risks associated with medicines that required refrigeration not being stored and monitored in line with Public Health England guidance to ensure they remained safe and effective in use.

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