

# Taunton Road Medical Centre Inspection report

# 12-16 Taunton Road

Bridgwater Somerset TA6 3LS Tel: 01278 720000 www.trmc.co.uk

Date of inspection visit: 9 January 2019 Date of publication: 21/02/2019

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?	<b>Requires improvement</b>	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

## Overall summary

This practice is rated as Good overall. (Previous rating

September 2015 – Good)

The key questions at this inspection are rated as:

Are services safe? - Requires Improvement

Are services effective? - Good

Are services caring? - Good

Are services responsive? - Good

Are services well-led? - Good

We carried out an announced comprehensive at Taunton Road Medical Centre on 9 January 2019 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.

At this inspection we found:

- The practice had clear systems to manage risk so that safety incidents were less likely to happen. When incidents did happen, the practice learned from them and improved their processes.
- The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines.
- The practice had a good programme of ensuring that childhood immunisations were taken up.
- Feedback from other health professionals and services demonstrated that the practice worked well with them and provided support in the interest of the best outcomes for patients. Patients could access assessment and treatment locally instead to the need to travel to other locations.
- Staff involved and treated patients with compassion, kindness, dignity and respect.
- Patients found the appointment system variable to use but reported that they were able to access care when they needed it.

- The practice provided a specialist allocation scheme, formally known as the violent patient scheme to provide medical care to patients who have been referred to the scheme by other local services who were unable to meet their needs.
- There was a strong focus on continuous learning and improvement at all levels of the organisation.
- Mutually support team of staff working well together with the aim of the best outcomes for patients.
- Staff given the opportunity for professional development.
- Medicines management system did not provide assurance that they were secure or that the oversight of high risk medicines was effective.

We saw areas of outstanding practice:

- The practice worked well with the secondary care cardiology team with shared clinics and pro-active treatment for patients. The cardiologist told us the practice's post heart attack medication follow up and up-titration of medication as per the NICE guidelines had dramatically improved in the past 12 months. They now stood out compared to other practices in the area for their exemplary patient follow up with regards to the up-titration of their medication following a heart attack. This meant that by implementing the research patient's long-term outcomes were improved. Information from the cardiologist also identified that 20 potential tests with 55 potential appointments at the local hospital were avoided.
- Shared clinics with the secondary care paediatrician had reduced the need for patients to be seen in a hospital environment by 80%.

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

Reg 12 Ensure care and treatment is provided in a safe way to patients

- The provider MUST continue with developing aspects of safe with an oversight of staff's immunisation status, processes for safe medicines management, and aspects of infection control audit.
- The provider MUST continue with monitoring the oversight of patients on high risk long term medications.

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

### **Overall summary**

- The practice should continue to monitor that the changes implemented for safeguarding adults, recruitment, and disclosure and barring check risk assessments are sustained.
- The provider should continue to monitor cervical smear screening to meet Public Health England screening rates.
- The practice should continue to proactively identify carers.

**Professor Steve Field** CBE FRCP FFPH FRCGPChief Inspector of General Practice

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

#### Population group ratings

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

#### 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 adviser.

#### Background to Taunton Road Medical Centre

Taunton Road Medical Centre is provided from one address, 12-16 Taunton Road, Bridgwater, Somerset TA6 3LS and delivers a personal medical service to approximately 14,036 patients. The practice is situated in a purpose-built building near the central area of Bridgwater, with suitable parking and public transport routes. Information about Taunton Road Medical Centre can be found on the practice website www.trmc.co.uk.

Information from Public Health England (2016/2017) indicates that the practice area population is in the fourth most deprived decile in England. The practice population of children is similar to local and national averages at 20%. The practice population of patients living with a long-term condition was above the local and national averages at 59%, the local being 57% and national being 54%. Of patients registered with the practice, 98% are White or White British, 0.7% are Asian or Asian British, 0.2% are Black or Black British, and 0.8% are mixed race and Other 0.1%.

The provider has told us the practice team is made up eight GP partners, five salaried GPs of one is a GP retainer. There is one advanced nurse practitioner (ANP) and five practice nurses and three health care assistants. The practice manager and the practice patient liaison manager are supported by a team of administrators, secretaries, and reception staff.

When the practice is not open patients can access treatment via the NHS 111 service.

The practice provides family planning, surgical procedures, maternity and midwifery services, treatment of disease, disorder or injury and diagnostic and screening procedures as their regulated activities.

### **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	<ul> <li>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</li> <li>The provider MUST continue with developing aspects of safe with an oversight of staff's immunisation status, processes for safe medicines management, and aspects of infection control audit.</li> <li>The provider MUST continue with monitoring the oversight of patients on high risk long term medications.</li> </ul>