

Essington Medical Centre

Inspection report

Hobnock Road
Essington
Wolverhampton
West Midlands
WV11 2RF
Tel: 01922470130
www.cannockroadsurgery.nhs.uk

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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?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced focused inspection at Essington Medical Centre on 13 November 2019 due to the length of time since the last inspection. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions: Safe, Effective and Well-Led. Because of the assurance received from our review of information we carried forward the ratings for the following key questions: Caring and Responsive.

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 previously carried out a comprehensive inspection at Essington Medical Centre on 1 April 2015. The overall rating was Good. The report on the April 2015 inspection can be found by selecting the 'all reports' link for Essington Medical Centre on our website at www.cqc.org.uk

We have rated this practice as good overall and good for the population groups.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs and was planned and delivered according to evidence-based guidelines.
- The practice worked together and with other organisations to deliver effective care and treatment.
- The practice understood the needs of its population and tailored services in response to those needs.
- Staff had the skills, knowledge and experience to deliver effective care, support and treatment, however, a small number of staff had not completed all essential training.
- There was evidence of quality improvement.

- Patients were treated with compassion, dignity and respect and were involved in their care and any decisions about their treatment.
- Staff enjoyed working at the practice and felt supported by the leadership team.
- Leaders were visible, approachable and understood the strengths and challenges relating to the quality and future of services.

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

- The provider had governance structures and systems in place however, these did not ensure effective governance.
- Arrangements for identifying, managing and mitigating risks were not always effective.
- The practice staff training matrix demonstrated some gaps in essential training.
- CQC had not been notified of the absence of a registered person as required.

The areas where the provider **must** make improvements as they are in breach of regulations

are:

- 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:

- Develop a business and succession plan and share the mission statement with staff and patients.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGPChief Inspector of General Practice

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 CQC lead inspector. The team included a GP specialist advisor and a practice manager advisor.

Background to Essington Medical Centre

Essington Medical Practice is registered with the Care Quality Commission (CQC) as a partnership provider. The practice provides primary medical services to approximately 2,700 registered patients from premises located in Hobnock Road, Essington, Wolverhampton, WV11 2RF

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services and treatment of disease disorder or injury from this location only.

The practice is part of the NHS Cannock Chase Clinical Commissioning Group and provides services to patients of all ages on an Alternative Provider Medical Services (APMS) contract with NHS England for delivering primary care services to their local community. APMS provides the opportunity for locally negotiated contracts with non-NHS bodies, such as voluntary or commercial sector providers.

The practice area is one of least deprivation when compared with local and national averages. Demographically the average life expectancy for male patients is mainly comparable with local and national averages with life expectancy of female patients lower at 80 years compared with 83 years for local and national averages. The practice age profile is mainly comparable

with local and national averages with the exception of having a higher percentage of patients under the age of 18. The percentage of patients with a long-term condition is 48%, which is lower than the local average of 58% and the national average of 51%. The practice ethnicity is predominantly white British (96.6%).

The practice staffing comprises:

- Three GP partners (One male and two female). One partner provides clinical sessions from the sister practice at Cannock Road only.
- One salaried GP (female).
- One practice nurse and two health care assistants (female). One regular locum Advanced Nurse Practitioner (male) one afternoon per week.
- A practice manager, Business manager and a small team of reception/administrative staff including one apprentice receptionist.

The practice is open Monday to Friday between 08.00 and 18.30. Extended hours are available on a Tuesday evening until 19.30. Badger provides an out of hours service for patients when the practice is closed and information provided to patients about the NHS 111 service. Patients can also access appointments via Cannock Chase Clinical Alliance extended hour's service.

Routine appointments can be booked in person, by telephone or on-line. Patients can also access an Online consult service and obtain advice about common ailments. Home visits are available to patients with complex needs or who are unable to attend the practice.

Further details about the practice can be found by accessing the practice's website at www.cannockroadsurgery.nhs.uk

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 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 Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met</p> <ul style="list-style-type: none">• There was no risk assessment or documented clinical oversight of a regular locum advanced nurse practitioner (ANP) who was an independent prescriber and worked without a GP on site.• Not all staff were up to date with essential training.• A risk assessment had not been undertaken for emergency medicines not held at the practice.• There was no formal process in place for documenting registration checks of clinical staff had been undertaken and regularly monitored.• New staff completed a health questionnaire; however, this did not include information regarding their immunisation status. A risk assessment had not been undertaken to mitigate potential risks to patients and staff.• Checks to the premises electrical and portable appliance testing safety were overdue.• A statutory notification had not been submitted in relation to notification of absence of leave of a registered person.