

# St Mary's Island Surgery

## Inspection report

Edgeway  
St. Marys Island  
Chatham  
ME4 3EP  
Tel: 01634 890712  
[www.stmarysislandsurgery.co.uk](http://www.stmarysislandsurgery.co.uk)

Date of inspection visit: 9 July 2019  
Date of publication: 08/08/2019

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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Requires improvement



Are services responsive?

Requires improvement



Are services well-led?

Requires improvement



# Overall summary

## This practice is 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? – Requires Improvement

Are services responsive? – Requires Improvement

Are services well-led? – Requires Improvement

We carried out an announced comprehensive inspection at St Mary's Island Surgery on 9 July 2019 under Section 60 of the Health and Social Care Act 2008, as part of our regulatory functions. The inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

At this inspection we found:

- The practice's systems, processes and practices did not always help to keep people safe.
- Risks to patients, staff and visitors were not always assessed, monitored and managed in an effective manner.
- Staff did not always have the information they needed to deliver care and treatment to patients.
- The arrangements for managing medicines did not always help keep patients safe.
- The practice learned and made improvements when things went wrong.
- Published QOF data from 2017 / 2018 showed that the practice's performance for all QOF related indicators (with the exception of asthma) was in line with local and national averages.
- Published results showed the childhood immunisation uptake rates for the vaccines given were below the 90% minimum target. However, unverified data showed that the uptake of child immunisations and boosters had improved to 95% and 83.6% respectively as at 1 April 2019.
- Published Public Health England results showed that the practice's performance for cancer indicators was

either in line with or higher than local and national averages. The exception was the uptake for cervical screening which was below the 80% target for the national screening programme.

- Staff had the skills, knowledge and experience to carry out their roles. However, not all staff were up to date with essential training.
- Staff involved and treated patients with compassion, kindness, dignity and respect.
- Patient feedback about the practice was mixed and results from the national GP patient survey were in line with but mostly below local and national averages.
- The practice respected patients' privacy and dignity.
- The practice organised services to meet patients' needs. However, they did not always have sufficient staff at St Mary's Island Surgery to deliver these services.
- Patients were not always able to access care and treatment from the practice within an acceptable timescale for their needs.
- Local clinical leadership was limited, and local leaders were not always aware of the performance of St Mary's Island Surgery or the plans to improve performance where necessary.
- There were processes and systems to support good governance and management. However, not all staff were fully aware of their own roles and responsibilities in relation to governance.
- The practice involved the public, staff and external partners to sustain high-quality and sustainable care.
- There were systems and processes for learning and continuous improvement.

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

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensure sufficient numbers of suitably qualified, competent, skilled and experienced persons are deployed to meet the fundamental standards of care and treatment.
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out their duties.

# Overall summary

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

- Consider making all staff aware of the practice's vision for patient care.

**Dr Rosie Benneyworth** MB 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

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

## 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 St Mary's Island Surgery

- The registered provider is DMC Healthcare Limited which is a primary care at scale organisation that delivers general practice services at four registered locations in England.
- St Mary's Island Surgery is located at Edgeway, St Mary's Island, Chatham, Kent, ME4 3EP. The practice has an alternative provider medical services contract with NHS England for delivering primary care services to the local community. The practice website is [www.stmarysislandsurgery.co.uk](http://www.stmarysislandsurgery.co.uk).
- As part of our inspection we visited St Mary's Island Surgery, Edgeway, St Mary's Island, Chatham, Kent, ME4 3EP only, where the provider delivers registered activities. The provider also delivers registered activities at: Sunlight Centre, 105 Richmond Road, Gillingham, Kent, ME7 1LX; Boots Pentagon, 30-34 Military Road, Chatham, Kent, ME4 4BB; Balmoral Gardens Healthy Living Centre, Green Suite, Gillingham, Kent, ME7 4PN; Twydall Green, Gillingham, Kent, ME8 6JY.
- St Mary's Island Surgery has a registered patient population of approximately 27,500 patients.
- There are arrangements with other providers (MedOCC) to deliver services to patients outside of the practice's working hours.
- The practice staff consists of two salaried GPs (one male, one female), two advanced nurse practitioners (female), three practice nurses (female), two healthcare assistants (female), two pharmacists (female), one practice manager, two assistant practice managers, one hub manager as well as reception and administration staff. The practice also employs locum GPs directly as well as via an agency. Practice staff are also supported by the DMC Healthcare Limited management staff as well as a regional governance lead.
- St Mary's Island Surgery is registered with the Care Quality Commission to deliver the following regulated activities: diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures; treatment of disease, disorder or injury.

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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>Care and treatment was not always provided in a safe way for service users.</b></p> <p><b>The service provider was not:</b></p> <p><b>Assessing the risks to the health and safety of service users of receiving the care and treatment and doing all that is reasonably practicable to mitigate any such risks. In particular:</b></p> <ul style="list-style-type: none"><li>• Not all staff we spoke with were aware of who the practice's safeguarding lead was or where to find contact details of who to contact for further guidance if they had concerns about a patient's welfare.</li><li>• Actions to address issues identified by the practice's fire risk assessment had not been carried out in a timely manner.</li></ul> <p><b>Where equipment or medicines are supplied by the service provider, ensuring that there are sufficient quantities of these to ensure the safety of service users and to meet their needs. In particular:</b></p> <ul style="list-style-type: none"><li>• The practice did not have three emergency medicines – cefotaxime, dexamethasone and bumetanide.</li></ul> <p><b>Ensuring the proper and safe management of medicines. In particular:</b></p> <ul style="list-style-type: none"><li>• The records of patients who were prescribed warfarin did not always contain up to date blood test results to help guide staff before repeat prescriptions of this high-risk medicine were issued.</li></ul> <p><b>Assessing the risk of, and prevent, detect and control the spread of, infections, including those that were healthcare related. In particular:</b></p> <ul style="list-style-type: none"><li>• Actions to address issues identified by the practice's infection prevention and control audit did not contain a timescale for completion.</li></ul>

This section is primarily information for the provider

## Requirement notices

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  
Surgical procedures  
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:**

- Some processes to manage current and future performance were not yet sufficiently effective.
- Action taken by the practice to improve patient satisfaction with the quality of their experience of receiving the services provided were not yet sufficiently effective.
- Requests for home visits were not always assessed in a timely manner by a clinician.
- Local clinical leadership was limited, and local leaders were not always aware of the performance of St Mary's Island Surgery or the plans to improve performance where necessary.
- Local clinical leaders were not fully aware of their own roles and responsibilities.
- Clinical audits had not been repeated to complete the cycle of clinical audit to demonstrate the effectiveness of actions taken by the practice to improve patient care.

**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 practice was unable to demonstrate they had taken into consideration risks from: risks associated with not carrying out fire risk assessment action points in a timely manner; risks associated with employing insufficient staff at St Mary's Island Surgery to meet the

## Requirement notices

needs of patients; risks associated with patients being booked in inappropriately for appointments with clinical staff who were not able to meet their needs; risks associated with the lack of all required emergency medicines; risks associated with prescribing warfarin without having up to date blood test results recorded in the patient record; risks associated with some staff not being up to date with essential training.

- The practice did not have effective systems for the routine management of legionella.

**Maintain securely an accurate, complete and contemporaneous record in respect of each service user, including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided. In particular:**

- The practice's computer system did not alert staff of all family and other household members of children that were on the risk register.

**Maintain securely such other records as are necessary to be kept in relation to – (ii) the management of the regulated activity. In particular:**

- There were no records to show that complaints had been acknowledged initially in line with the practice's complaints, comments and compliments policy.

**This was in breach of Regulation 17(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  
Surgical procedures  
Treatment of disease, disorder or injury

### Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing

**The service provider had failed to deploy sufficient numbers of suitably qualified, competent, skilled and experienced persons in order to meet the requirements of this Part. In particular:**

- There was a weekly shortfall of five full days where clinical staff were required to meet the number of appointments required calculated by the practice's own capacity planning matrix.
- The practice was currently short of four telephonists to staff their central telephone hub.

This section is primarily information for the provider

## Requirement notices

- On the day of our inspection there were only two telephonists on duty answering incoming telephone calls for St Mary's Island Surgery and all four of the branch surgeries.

The service provider had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they were employed to perform. In particular;

- Not all staff were up to date with infection prevention and control training as well as basic life support training.
- Not all staff had received an annual appraisal.

This was in breach of Regulation 18(1) and (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.