

Emersons Green Medical Centre

Inspection report

St. Lukes Close
Emersons Green
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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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Requires improvement



Are services responsive?

Inadequate



Are services well-led?

Requires improvement



Overall summary

We carried out this inspection following our annual review of the information available to us, which indicated that there may have been a significant change (either deterioration or improvement) to the quality of care provided since the last inspection. We also followed up on the breaches of regulation 17 HSCA (RA) Regulations 2014, identified at the previous inspection 5 December 2018. This inspection looked at the following key questions:

Are services Safe?

Are services Effective?

Are services Caring?

Are services Responsive?

Are services Well-led?

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 the last inspection in December 2018 we rated the practice as good overall and requires improvement for providing well-led services because: the provider had failed to establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care, in breach of Regulation 17 HSCA (RA) Regulations 2014 and a requirement notice was issued.

At this inspection, we found the provider had taken appropriate action to address the requirement notices from the last inspection.

We have rated this practice as requires improvement overall, with a rating of requires improvement for safe, effective, caring, well-led and inadequate for responsive.

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

- Patient Specific Directions were managed in line with legal requirements
- There was a backlog in summarising patient records back to November 2018.

- There were inconsistencies in the way prescription security was managed across sites e.g. at Emersons Green Medical Centre the sign out sheet for blank prescriptions did not involve a record of serial numbers.
- Not all clinical waste (sharps) bins had been disposed of in line with best practice guidelines.

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

- Exception rate reporting for some population groups was higher than local and national averages e.g. long-term conditions, including diabetes and COPD.
- The Public Health England target for cervical screening uptake, within the working age people population group had not been met.

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

- Staff did not always treat patients with kindness, respect and compassion.
- Patients expressed concerns about the way some of the reception staff dealt with them whilst trying to access services or book appointments.
- Performance indicators from the national GP survey relating to care and treatment as well as the overall patient experience of the GP practice was below local and national averages.

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

- There were significant constraints on the ability of people to access care and treatment in a timely way via the telephone system, resulting in some performance indicators being significantly below local and national averages. We saw the practice had taken steps to improve performance in this area, through the introduction of a new care navigation system, together with increased appointment times of 15 minutes, in response to patient feedback, however the impact had not been reviewed at time of inspection.

The inadequate areas found during inspection impacted on all population groups within the responsive domain, we have therefore rated all population groups as inadequate overall.

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

Overall summary

- The practice had restructured the leadership and management team so that leaders had time to focus on service development and patient needs. They understood the challenges facing them and had improvement plans in place to address them, however the leadership and governance arrangements in place were not fully embedded across all locations. This led to safety concerns and inconsistencies in record keeping and systems.

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

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

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

- Continue to monitor and improve the uptake of cervical screening for disease prevention.
- Continue to monitor and improve areas of high exception reporting.

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. The team included a GP specialist advisor, Practice Nurse specialist advisor, Practice Manager specialist advisor, and a second CQC inspector.

Background to Emersons Green Medical Centre

The provider operates two locations and a branch surgery; Emersons Green Medical Centre provides a service to over 12,000 patients.

The location address is:

St. Luke's Close
Emersons Green
Bristol BS16 7AL

The practice serves the populations of Downend, Emersons Green, Yate and surrounding areas.

The South West UK Census data (2011) shows 6% of the population are recorded as being from the black or minority ethnic community. Public Health England's national general practice profile shows the practice has a significantly lower than England average group of patients aged 65 or over at 13.9% (England average 27.5% and clinical commissioning group average 29.5%).

The practice population has low levels of deprivation. The Index of Multiple Deprivation 2015 is the official measure of relative deprivation for England. The practice population is ranked at decile 10 which is the lowest level of deprivation.

Emersons Green Medical Centre was purpose built and is leased by the GP partners. The building is set over two floors with patient services on the ground floor only. It has power assisted door access to the entrance of the building and a large car park with blue badge reserved parking. There is a separate reception area with an automated arrival system and spacious waiting room.

The practice team includes four GP partners and seven salaried GP's (male and female); GP sessions vacant are covered by regular locum GPs; an executive manager, a business manager and an operational manager; a nurse manager; seven advanced nurse practitioners, three practice nurses; three healthcare assistants; a phlebotomist and administration staff. All staff in addition to the partners and management team work across all the organisations sites.

The practice is an accredited training practice for GP trainees, foundation year trainees and medical students.

The practice has opted out of providing out-of-hours services to their own patients. Patients can access NHS 111 and out of hours services from information on the practice website.

The practice is registered to provide the following regulated activities:

Family planning

Diagnostic and screening procedures

Treatment of disease, disorder or injury

Surgical procedures

Maternity and midwifery services

The location is shared with other health care providers such as the community health visitor team.

Further information about Emersons Green Medical Centre can be found at:

<https://www.emersonsgreenmedicalcentre.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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>Care and treatment were not provided in a safe way for service users. We found:</p> <ul style="list-style-type: none">• Patient Specific Directions were not managed in line with legal requirements.• There was a backlog in summarising patient records back to November 2018.• There were inconsistencies in the way prescription security was managed across sites e.g. at Emersons Green Medical Centre the sign out sheet for blank prescriptions did not involve a record of serial numbers.• Not all clinical waste (sharps) bins had been disposed of in line with best practice guidelines.• There were significant constraints on the ability of people to access care and treatment in a timely way using the telephone system. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures 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> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p>

This section is primarily information for the provider

Requirement notices

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