

# The Handbridge Medical Centre

## Inspection report

Greenway Street  
Chester  
CH4 7JS  
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[www.handbridgedmedcentre.co.uk](http://www.handbridgedmedcentre.co.uk)

Date of inspection visit: 20 September 2023  
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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?

Good



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Requires Improvement



# Overall summary

We carried out an announced comprehensive inspection at The Handbridge Medical Centre on 20 September 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective – good

Caring - good

Responsive – good

Well-led - requires improvement

Following our previous inspection on 29 September 2022, the practice was rated requires improvement overall and for all key questions but caring and responsive.

The full reports for previous inspections can be found by selecting the 'all reports' link for The Handbridge Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

We carried out this inspection to follow up breaches of regulation from a previous inspection.

We inspected the key questions of: Safe, effective, caring, responsive and well-led.

## How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

## Our findings

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.

# Overall summary

We found that:

- The provider did not have fully effective processes for assessing and managing risks associated with the premises.
- Not all action to ensure appropriate standards of cleanliness and hygiene had been taken in a timely way.
- The systems and processes for identifying, managing and mitigating risks to the service were not effective.

However,

- Issues identified at the inspection in 2022 with regards staff training had been addressed.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

We found two breaches of regulations. The provider **must**:

- 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.

In addition, the provider **should**:

- Put in place a written programme of quality improvement and audits to review clinical activity over time.
- Take action to ensure patients with long term conditions are regularly monitored.
- Continue to monitor and improve the uptake of cervical screening and childhood vaccinations.
- Continue to monitor patient feedback regarding access to the service and take action where this indicates improvement required.

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

**Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA**

Chief Inspector of Health Care

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to The Handbridge Medical Centre

The Handbridge Medical Centre is located in Chester at:

Greenway Street

Chester

Cheshire

CH4 7JS

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 and surgical procedures.

The practice is situated within the Cheshire and Merseyside Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 7,870. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices, Cheshire South Primary Care Network.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the second lowest decile (two of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is, 95.6% White, 2.3% Asian, 1.4% Mixed 0.4% Black and 0.2% Other.

There is a team of 5 GPs (including 2 GP partners) and a team of nurses. Clinical staff are supported at the practice by a team of reception/administration staff and a practice manager.

The practice is open 8am to 6:30pm Monday to Friday with extended hours appointments until 8:30pm and on Saturdays 9am to 5pm. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the primary care network, where late evening and weekend appointments are available. Out of hours services are accessed via by NHS 111.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none"><li>• The provider did not have effective oversight of all systems and processes to ensure all clinical risks were removed or mitigated.</li></ul> <p>This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment</p> <p>The registered person had failed to ensure that all premises used by the service were properly maintained. In particular:</p> <ul style="list-style-type: none"><li>• Not all risk assessments, relating to the premises, comprehensively addressed all areas with clear plans for action required to remove or mitigate risks relating to the premises.</li></ul> <p>This was in breach of Regulation 15(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>