

Jenner Healthcare

Inspection report

The Medical Centre Wisbech Road, Thorney Peterborough PE6 0SD Tel: 01733270219 www.jennerhealthcare.co.uk

Date of inspection visit: 13 April 2022 Date of publication: 12/05/2022

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?	Requires Improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced comprehensive inspection at Jenner Healthcare

on 13 April 2022. Overall, the practice is rated as good.

Safe - Requires improvement

Effective - Good

Caring - Good

Responsive - Good

Well-led – Good

When this service registered with us, it inherited the regulatory history and ratings of its predecessor. This is the first inspection of Jenner Healthcare under the registered provider Jenner Healthcare who became the provider from January 2022.

We had previously inspected the practice under the previous provider registration in July 2019 and the practice was rated as requires improvement overall. Under our continuing regulatory history policy, the rating of requires improvement was inherited.

The full reports for previous inspections can be found by selecting the 'all reports' link for Jenner Healthcare on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on all key questions.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit
- Staff questionnaires
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Overall summary

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.

We have rated this practice as Good overall

We found that:

- The practice did not always provide care in a way that kept patients safe and protected them from avoidable harm.
- The practice had a system for manging safety alerts but had not continued to monitor historical alerts and ensure safe prescribing for all patients.
- The practice had not fully ensured safe recruitment processes. We found not all staff had received a Disclosure and Barring Service (DBS) checks or a risk assessment.
- We found the management team did not have full oversight of the documentation held in staff records to ensure safe recruitment procedures had been followed in a timely way.
- The practice did not always evidence that all patients had a structured and comprehensive medicines review. We identified there was some inconsistency with coding of long-term conditions within the clinical system, meaning some appropriate or necessary care was not always given in a timely manner.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We found a breach of regulation. The provider **must**:

• Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the provider **should**:

- Continue to encourage patients to attended for childhood immunisations and encourage patients to attend for the national cervical screening programme to increase uptake.
- Continue to conduct patient feedback exercises to make improvements to services.
- Improve accessibility for staff in respect of contacting a Freedom to Speak Up Guardian if they wish.

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

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 with a second CQC inspector. The team included a GP specialist advisor spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Jenner Healthcare

Jenner Healthcare is located in Peterborough at:

The Medical Centre

Wisbech Road

Thorney

Peterborough

Cambridgeshire

PE6 0SD

The practice has branch surgeries at:

Turners Lane

Whittlesey

Peterborough

Cambridgeshire

PE7 1EJ

And

High Street

Eye

Peterborough

Cambridgeshire

PE6 7UX

Thorney and Whittlesey have dispensaries on site and all sites were visited as part of this inspection. However, we only inspected the Whittlesey dispensary due to the current closure of the dispensary at Thorney.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury, family planning and surgical procedures. These are delivered from all sites.

The practice offers services from both a main practice and the branch surgeries. Patients can access services at any surgery.

The practice is situated within the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) a patient population of about 16,672. This is part of a contract held with NHS England.

Information published by Public Health England shows that deprivation within the practice population group is in the fourth lowest decile (four 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 2% Asian, 95% White, 1% Black, 1% Mixed, and 1% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of nine GPs who provide cover at all sites. The practice has a team of nine nurses who provide nurse led clinics for long-term condition of use of both the main and the branch locations, the practice also have health care assistances, a social prescriber, a phlebotomist and a pharmacist. The GPs are supported at the practice by a team of reception/administration staff. There three team leaders across the three sites to provide managerial oversight.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

Extended access is provided by the practice on a Monday and by GP Hub centre, where late evening and weekend appointments are available. Out of hours services are provided by The Greater Peterborough Network.

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	Regulation 17 HSCA (RA) Regulations 2014 Good
Family planning services	governance
Maternity and midwifery services	How the regulation was not being met:
Surgical procedures	• The practice did not always evidence that all patients had a structured and comprehensive medicines review.
Treatment of disease, disorder or injury	 Our clinical searches found not that not all patients with long term conditions were being reviewed effectively due to coding and linking diagnosis with treatment. This meant patients were not always receiving effective treatment when reviewed. The practice had a system for manging safety alerts, but the system had not continued to monitor historical alerts to ensure safe prescribing for all patients. The systems and processes in place did not always support safe recruitment of staff.
	This was in breach of Regulation 17(1) of the Health and
	Social Care Act 2000 (Degulated Activities) Degulations

Social Care Act 2008 (Regulated Activities) Regulations

2014.