

Saltdean and Rottingdean Medical Practice

Inspection report

Grand Ocean Medical Centre
Longridge Avenue, Saltdean
Brighton
East Sussex
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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?	Good 
Are services responsive?	Requires improvement 
Are services well-led?	Requires improvement 

Overall summary

We carried out an announced comprehensive inspection at Saltdean and Rottingdean Medical Practice on 28 March 2019 as part of our inspection programme.

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 requires improvement overall and requires improvement for all population groups.

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

- The practice did not have appropriate systems in place for the safe management of all high-risk medicines.
- There was no risk assessment as to which emergency medicines were kept in the practice and there was no medicine for use in case of seizures.
- The practice did not have appropriate systems in place for the recording of action in relation to safety alerts received.
- The practice did not always learn and make improvements when things went wrong.

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

- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.

However:

- Patients received effective care and treatment that met their needs.
- Clinical audits were carried out and there was evidence of change and improvements.

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

- Verbal complaints were not recorded; therefore the practice did not always learn and make improvements from these.

However:

- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

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

- Systems were not in place to monitor the overall governance arrangements of the practice.

However:

- Leaders were visible and approachable.

These areas affected all population groups so we rated all population groups as **requires improvement**.

We rated the practice as good for providing caring services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

The areas where the provider **must** make improvement is:

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

In addition, the provider **should**:

- Continue to work to improve areas of patient satisfaction such as in relation to patients feeling listened to and treated with care and concern.
- Continue to work to improve diabetes indicators.
- Include details of how to contact the ombudsman in complaints communication with patients.

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a practice manager specialist adviser.

Background to Saltdean and Rottingdean Medical Practice

Saltdean and Rottingdean Medical Practice is located at Grand Ocean, Longridge Avenue, Saltdean, Brighton, East Sussex, BN2 8BU. The service is provided in converted premises in a residential shopping area in Saltdean, east of Brighton.

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

Saltdean and Rottingdean Medical Practice is situated within the Brighton and Hove Clinical Commissioning Group (CCG) and provides services to approximately 10,200 patients under the terms of a general medical services (GMS) contract.

The practice has three GP partners and two salaried GPs (male and female). The practice employs four practice nurses and one healthcare assistant (female) and a phlebotomist. There is a practice manager, and a range of reception and administrative staff.

There are a significantly higher than average number of patients over the age of 65 and a similar proportion of patients aged under 18 when compared with the local and national averages. There are comparatively lower levels of deprivation. Male life expectancy is 81 years compared to the national average of 79 years. Female life expectancy is 85 years compared to the national average of 83 years.

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 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>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <p>Patients were being prescribed Warfarin without the prescriber having enough information to determine whether it was safe to prescribe.</p> <p>There was no record of action taken in relation to safety alerts and not all staff were aware of all of the alerts.</p> <p>There was no risk assessment for emergency medicines within the practice.</p> <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 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 were ineffective systems and processes to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <p>There was no evidence of a system in place to address safety alerts.</p> <p>Meetings were not consistently held, and minutes were not maintained.</p>

This section is primarily information for the provider

Requirement notices

Significant events and complaints were not always recorded so that trends, issues and concerns could be appropriately identified.

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
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing

How the regulation was not being met.

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:

There were gaps in training for some of the clinical staff in relation to basic life support, safeguarding and infection control training.

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