

# Oakham Medical Practice

# **Inspection report**

Cold Overton Road Oakham LE15 6NT Tel: 01572722621 www.oakhammedicalpractice.co.uk

Date of inspection visit: 28 April 2022 Date of publication: 14/07/2022

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	Inadequate	
Are services safe?	<b>Requires Improvement</b>	
Are services effective?	Inadequate	
Are services caring?	Good	
Are services responsive to people's needs?	<b>Requires Improvement</b>	
Are services well-led?	Inadequate	

# **Overall summary**

We carried out an announced inspection at Oakham Medical Practice on 28 April 2022. Overall, the practice is rated as Inadequate.

Set out the ratings for each key question

Safe - Requires Improvement

Effective – Inadequate

Caring – Good

Responsive - Requires Improvement

Well-led – Inadequate

#### Why we carried out this inspection

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Leicestershire and Rutland. To understand the experience of GP providers and people who use GP services, we asked a range of questions in relation to urgent and emergency care. The responses we received have been used to inform and support system wide feedback.

#### 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

#### 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 Inadequate overall.

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# **Overall summary**

#### We found that:

- The practice had a safety alert protocol in place, however on reviewing recent safety alerts we found they had not been acted on appropriately.
- During the remote review of the clinical system we found patients' treatment was not reviewed or monitored on a regular basis. This included regular medication reviews.
- We found patients had been prescribed high risk medicines without the appropriate reviews taking place.
- The practice had some arrangements to identify risks, however we found staff had not received the recommended immunisations and no risk assessments had been carried out to identify potential risks to patients and staff in the absence of immunisation status.
- Assurance systems were not effectively monitored to mitigate risk. For example: We found an emergency oxygen cylinder that had expired in 2019 had not been removed from the emergency medical bag.
- The practice had some staffing issues which had impacted on recruitment. The practice was continually trying to recruit and in the past nine months had employed four salaried GPs, four advanced nurse practitioners and an assistant practice manager
- On reviewing personnel folders, we found non clinical staff had not received recent appraisals and we identified gaps in staff training. For example: safeguarding and sepsis awareness.
- 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.

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

- 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.

#### The provider **should**:

- Continue to encourage patients to attend for cervical screening
- Monitor staff training to gain assurances all staff are up to date with the latest training modules.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

#### 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

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## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff 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 Oakham Medical Practice

Oakham Medical Practice is located in Oakham, in the county town of Rutland in East Midlands.

Cold Overton Road

Oakham

LE15 6NT

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 and surgical procedures.

The practice offers services at the main practice and also have a minor injuries and same day team situated at Rutland Memorial Hospital. Patients can access services at either site.

The practice is situated within the Leicester Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of about 16,000. This is part of a contract held with NHS England. The practice is part of a wider network of GP practices and is part of Rutland Health Primary Care Network.

Information published by Public Health England shows that deprivation within the practice population group is in the tenth lowest decile (10 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 97.8% White, 1.1% Asian, 1.1% non white ethnic groups.

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 five GP partners and five salaried GPs. The GPs are supported by five advanced practitioners, seven practice nurses, five health care assistants, one phlebotomist and one pharmacist. There is a team of reception/ administration staff. The practice manager and deputy practice manager provide managerial oversight. The practice is an approved training practice and provides training to GP Registrars as part of their ongoing training and education.

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 an appointment. Out of hours services are provided by by Derbyshire Healthcare (DHU).

# **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 12 HSCA (RA) Regulations 2014 Safe care and treatment
Family planning services Treatment of disease, disorder or injury	• We found high risk medicines were being prescribed without the appropriate monitoring in place.
Maternity and midwifery services	• On reviewing a random sample of clinical records we
Surgical procedures	found patients had not received regular medicine reviews.
	<ul> <li>Safety alerts were not being acted on appropriately.</li> </ul>
	• The medicine bag contained an out of date oxygen

cylinder that had not been replaced or removed.

This was in breach of Regulation 12(2) 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

- Governance processes were ineffective to minimise risk. For example: Staff had not completed training relevant to their role.
- Risk assessments had not been completed in the absence of staff immunisation status.
- The practice had an ineffective process in place to monitor performance. On reviewing personnel folders, we found non clinical staff had not received recent appraisals.

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