

Rigg Milner Medical Centre

Inspection report

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East Tilbury
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Date of inspection visit: 23 February 2022
Date of publication: 06/04/2022

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

Requires Improvement



Are services safe?

Requires Improvement



Are services effective?

Requires Improvement



Are services caring?

Requires Improvement



Are services responsive to people's needs?

Requires Improvement



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced inspection at Rigg Milner Medical Centre on 23 February 2022. Overall, the practice is rated as requires improvement.

The ratings for each key question are as follows;

Safe - Requires Improvement

Effective - Requires Improvement

Caring - Requires Improvement

Responsive - Requires Improvement

Well-led - Requires Improvement

Following our previous inspection on 28 May 2021, the practice was rated Inadequate overall and for all key questions and placed in special measures.

As a result of our findings, we took enforcement action against the provider and imposed conditions. These included providing monthly updates as to progress against the issues we identified on inspection.

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

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on:

- The conditions imposed on the providers registration at this location
- Overall governance structures
- Organisational culture
- Whether the practice had displayed their rating on their website
- Performance with cancer screening and childhood immunisations

How we carried out the inspection/review

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

Overall summary

- 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 Requires Improvement overall

We found that:

- The structures to keep staff and patients safe, including safeguarding, had improved since our last inspection, however further work was still required.
- Patients received effective care and treatment that met their needs.
- Performance for preventative care had improved, however improvements were ongoing.
- Action plans were now in place for some instances where issues had been identified either through patient feedback or risk assessment. Further work was required to embed this process and make it effective for all areas of improvements identified.
- The management of medicines, including high-risk medicines had improved but further strengthening was required.
- Documentation relating to Do Not Attempt Cardio Pulmonary Resuscitation decisions required improvement.
- The practice had implemented action plans to improve the experience of patients. They recognised this was a continuing journey.
- Staff had received training to deal with patients with kindness, respect and to enable them listen and receive feedback in a constructive way.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients still experienced some issues with access however there had been some improvement.
- The culture of the practice had significantly improved following our previous inspection.
- Leadership of the practice was more appropriately balanced so staff skills were used more effectively.
- Governance structures had been reviewed and strengthened. Although they were not fully embedded and further improvements were required, a large amount of progress had been made to improve the quality of care and the service provided.

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

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

Whilst we found no breaches of regulations, the provider **should**:

- Improve the process to manage patients on the safeguarding register.
- Continue to improve processes around medicines that require monitoring and the recording of Do Not Attempt Cardio Pulmonary Resuscitation decisions.
- Continue to improve performance relating to childhood immunisation, cervical cancer screening, access and patient satisfaction.

Overall summary

- Improve online accessibility to information on complaints.
- Continue to embed and review the effectiveness of processes and systems including staff training.

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

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. 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. The team also included a team inspector and a practice manager specialist advisor who were present for the site visit.

Background to Rigg Milner Medical Centre

The service is provided by Dr Reshma Rasheed and is based at Rigg Milner Medical Practice in East Tilbury. The practice has two sites at which it provides regulated activities; one at East Tilbury and one at Corringham. Patients can access services at either surgery. Corringham branch address: 114 Giffords Cross Road, Corringham, Essex, SS17 7QQ. We did not visit the branch site as part of our inspection.

The practice is situated within the Thurrock Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 4,863. This is part of a contract held with NHS England. The practice is part of a primary care network (PCN) of local GP practices.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, surgical procedures, family planning services, maternity and midwifery services and treatment of disease, disorder or injury.

Information published by Public Health England shows that deprivation within the practice population group is in the seventh lowest decile (seven 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 95.2% White, 2.5% Black, 1.2% Mixed, 0.9% Asian and 0.2% Other.

The practice has one female GP, supported by several long-term locums, who provide cover at both practices. The practice has a team of several part-time nurses who provide nurse led clinics for long-term condition at both the main and the branch locations. The GPs are supported at the practice by a team of reception/administration staff. The practice managers are based at the main location 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 locally by Thurrock Health Hubs, where late evening and weekend appointments are available. When the practice is closed, out of hours cover for emergencies is provided by IC24 via 111.

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 Family planning services Maternity and midwifery services Treatment of disease, disorder or injury Surgical procedures	<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 mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk;</p> <ul style="list-style-type: none">• The practice was unable to provide assurance that an action plan with measurable outcomes was in place where issues were identified from the main surgery risk assessment. There was not a system to ensure the action plan was being reviewed or completed in a timely way.• The practice was unable to provide assurance that there was a system to review the action plan from the external fire risk assessment and that the issues identified had been addressed.• The process in place for reviewing the safeguarding policy was not effective as it did not reflect the intercollegiate guidance on the required staff training levels. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>