

Iwade Health Centre

Inspection report

1 Monins Road Iwade Sittingbourne ME9 8TY Tel: 01795413100

Date of inspection visit: 19 October 2021 Date of publication: 26/11/2021

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	Inspected but not rated	
Are services safe?	Inspected but not rated	
Are services well-led?	Inspected but not rated	

Overall summary

We carried out an announced focussed inspection at Iwade Health Centre on 9 October 2020. The practice was not rated as a consequence of this inspection. The full comprehensive report on the October 2020 inspection can be found by selecting the 'all reports' link for Iwade Health Centre on our website at www.cqc.org.uk.

After our inspection in October 2020 the practice wrote to us with an action plan outlining how they would make the necessary improvements to comply with the regulations.

We carried out an announced focussed follow-up review on 25 May 2021 to assess the provider's compliance to meet the legal requirements against the warning notices issued in relation to breaches in regulations that we identified at our previous inspection in October 2020. The practice was not rated as a consequence of this review. The full report on the May 2021 review can be found by selecting the 'all reports' link for Iwade Health Centre on our website at www.cqc.org.uk.

After our review in May 2021 the practice wrote to us with an action plan outlining how they would make the necessary improvements to comply with the regulations.

Why we carried out this review:

We carried out an announced focussed follow-up inspection on 19 October 2021 (at short notice) to assess the provider's compliance to meet the legal requirements against the requirement notice issued in relation to the breaches in regulations that we identified in our previous review in May 2021. This report covers findings in relation to those requirements.

How we carried out the 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 in line with all data protection and information governance requirements.

This included:

- Requesting evidence from the provider.
- A short site visit.

Our judgement of the quality of care at this service is based on a combination of what we found when we carried out the review, information from our ongoing monitoring of data about services and information from the provider, patients, the public and other organisations.

This practice was not rated as a consequence of this inspection.

At this inspection we found:

- Risk assessments failed to contain sufficient rationale for the lack of hepatitis B vaccination records for one member of clinical staff.
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Overall summary

- The practice's induction system for temporary staff had not been updated in a timely manner and not all staff were up to date with basic life support training.
- The practice's reception had been closed to staff since June 2021 which was not in line with NHS England standard operating procedures.
- Improvements had not been sufficiently effective and were still required to ensure that all staff followed best practice guidance when carrying out reviews of patients diagnosed with chronic obstructive pulmonary disease (COPD).
- Requirements of some staff to provide practice clinical leadership (or clinical supervision) in the absence of the clinical lead salaried GP were not included in their written job descriptions.
- Improvements to the management of some current and future performance were not yet sufficiently effective and other risk management improvements were required.

The areas where the provider **must** make improvements are:

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

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

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 Care Quality Commission (CQC) lead inspector.

Background to Iwade Health Centre

The registered provider is DMC Healthcare Limited which is a primary care at scale organisation that delivers general practice services at three registered locations in England.

Iwade Health Centre is located at 1 Monins Road, Iwade, Sittingbourne, Kent, ME9 8TY. The practice is situated within the NHS Kent and Medway Clinical Commissioning Group (CCG) and has an alternative provider medical services contract with NHS England for delivering primary care services to the local community.

As part of our inspection we visited Iwade Health Centre, 1 Monins Road, Iwade, Sittingbourne, Kent, ME9 8TY only, where the provider delivers registered activities.

Iwade Health Centre has a registered patient population of approximately 5,700 patients. The practice is located in an area with a higher than average deprivation score.

There are arrangements with other providers to deliver services to patients outside of the practice's working hours.

The practice staff consists of two salaried GPs (one male and one female), one practice manager, one assistant practice manager, two advanced nurse practitioners (both female), two practice nurses (both female), one community psychiatric nurse (male), one acute care practitioner (paramedic) (female), one healthcare assistant (female), six practice administrators and one prescription clerk. The practice also employs locum staff directly. Practice staff are also supported by the DMC Healthcare Limited management staff.

The provider is registered with the Care Quality Commission to deliver the following regulated activities: diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures; treatment of disease, disorder or injury.

Enforcement actions

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	A Warning Notice was issued for breaches of Regulation 17 Health and Social Care Act 2008 (Regulated Activities)
Surgical procedures	Regulations 2014: Good governance.
Treatment of disease, disorder or injury	