

Hawthorn Medical Practice

Inspection report

Hawthorn Road
Skegness
PE25 3TD
Tel: 01754896350

Date of inspection visit: 19 April 2023
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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 to people's needs?

Requires Improvement



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at Hawthorn Medical Practice on 19 April 2023 to review and rate the service following an inspection 23 August 2022 when the practice was rated as Inadequate overall and placed in special measures.

At the August inspection, the practice was rated as inadequate overall and for the key questions of safe, responsive, and well-led. It was rated as requires improvement for the effective and caring key questions. The practice was placed into special measures.

There had been a focused inspection on 14 December 2022 to follow up on warning notices that had been issued in respect of breaches of Regulations 12, 17 and 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The practice had met the requirements of the warning notices. That inspection did not affect the ratings awarded as a result of the August 2022 inspection.

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

As a result of this inspection on 19 April 2023, the ratings for each key question are:

Safe – Requires improvement.

Effective - Requires improvement.

Caring- Good.

Responsive- Requires Improvement

Well-led – Good.

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:

- 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.
- Short onsite visit.

Our findings

We based our judgement of the quality of care at this service on a combination of:

Overall summary

- What we found when we inspected.
- Information from our ongoing monitoring of data about services.
- Information from the provider, patients, the public and other organisations.

We found that:

- Care was not always provided in a way that kept patients safe and protected them from avoidable harm, for example patients were not reviewed following acute exacerbation of asthma.
- The practice had taken reasonable steps to protect patients and others from the risks posed by healthcare associated infections.
- The provider had implemented effective oversight of the systems and processes designed to deliver safe and effective care.
- The time allowed for consultations with nurses to review long term conditions was not always appropriate.
- The practice did not record the complete immunisation status of all staff members who came into direct contact with patients, for all conditions as detailed in the guidance and best practice issued by the UK Health Security Agency.
- There was appropriate monitoring of patients in receipt of high-risk medicines.
- The uptake of childhood immunisations and cancer screening was below target.
- The practice was in the initial stages of establishing a Patient Participation Group.
- The provider had started to analyse telephone data to gain oversight of where delays in call handling may be occurring, but further work was required in this area to help improve performance.

The provider must:

- Ensure patients prescribed rescue steroids for asthma are appropriately followed up in line with best practice and guidance.
- Take appropriate action to secure or remove blind cords to eliminate the risk of them becoming ligature points.
- Ensure the immunisation status of staff is recorded.

The provider should:

- Review the practice nurse appointment system.
- Review the process for receiving and actioning patient safety alerts.
- Continue to take steps to improve the uptake of both childhood immunisations and cancer screening.
- Establish and embed the Patient Participation Group.
- Continue to collect and analyse data from the telephone system to help better meet demand.

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

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.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Our inspection team

Our inspection team was led by a CQC lead inspector and two additional CQC inspectors 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 Hawthorn Medical Practice

Hawthorn Medical Practice is located at:

Hawthorn Road

Skegness

Lincolnshire

PE25 3TD

The practice has a branch surgery at:

Hawthorn Surgery

Wainfleet Road

Burgh Le Marsh

Skegness

Lincolnshire

PE24 5ED

We visited both sites as part of our inspection.

The Skegness site is open from 8am to 6.30pm Monday to Friday and the Burgh Le Marsh branch from 8.30am to 5pm Monday to Wednesday (closed for lunch 12.15 to 1.45pm) and Thursday from 8.30am to noon. Extended hours appointments are offered on two evenings a week.

The provider is a partnership of eight GPs and is registered with CQC to deliver the Regulated Activities of:

- diagnostic and screening procedures
- maternity and midwifery services
- family planning
- treatment of disease, disorder, or injury
- surgical procedures.

These are delivered from both sites.

There is a dispensary at the Burgh Le Marsh branch site. The practice can dispense to 3,114 eligible patients.

The practice is situated within the Lincolnshire Integrated Care System and delivers General Medical Services (GMS) to a patient population of about 17,400. This is part of a contract held with NHS England. The practice list is weighted to reflect the healthcare needs of its patient population. The reason for weighting for patient demographics is that certain types of patients place a higher demand on practices than others. The adjustment for deprivation acknowledges that deprived populations have higher health needs than less deprived populations with a similar demographic profile.

The practice is part of a wider network of GP practices known as a First Coastal Primary Care Network.

Hawthorn's practice population is strikingly different from the Lincolnshire and England averages. It has higher numbers of patients aged 65 and over, a higher deprivation score, higher numbers of patients with a long-term condition and lower numbers aged 18 and under.

Information published by Public Health England shows that deprivation within the practice population group is in the first decile (one of 10). The lower the decile, the more deprived the practice population is relative to others.

The percentage of the practice's patients aged 65 and over is 27.3% (2021), higher than the Lincolnshire average of 23.1% and England average of 17.4%.

Life expectancy for males (75.7) and for females (81.3) is below the England average of 79.5 for males and below the England average of 83.1 for females.

The percentage of the practice's patients aged 18 and under is 16.9%, lower than the Integrated Care Board average of 18.8% and the England average of 20.4%.

2.1% of Hawthorn's population are from BAME groups, slightly higher than the Lincolnshire average of 2%.

The practice's deprivation score in 2019 is 42.2, much higher than the Lincolnshire average (19.9) and England average (21.7).

In 2021, 70.4% of the practice's population had a long-term health condition; much higher than the Lincolnshire average of 56.3% and the England average of 51.1%.

The team of eight GP partners provide consultations at both surgeries. The practice has an advanced nurse practitioner, a nurse practitioner, three practice nurses and two healthcare assistants. They are supported by a team of dispensers, reception, housekeeping, and administration staff.

Enhanced access is provided where late evening and weekend appointments are available.

Out- of- hours services are provided by Lincolnshire Community Health Services NHS Trust.

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 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
Surgical procedures	Care and treatment must be provided in a safe way for service users.
Treatment of disease, disorder or injury	How the regulation was not being met.
Family planning services	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: no action had been taken to ensure window blind cords could not be used as ligature points.
Maternity and midwifery services	The vaccination status of all staff had not been recorded in line with best practice and official guidance
	There was insufficient proper and safe management of medicines. In particular: those patients with asthma who had been prescribed rescue steroids had not been followed up in accordance with best practice and official guidance.