

Brookside Health Centre

Inspection report

Queens Road Freshwater PO40 9DT Tel: 01983758998 www.westwightpractice.co.uk

Date of inspection visit: 16 August 2023 Date of publication: 25/10/2023

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	Good	
Are services safe?	Requires Improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Outstanding	\Diamond
Are services well-led?	Good	

Overall summary

We carried out an announced comprehensive inspection at Brookside Health Centre on 16 August 2023. Overall, the practice is rated as good.

Safe - requires improvement

Effective - good

Caring - good

Responsive - outstanding

Well-led - good

This was the first inspection of the practice since it came under the provider Wight Primary Partnerships Limited in December 2019.

Why we carried out this inspection

We carried out this inspection to as part of our inspection programme.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit to both the main location.
- Reviewing staff questionnaires.

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 found that:

- The practice's response to patients' individual needs was outstanding. The practice was focused on making improvements to help patients access services and to widen the range of services provided. The practice had appointed dedicated staff in different roles who worked with partners in care to support patients and develop new services.
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Overall summary

- The practice had a significantly larger proportion of older patients than the national average, and it offered tailored services to meet their needs. For example, it had developed an innovative project to help patients who needed additional assistance with meals following discharge from hospital. Care coordinators supported individuals with their wellbeing. Overall, the practice had built constructive relationships with patients and partners in care and this helped to reduce avoidable hospital attendances.
- There was an increasingly positive trend in patient feedback. Feedback from patient surveys and social media showed patients could access care and treatment in a timely way.
- Although the practice had systems to provide care in a way that kept patients safe and protected them from avoidable harm, there were gaps in the processes for gaining assurances regarding the building's health and safety and infection prevention and control. We also found the systems to review patients care needs were not consistently effective, and this included correctly coding for conditions and recalls.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We saw the following area of outstanding practice:

- The service had established services to meet the needs of their local population, including an innovative project to help patients needing additional help with meals following discharge from hospital and building constructive relationships with local care homes.
- The practice was focused on making improvements to help patients access the range of services provided. This had resulted in an increase in positive feedback from patients and was against a general national decline in patient satisfaction with GP access.

We found a breach of regulations. The provider **must**:

• Ensure care and treatment is provided in a safe way to patients.

Whilst not breaches of regulations, the provider **should**:

- Continue to carry out clinical audits in respect of high-risk medicines and MHRA alerts in line with guidance to support good care of patients.
- Record in patient records when test results, carried out by other healthcare professionals, are used to inform decisions about patient care.
- Improve the accuracy of coding for health conditions, to support timely recalls.
- Implement processes to encourage patients to attend for health reviews in line with guidance.
- Improve the timeliness of reviewing patients with asthma following an acute exacerbation.
- Consider setting up a practice-wide risk register to monitor actions arising from, for example, external reports as well as internal findings.
- Improve patient uptake of cervical screening.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health 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.

Background to Brookside Health Centre

Brookside Health Centre is located in Freshwater, Isle of Wight, at:

Queens Road

Freshwater

PO40 9DT

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

The practice is situated within the Hampshire and Isle of Wight Integrated Care System (ICS) and delivers General Medical Services (GMS). This is part of a contract held with NHS England.

The practice has just over 11000 registered patients and is part of a wider network of GP practices on the Isle of Wight, called the Central and West Health Alliance primary care network (PCN). The other practices in this PCN are Newport Health Centre and Cowes Medical Centre. Together, these practices serve a population of about 50,000 patients.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is level 6 out of 10 deciles. 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 98% white and 0.8% Asian.

The age distribution of the practice population is different from that of the local and national averages. There are more patients over 60 years of age, and fewer working age and young people. The practice population is made up of almost 40% older people, compared with an average of 17.7% for all England GP practices.

The GP team is made up of 2 part time salaried GPs and over 10 locum GPs. There are 3 regular locum GPs who work remotely and 8 who regularly work on site. The practice has a team of clinicians made up of 4 advance nurse practitioners (ANPs), 3 paramedics, a nurse consultant and 7 practice nurses. There are also 3 healthcare assistants and 1 full time pharmacist and 2 pharmacy assistants. The practice employs 2 musculotskelatal practitioners and a mental health practitioner who links with the mental health access coordinators employed by the PCN. In additional the practice offers the services of a social prescriber, 2 health and wellbeing coaches and, via the PCN, a dietician and care coordinators and a GP assistant.

The clinicians are supported at the practice by a team of staff including patient advisors, who assist patients with their enquiries, and management staff.

The practice had recently recruited 2 additional GPs, one from the team of locum staff and another who was going to start in October 2023.

The practice telephone lines are open between 8am and 6.30pm Monday to Friday, and the practice doors are open from 8.30am to 6pm each weekday. The practice is closed at weekends and on public holidays. Evening appointments can be made three evenings a week, through the extended access arrangement within the PCN.

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
Surgical procedures	treatment
Treatment of disease, disorder or injury	Care and treatment must be provided in a safe way for service users
Maternity and midwifery services	
Family planning services	How the regulation was not being met:
	Assessments of the risks to the health and safety of service users of receiving care or treatment were not being carried out. In particular:
	The registered person must ensure risks to both the health and safety and infection prevention and control of service users are reviewed and managed.
	The registered person must ensure medicines are consistently managed safely, by ensuring the systems are in place for monitoring and reviewing patient care in line with guidance.
	The registered person must ensure that emergency medicines are in place to support safe patient care.
	This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.