

Iwade Health Centre

Inspection report

1 Monins Road Iwade Sittingbourne ME9 8TY Tel: 01795413100

Date of inspection visit: 25 May 2021 Date of publication: 22/06/2021

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.

Why we carried out this review:

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 the breaches in regulations that we identified in our previous inspection in October 2020. 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 review was carried out in a way which enabled us to regulate the provider remotely. This was in line with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing.
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.

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 review.

At this review we found:

- The provider had made improvements to their systems, practices and processes to help keep people safe.
- Risks to patients, staff and visitors were now being assessed, monitored or managed in an effective manner.
- The provider had reviewed the way clinical staff carried out reviews of the care of patients diagnosed with chronic obstructive pulmonary disease (COPD). However, further improvements were required to ensure all staff followed best practice guidance when carrying out these reviews
- The arrangements for medicines management had been revised and improved to help keep patients safe.
- The provider had made improvements to local clinical leadership (including clinical supervision) and the Registered Manager was now visible in the practice on a monthly basis.
- Improvements had been made to governance arrangements. However, further improvements were still required.
- Appraisals that were overdue had been carried out to help the provider involve staff to help maintain high-quality and sustainable care.
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Overall summary

• The provider had reviewed their systems and processes for learning and continuous improvement to make them more effective.

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.

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

- Continue with plans to establish the vaccination status of all relevant staff and ensure they are offered relevant vaccinations in line with current Public Health England guidance.
- Continue with plans for relevant staff to attend basic life support training.
- Consider further revision of governance documents to make them clearer for staff to follow in relation to clinical supervision arrangements at Iwade Health Centre and ensure they are in date and ratified.

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

Population group ratings		
Older people	Not inspected	
People with long-term conditions	Not inspected	
Families, children and young people	Not inspected	
Working age people (including those recently retired and	Not inspected	

Not inspected

Not inspected

with dementia)

People whose circumstances may make them vulnerable

People experiencing poor mental health (including people

Our inspection team

students)

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 (MedOCC) to deliver services to patients outside of the practice's working hours.

The practice staff consists of two salaried GPs (both male), one practice manager, one assistant practice manager, two advanced nurse practitioners (both female), one nurse prescriber (female), one community psychiatric nurse (male), one junior pharmacist (female), one acute care practitioner (paramedic) (female), one healthcare assistant (female), three practice administrators, one prescription clerk and four receptionists. The practice also employs locum staff via an agency. 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.

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.

Regulation Regulated activity Diagnostic and screening procedures Regulation 17 HSCA (RA) Regulations 2014 Good governance Family planning services Systems or processes were not established and operated Maternity and midwifery services effectively to ensure compliance with the requirements in this Part. Such systems or processes did not enable Surgical procedures the registered person to; Treatment of disease, disorder or injury Assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk which arise from the carrying on of the regulated activity. In particular: • The provider was unable to demonstrate they had adequately taken into consideration and addressed risks associated with staff not always following best practice guidance when carrying out reviews of patients with Chronic Obstructive Pulmonary Disease (COPD). This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.