

## Primary Ambulance Services Limited

# Primary Ambulance Services Limited - Operations Centre

### Inspection report

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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

Inadequate



Are services safe?

Inadequate



Are services effective?

Inadequate



Are services caring?

Insufficient evidence to rate



Are services responsive to people's needs?

Requires Improvement



Are services well-led?

Inadequate



# Summary of findings

## Overall summary

Primary Ambulance Services Limited - Operations Centre is operated by Primary Ambulance Services Ltd. The service opened in 2009. It is an independent ambulance service based in South Ockenden, Essex providing patient transport services to the public and private sector. The service primarily serves the communities of the London and Essex area.

The service is registered to provide the following regulated activity:

- Transport services, triage and medical advice provided remotely
- Treatment of disease, disorder or injury


We inspected the service using our focused inspection methodology.

The service was previously inspected in May 2022. As a result of this inspection we took urgent action to suspend the registration of the provider, scheduled to end on 22 June 2022. This inspection was a focused follow up inspection to review if all areas of concern had been resolved and the risk of harm to patients had been removed. We did not rate the service at this inspection.

As a result of this inspection, concerns had been rectified and a decision was made not to extend the notice of decision, under Section 31 of the Health and Social Care Act 2008, to suspend the service. Therefore, the provider was able to continue regulated activities following this inspection.

# Summary of findings

## Our judgements about each of the main services

Service	Rating	Summary of each main service
Patient transport services	Inspected but not rated 	We did not rate the service at this time; therefore the rating remains inadequate

# Summary of findings

## Contents

### Summary of this inspection

Background to Primary Ambulance Services Limited - Operations Centre	5
Information about Primary Ambulance Services Limited - Operations Centre	5

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### Our findings from this inspection

Overview of ratings	6
Our findings by main service	7

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# Summary of this inspection

## Background to Primary Ambulance Services Limited - Operations Centre

The service was inspected in January 2022 where several regulatory breaches were identified. We served the provider a notice of decision, under Section 31 of the Health and Social Care Act 2008, to suspend the service from 27 January 2022 until 10 March 2022. We also issued requirement notices for breaches of regulation 12, 13, 15, 17 and 18. The suspension was extended from 11 March 2022 until 18 March 2022, in order for the service to provide evidence setting out how they had addressed each of the concerns identified.

We carried out a focused inspection on 10 May 2022, at this inspection we identified ongoing regulatory breaches and served the provider a notice of decision, under Section 31 of the Health and Social Care Act 2008, to suspend the service from 11 May 2022 until 22 June 2022. We also issued nine requirement notices.

This inspection focused on the concerns identified in the notice of decision.

## How we carried out this inspection

We carried out a short notice announced focused inspection of the service on the 21 June 2022. We spoke with four members of staff and reviewed evidence relevant to the concerns identified previously.

The team consisted of one inspector and one assistant inspector.

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.

## Areas for improvement

Action the service **MUST** take is necessary to comply with its legal obligations. Action a service **SHOULD** take is because it was not doing something required by a regulation but it would be disproportionate to find a breach of the regulation overall, to prevent it failing to comply with legal requirements in future, or to improve services.

### Action the service **MUST** take to improve:

- The provider must ensure mandatory safety training is completed by all staff, that it is checked and reviewed regularly – Regulation 12: Safe care and Treatment

# Our findings

## Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Patient transport services	Inspected but not rated	Not inspected	Not inspected	Not inspected	Not inspected	Inspected but not rated
Overall	Inadequate	Inadequate	Insufficient evidence to rate	Requires Improvement	Inadequate	Inadequate

# Patient transport services

Safe

Inspected but not rated 

## Are Patient transport services safe?

Inspected but not rated 

### Mandatory training

**The service provided mandatory training in key skills to all staff but did not make sure everyone completed it.**

Some staff members were employed directly by the service and others worked on an ad-hoc basis. There was an expectation all staff would complete mandatory training to enable them to work in a safe and effective manner. During the inspection, inspectors saw evidence of non-compliance with mandatory training. No member of staff was fully compliant with mandatory training, with gaps identified across all mandatory training subjects for all staff.

Post-inspection, we asked the service to provide evidence of how they would ensure all staff had completed the required mandatory training. The manager of the service sent in an updated mandatory training matrix, alongside completed certificates of training staff had undertaken. In addition to this, the manager outlined a plan of how the service would achieve overall compliance with mandatory training. Through our engagement and monitoring process, we will continue to seek assurances with staffs mandatory training compliance.

### Cleanliness, infection control and hygiene

**There were systems and processes in place to monitor standards of cleanliness and hygiene. The service provided assurance it controlled infection risk consistently well.**

The vehicle and equipment we inspected were cleaned effectively. We inspected the only two vehicles in operation. The vehicles were visibly clean. In our last inspection, we identified the driver seat had a rip in the material of the chair and the foam was exposed, this had now been repaired.

Clean linen, hand sanitiser and decontamination wipes were on board the vehicles. The hand gel dispenser in the vehicles had been fixed to the surface of the vehicles, which had improved the dispensing of the gel. This was an improvement since our last inspection.

We asked for the cleaning records for each vehicle since our last inspection, this was provided and demonstrated the vehicles were undergoing daily cleaning, when in use. There was a service level agreement in place with an external company for a deep clean every three months. The service level agreement had been signed by both parties and stated it will be reviewed annually. We were also provided with a daily vehicle inspection log and records of a regular vehicle cleaning schedule.

The storeroom, where consumables were stored, was clean but cluttered. Consumables were now stored appropriately, however, some items were difficult to reach due to the volume of equipment in what was a small room. The manager had now implemented a system which highlighted when consumables were approaching their expiry date. The manager told us they would review this weekly to ensure items are replaced ahead of their pending expiry.

# Patient transport services

The service's base location provided staff access to vehicle and equipment cleaning facilities, including mops, buckets and running water. During our last inspection, we found dirty mops in stagnant dirty water. During this inspection, we found mop and buckets and other cleaning equipment to be stored appropriately. These items also appeared to be new and clean.

In our previous inspection, there was no effective process in place to use and store cleaning products under control of substances hazardous to health (COSHH) rules. Cleaning products used were in the storeroom with no COSHH controls in place. Detergent sprays and other cleaning products used were stored on an open shelf without any control measures. During this inspection, we found tighter controls regarding COSHH. Cleaning products were kept in a locked cabinet in a separate building with appropriate warning signs displayed. All members of staff we spoke with had a good understanding of how to use these products safely, however, there was no evidence to show if staff had undertaken training in the safe use of COSHH products.

One member of staff also showed us a folder which contained details regarding the COSHH products which were kept on-site. This folder explained how products should be stored in line with industry standard safety protocols.

## Environment and equipment

**The design, maintenance and use of facilities, premises, vehicles and equipment kept people safe. Staff were trained to use equipment. Staff managed clinical waste well.**

During our previous inspection, we carried out visual checks of the vehicle that was operational and found several visible defects. There was significant rust to the door sealings and on the ramp. The same was found during this inspection. The rust on the door sealings and the ramp was still present. However, we were provided with evidence of completed MOT certificates for both vehicles which did not highlight any major or advisory concerns. We were also shown a document from a local MOT/mechanics centre which stated the rust to be cosmetic in nature.

At the last inspection, the vehicle's side door did not close without significant force, this had been repaired. The vehicle side door was now locking on a catch, meaning there was no risk to the door opening or closing by itself. The sidestep was previously found to be difficult to open and close. During this inspection, the sidestep had been repaired and was now easier to use.

During our last inspection, we identified concerns regarding vehicle servicing and maintenance. At this inspection we saw evidence of an up to date vehicle service in the last 12 months for both ambulance vehicles.

Previously we had concerns that daily safety checks were not being completed consistently and thoroughly. During this inspection, we were provided with evidence of vehicle check sheets which were completed fully for the previous one month. We did not identify any concerns on review of these checks.

During our previous inspection, there was no effective process to ensure consumables and portable oxygen cylinders were in date. We found on this inspection that all consumables and portable oxygen cylinders were checked, and all products were in date, visibly in-tact and stored appropriately.