

# Earls Barton Medical Centre

## Inspection report

8 Aggate Way  
Earls Barton  
Northampton  
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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 well-led?

Inadequate 

# Overall summary

We carried out an unannounced focused inspection of Earls Barton Medical Centre and the branch, Penvale Park Medical Centre on 22 April 2021, in response to a number of concerns received. Due to the severity of the concerns found on our inspection we took urgent enforcement action against the provider and imposed urgent conditions on the provider's registration. The provider is required to make the necessary improvements by 4 June 2021.

We last inspected this practice on 7 October 2015 when we rated the practice as Good.

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.
- Risks to staff and patients at the practice had not been adequately assessed, monitored and planned for.
- Infection prevention and control measures were inadequate and the practice had not taken into account the risks associated with COVID-19.
- There was limited monitoring of the outcomes of care and treatment, this included evidence of poor medicines management, patient record summarisation and clinical read coding.
- The practice's dispensary had a lack of clinical oversight, and processes relating to safe dispensing were limited.
- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.
- The practice culture did not support high quality sustainable care. There was a limited focus on learning and improvement. Staff felt unsupported and that leaders were unapproachable.
- The overall governance arrangements were ineffective as the practice did not have clear and effective processes for managing risks.

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:

- Conducting staff and provider interviews using video conferencing
- 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
- A site visit

**We have rated this practice as Inadequate overall.**

# Overall summary

We rated the practice as **Inadequate** for providing safe, effective and well-led services because:

- The practice did not have clear systems and processes to keep patients safe.
- Safeguarding processes and procedures were inadequate.
- Staff were not being safely recruited and we saw limited monitoring of clinical registrations.
- The practice did not have an adequate system in place to safely manage Medicines and Healthcare products Regulatory Agency (MHRA) and other safety alerts.
- There was an absence of effective management at the practice which had impacted on the quality of care and treatment.

Following our inspection, we imposed urgent conditions to the provider registration of Earls Barton Medical Centre. The conditions covered areas such as staffing, training, practice management, safeguarding, medicines management, summarisation, coding and dispensary practices. The provider is required to make the necessary improvements by 4 June 2021.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service.

Special measures will give people who use the service the reassurance that the care they get should improve.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

<b>Older people</b>	<b>Inadequate</b>	
<b>People with long-term conditions</b>	<b>Inadequate</b>	
<b>Families, children and young people</b>	<b>Inadequate</b>	
<b>Working age people (including those recently retired and students)</b>	<b>Inadequate</b>	
<b>People whose circumstances may make them vulnerable</b>	<b>Inadequate</b>	
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Inadequate</b>	

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP national clinical advisor, a team inspector and a member of the CQC Medicines team.

## Background to Earls Barton Medical Centre

Earls Barton Medical Centre is located at 8 Aggate Way, Earls Barton, Northamptonshire, NN6 0EU. There is also a branch, Penvale Park Medical Centre located at Hardwick Road, East Hunsbury, Northampton NN4 0GP.

The practice holds a Primary Medical Services contract and provides GP services to approximately 9,500 patients. The practice provides on-site pharmacy and dispenses medicines for those patients who live in excess of one mile from a pharmacy. The practice is managed by two GP partners. They are supported by a nursing team which includes an advanced nurse practitioner, practice nurses and a health care assistant. The practice also employs a practice manager, a team of receptionists, administrators and a medical secretary.

The practice has a registered manager in place. A registered manager is an individual registered with CQC to manage the regulated activities provided. The registered manager is one of the GP partners at the practice.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures, and treatment of disease, disorder or injury.

The practice is open from 8.00am to 6.30pm Monday to Friday. Urgent appointments are available on the day. Routine appointments can be pre-booked in advance in person, by telephone or online. Telephone consultations and home visits are available daily as required.

The practice has opted out of providing an out-of-hours service. However, the provider is available outside usual surgery hours, with the practice's phone line being routed to an answering service, which will pass on messages. Otherwise, patients calling the practice when it is closed relate to the local out-of-hours service provider via NHS 111.