

Dr C M Marsh & Partners

Inspection report

Grovehurst Road
Kemsley
Sittingbourne
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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

Good 

Are services safe?

Requires Improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced inspection at Dr C M Marsh and Partners (also known as Grovehurst Surgery) on 24 June 2022. Overall, the practice is rated as Good.

Safe – Requires Improvement

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Why we carried out this inspection

This was an announced comprehensive inspection to provide the practice with an up to date rating. At our previous inspection on 18 November 2015, the practice was rated Good overall.

The full reports for previous inspections can be found by selecting the 'all reports' link for The Dr C M Marsh and Partners on our website at www.cqc.org.uk

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 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 short site visit,
- Staff surveys.

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.

Overall summary

We have rated this practice as Good overall

We rated the practice **Requires Improvement** for providing safe services.

We found that:

- Our clinical record searches found improvement was required in relation to the safe management and monitoring of high risk medicines.

We rated the practice **Good** for providing effective, caring, responsive and well-led services.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Where our clinical record searches found improvement was required in relation to the safe management and monitoring of high-risk medicines and patients with long-term conditions; the practice had made improvements and had a clear, comprehensive and realistic action to address this.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of person-centre care.

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

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

The provider **should**:

- Continue with their action plan to ensure ongoing improvement in relation to; the safe management and monitoring of high-risk medicines and patients with long-term conditions
- Continue with their action plan to ensure that all historical safety alerts were being routinely reviewed to ensure that patients being newly prescribed certain medicines were highlighted in the system to ensure the guidance was applied.

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

Our inspection team

Our inspection team was led by a CQC lead inspector and a second CQC 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 Dr C M Marsh & Partners

Dr C M Marsh and Partners is located at Grovehurst Surgery, Grovehurst Road, Kemsley, Sittingbourne, Kent, ME10 2ST.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

The practice is situated within the Kent and Medway Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 7,113. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices, Sittingbourne Primary Care Network (PCN).

The practice is a training practice for trainee GPs.

Information published by Public Health England shows that deprivation within the practice population group is in the seventh lowest decile (seven of 10). 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 95% White, 2.2% Black, 1.3% Asian, 1.3% Mixed and 0.2% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more female patients registered at the practice compared to males.

The practice is led by three partner GPs (one male and two female) who are supported by a long-term locum GP (female). The practice has a team of two nurses (female), an urgent care health practitioner (male), senior healthcare assistant (female) and a general practice assistant (female). The GPs are supported at the practice by a practice manager and a team of reception/administration staff.

The practice is open Monday to Friday 8.30am to 6pm.

The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by Sittingbourne PCN, where late evening and weekend appointments are available. Out of hours services are provided by Integrated Care 24.

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
Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury Diagnostic and screening procedures	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider had failed to provide care and treatment in a safe way for service users. In particular:</p> <ul style="list-style-type: none">• Two patients prescribed methotrexate had not received the appropriate three-monthly monitoring blood test since November 2021 and January 2022.• Of 188 patients prescribed a direct acting oral anticoagulant (DOAC), 44 patients had not had the required monitoring. Of the five patient records we looked at; all five patients had not had one of the two appropriate blood tests within the required timescale of 12 months.• Three patients prescribed ACEI/ARB and potassium sparing diuretics, had not had the required blood test within the last six months.• Five patients identified as having a potential missed diagnosis of diabetes, had not been coded as diabetic or had a HbA1c blood test result which was at the acceptable level; three had not been informed of the diagnosis and two had not been added to the diabetic register.• Seventy two patients with a diagnosis of Chronic Kidney Disease stage 3, should have been on the CKD stage 3 register but were not coded as such.• Four patients with polypharmacy had been coded as having received a review but there was no discussion recorded in their records. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>