

Lakeside Healthcare at Rushden

Inspection report

Adnitt Road Rushden Northamptonshire NN10 9TR www.rushdenmedicalcentre.

Date of inspection visit: 6 June 2019 Date of publication: 03/07/2019

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 well-led?	Inadequate	

Overall summary

Lakeside Healthcare at Rushden was inspected previously on

29 November 2018 under the comprehensive inspection programme as part of our inspection of the provider (Lakeside Healthcare Partnership).

The practice was rated as Requires Improvement overall. They were rated as requires Improvement for providing a safe and well-led service. Effective, Caring and Responsive were rated as Good. All the population groups were rated as Good with the exception of people with long term conditions which was rated as requires improvement.

A breach of legal requirements was found in relation to governance arrangements within the practice. A warning notice was issued which required the practice to be compliant by 31 January 2019.

We carried out an announced focussed inspection at Lakeside Healthcare at Rushden on 6 June 2019.

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 have rated this practice as Inadequate overall. We have rated the practice as inadequate for providing safe and well-led services. The population group people with long term conditions remains rated at requires improvement

We found that:

- At this inspection we still had concerns about the clinical oversight and governance arrangements in place.
- The leadership, governance and culture of the practice did not always promote the delivery of high quality person-centred care.
- Patients' health was not always monitored in a timely manner to ensure medicines were being used safely and followed up on appropriately.

- The practice had made some improvements to their governance arrangements and had taken some of the appropriate steps required to ensure patients remained safe.
- Patients were supported, treated with dignity and respect and were involved as partners in their care.

We rated the practice as **inadequate** for providing a well led services because:

- The overall governance arrangements were ineffective.
- The practice did not have always have clear and effective processes for managing risks, issues and performance.

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

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the provider **should**:

- Continue to review the staff training requirements for health care assistants.
- Review their QOF reporting process to ensure that exceptions are appropriate.

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. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

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

People with long-term conditions

Our inspection team

Our inspection team was led by a CQC inspector and included a GP specialist advisor.

Background to Lakeside Healthcare at Rushden

Lakeside Healthcare at Rushden, formally known as Rushden Medical Centre is located at Adnitts Road, Rushden, NN10 9TR and consists of a single site with car parking facilities and level access. The surgery is one of nine locations of Lakeside Healthcare Partnership, a partnership of GPs and others which provides primary medical services to approximately 165,000 patients across Northamptonshire, Lincolnshire and Cambridgeshire.

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

Lakeside Healthcare at Rushden is situated within the NHS Nene Clinical Commissioning Group (CCG) and provides services for approximately 11,000 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. It is not a dispensing practice. There is a community pharmacy located in the same building as the practice.

The practice has five partner GPs, a nurse practitioner, three practice nurses, one paramedic and one health care assistant. They are supported by a team of receptionists, administration staff and management. Patient demographics reflect the national picture and life expectancy is very similar to national averages. Information published by Public Health England rates the level of deprivation within the practice population group as seven, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are also available on two Saturday mornings per month.

The practice offers extended access for evening and weekend appointments via the East Northants Hub. Appointments are booked via the practice . The extended hours access appointments are provided by GPs, Practice Nurses, Paediatric Nurses and other clinicians both inside and outside of core General Practice opening hours in East Northants.

Opening times are:

- 18.30 20.00 Monday to Friday
- 08.00 12.00 Saturdays
- 08.00 12.00 Bank Holidays

All appointments will be located at Harborough Field Surgery, 160 Newton Road, Rushden. NN10 0GP

Out-of-hours GP services are accessed by calling the NHS 111 service.

Enforcement actions

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Pregulated activity Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	RegulationRegulation 17 HSCA (RA) Regulations 2014 Good governanceThe provider had failed to ensure that systems and processes were established and operated effectively.In particular:-The process in place for medicines reviews was not effective.There was not a clear system in place for the management of all medicines with appropriate monitoring and clinical review prior to prescribing.The systems for ensuring that Medicines & Healthcare products Regulatory Agency (MHRA) and patient safety alerts were not effective. This included a system for reviewing old searchesfor ongoing reviews of patient's subject to patient safety alerts.The process for recording, investigating and sharing lessons learnt for complaints was not effective.Meeting minutes in regard to patient safety alerts, significant events and complaints did not detail discussions that took place, actions and learning.There was not system in place when concerns were raised in regard to locum agency staff.Regulation 17, (1), of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Regulated activity

Regulation

Enforcement actions

Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury Regulation 12 CQC (Registration) Regulations 2009 Statement of purpose

The provider failed to ensure that care and treatment was provided in a safe way to patients.

The registered person did not do all that was reasonably practicable to assess, monitor, manage and mitigate risks to the health and safety of patients who use services.

There was not an effective system in place to ensure the health of all patients was monitored in a timely manner to ensure medicines being used were safe and followed up on appropriately.

There was not system in place when concerns were raised in regard to locum agency staff.

This was in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014