

St Peter's Medical Centre

Inspection report

30-36 Oxford Street
Brighton
East Sussex
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Date of inspection visit: 15 Oct 2019
Date of publication: 18/12/2019

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

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at St Peter's Medical Centre on 15 October 2019 as part of our inspection programme. In December 2018 the practice merged with another GP practice in Brighton, North Laine Medical Centre, which has now closed. Prior to its closure that practice was placed in special measures and due to the associated risk, we carried out this inspection of St Peter's Medical Centre.

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 this practice is rated as good (previous rating in February 2016 - good).

We rated the practice as **requires improvement** for providing safe services because:

- Staff files did not always contain evidence that appropriate recruitment checks had been completed.
- The practice did not demonstrate that staff records were held for all recommended vaccinations.
- The practice could not demonstrate there was an effective system for the production of Patient Specific Directions.

At this inspection our key findings were:

- We observed staff interacting positively with patients, who were treated with kindness and respect.
- Feedback from patients who used the service was consistently positive. Patients found the appointment system easy to use and reported that they were able to access care when they needed it.
- Staff worked well together as a team. There was a culture of working together for a common aim.
- Patients received effective care and treatment that met their needs.
- Staff were developed and supported to ensure services were of high quality.

- The way the practice was led and managed promoted the delivery of high-quality, person-centre care. Staff told us the merger had been sensitively handled and well managed. They looked forward to the future redevelopment of the practice building.
- The practice had a culture of quality improvement. They were engaged in local initiatives and worked alongside partners in the local healthcare system effectively.

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

- Ensure that care and treatment is provided in a safe way.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.

(Please see the specific details on action required at the end of this report).

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

- Review and update the chaperone and recruitment policies regarding DBS check requirements.
- Review and strengthen the training provided to staff on sepsis and serious infection.
- Strengthen the systems to monitor and track blank prescriptions through the practice.
- Continue to explore options to ensure leaders receive regular appraisal.
- Continue to monitor and take action to improve performance for areas that are not in line with targets, including the GP patient survey results, patients prescribed hypnotics and the uptake of childhood immunization and cervical screening.

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

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, a practice manager specialist advisor and a second CQC inspector.

Background to St Peter's Medical Centre

St Peter's Medical Centre is located at 30-36 Oxford Street, Brighton, East Sussex BN1 4LA. The practice has good transport links and there is a pharmacy nearby.

St Peter's Medical Centre is registered with the CQC to provide the regulated activities; Treatment of disease, disorder or injury; Surgical procedures; Diagnostic and screening procedures; Maternity and midwifery services and Family planning.

The practice is situated in the NHS Brighton and Hove Clinical Commissioning Group (CCG) and provides services to 14,796 patients under the terms of a general medical services (GMS) contract.

The practice runs a number of services for its patients including; sexual health advice and family planning, chronic disease management, smoking cessation, health checks and travel vaccines and advice.

There are four partners (two GPs, a nurse and the business manager) and 10 salaried GPs. There are two advanced nurse practitioners, one nurse practitioner, four practice nurses, and two health care assistants. GPs and nurses are supported by the business manager, the practice manager, patient care advisor managers and a team of reception/administration staff.

Data available to the Care Quality Commission (CQC) shows the number of patients from birth to 18 years old

served by the practice is comparable to the national average. The number of patients aged 85 years and over is below the national average. The number of patients in paid work or full-time education was above the national average. The National General Practice Profile states that 88% of the practice population is from a white background with a further 12% of the population originating from black, Asian, mixed or other non-white ethnic groups. Information published by Public Health England rates the level of deprivation within the practice population group as three, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is slightly below the national average of 79 years. Female life expectancy is comparable to the national average of 83 years.

St Peter's Medical Centre is open from Monday to Friday between 8am and 6:30pm. The practice offers extended opening on Tuesday evenings until 8pm and on Saturdays from 8:30am to 11:30am.

Appointments can be booked over the telephone, online or in person at the surgery. Patients are provided information on how to access an out of hours service by calling the surgery or viewing the practice website.

When the practice is closed patients are asked to call NHS 111, which is a free 24-hour helpline to help patients access the appropriate out of hours care. The out of

hours service offers appointments from 6am to 8am on weekday mornings and throughout the day and evening

during weekends. Alternatively, patients can see a doctor or nurse 7 days a week at the walk-in clinic at the Brighton Station Health Centre. The Centre is open from 8am to 8pm every day of the year.

This section is primarily information for the provider

Requirement notices

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 requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• The provider was unable to demonstrate effective systems or processes to assess the risk of, and prevent, detect and control the spread of, infections, including those that are health care associated. This included processes to maintain staff vaccination.• The provider could not demonstrate there was an effective system for the production of Patient Specific Directions. <p>This was in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p>The registered person's recruitment procedures did not ensure that only persons of good character were employed. In particular:</p> <ul style="list-style-type: none">• Staff files did not always contain evidence that appropriate recruitment checks had been completed. Including evidence obtained prior to employment of satisfactory conduct in previous employment (usually found in the form of references), and proof of identity including a recent photograph. <p>This was in breach of regulation 19(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>