

# Swineshead Medical Group

#### **Inspection report**

Fairfax House
Packhorse Lane, Swineshead
Boston
Lincolnshire
PE20 3JE
Tel: 01205 820204
www.swinesheadmedicalgroup.co.uk

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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	Requires improvement	
Are services safe?	Inadequate	
Are services effective?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Requires improvement	

# Overall summary

We carried out an announced comprehensive inspection at Swineshead Medical Group on 12 February 2019. This was as part of our inspection program.

Our judgement of the quality of care at this service is based 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.

**This practice is rated as requires improvement overall.** (At our previous inspection on 28 July 2015 we rated the practice as good)

We rated all the population groups as requires improvement as the areas of concern affected all of the population groups.

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

- There was no assurance that the prescribing of medicines to some patients kept them safe.
- The process intended to safeguard children was not effective.
- The system for learning from serious adverse events was not effective.
- There were no records kept of dispensing errors and near-misses.
- The practice was not assured of the competence of their dispensary staff as no annual competency checks had been carried out'
- Dispensary standard operation procedures had not been signed by dispensers.
- Blank prescription stationary was not monitored effectively or stored securely.
- There was a back-log of 191 sets of new patient notes that had not been summarised.

- Equipment that may be needed in a medical emergency was not checked frequently enough to assure its efficacy.
- The temperature of some fridges used to store medicines were not recorded at least daily.

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

- Not all staff had not completed the practices mandatory training.
- There had been no audit of surgical procedures carried out at the practice

We rated the practice as **good** for providing caring services.

We rated the practice as **good** for providing a responsive service.

We rated the practice as **requires improvement** for providing well-led services because:

- There were not effective systems to support good governance and management.
- The practice did not always have clear and effective processes for managing risks.

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.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

**Chief Inspector of Primary Medical Services and Integrated Care** 

## Population group ratings

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

## Our inspection team

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

## Background to Swineshead Medical Group

Swineshead Medical Group provides primary medical services to approximately 8,400 patients in a rural area of Lincolnshire. The catchment area is 13 miles by 27 miles and covers some isolated rural communities. Public transport links in the area are generally poor.

The service is an accredited training practice for GP registrars (fully qualified doctors who wish to become general practitioners) and Foundation year two doctors.

Care and treatment is provided by three GP partners, two salaried GPs, one GP registrar, a Foundation year two doctor, an advanced nurse practitioner, three practice nurses, a care co-ordinator and three healthcare support workers. They are supported by a team of dispensers, receptionists and administrative staff.

The practices' services are commissioned by NHS Lincolnshire East Clinical Commissioning Group (CCG) under a General Medical Services contract.

The practice has a higher percentage of patients aged 65 and over than both the CCG and national average. Life expectancy for both males and females is similar CCG and national averages. 98.7% of patients are described as white.

The practice is housed in a purpose-built surgery. The building provides good access on ground floor level to all clinical areas with automatic doors at the entrance, hand rails, accessible toilets and ample car parking facilities.

The practice was able to offer dispensing services to those patients on the practice list who lived more than one mile (1.6km) from their nearest pharmacy. This equated to 33% of their practice population.

The practice is open from Monday to Friday 8am to 6.30pm. Extended hours appointments are available at the extended hours hub situated at The Sidings Medical Practice, Boston. These pre-bookable appointments are available form 6.30pm to 8pm Monday to Friday and 8am to 7pm Saturday and Sunday.

Swineshead Medical Group has opted out of providing out-of-hours services (OOH) to their own patients. This service is provided by Lincolnshire Community Health Services NHS Trust which is accessed by NHS 111

## **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

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

## Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

- Dispensary standard operating procedures had not been reviewed and updated since March 2017 and that none had been signed by dispensers.
- Although dispensary staff had been signed off as competent this was done every two years and not at least annually.
- There was no records of dispensary near misses and errors.
- There was no effective system to ensure the safe storage and accountability of blank prescription pads.
- The defibrillator battery was checked monthly. There
  was no risk assessment in place to account for the
  length of time between checks. No spare battery was
  held which posed a risk of the equipment not working if
  required
- There had been no audits of minor surgery completed.
- We could not be assured that staff involved in minor surgery had the necessary training to keep people safe.
- Written consent from patients for surgical procedures was not obtained.
- Tissue samples removed during surgical procedures were sent for histology, however there was no system to ensure that results were received for all those that had been sent.
- Some patients in receipt of methotrexate who required regular blood testing were being prescribed the medicine without there being a record of a recent blood test.
- Not all staff had completed mandatory training intended to keep people safe
- Refrigerators in clinical rooms and used to store medicines did not have their temperatures monitored recorded daily.

This section is primarily information for the provider

## **Enforcement actions**

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

## Regulated activity

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

## Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

- There was no effective system to ensure that staff completed training appropriate to their role
- There was no effective system to ensure that the temperatures of refrigerators used to store some medicines were monitored and recorded daily.
- The system for checking equipment for use in a medical emergency was ineffective.
- The governance of the dispensary was not effective.
- The system for ensuring the security of blank prescription stationary was ineffective.
- There was no effective system to assess the safety or quality of the minor surgery service offered.

This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.