

Chadderton Medical Practice

Inspection report

Chadderton Town Health Centre
Middleton Road, Chadderton
Oldham
OL9 0LH
Tel: 01613572290
www.chaddertonmedicalpractice.nhs.uk

Date of inspection visit: 10/11/2020
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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?

Good 

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 comprehensive inspection at Chadderton Medical Practice on 10 November 2020. The practice is now rated Good overall.

The methodology used for this most recent inspection was adapted to minimise the risks of exposure to the coronavirus for patients, staff and the CQC inspectors. We undertook some of the inspection processes remotely and spent less time on site. We conducted staff interviews remotely during the week of 2 November 2020 and undertook a shorter site visit on 10 November 2020.

Previously we carried out an announced comprehensive inspection at Chadderton Medical Practice on 21 March 2020. The overall rating for the practice was inadequate. It was placed into special measures and warning notices were issued for breaches in Regulations 12 (safe care and treatment), 17 (good governance) and 18 (staffing). The full comprehensive report for the inspection in March 2020 can be found by selecting the 'all reports' link for Chadderton Medical Practice on our website at www.cqc.org.uk.

As a result of the restrictions imposed by the Covid-19 pandemic, site visit inspections scheduled to check compliance with warning notices were suspended. In the interim we sought and received assurance from the practice that the required improvements were being made. On 11 June 2020 the practice submitted evidence to show that sufficient changes had been implemented to comply with the breaches outlined in the warning notices.

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, and other organisations.

We rated the practice good overall. The key questions are rated as follows:

Safe Good

Effective Good

Caring Good

Responsive Good

Well Led Good

We rated the practice good for providing safe services because:

- The process for managing significant events was now effective and learning from significant events could be demonstrated.
- Staff were appropriately trained in safeguarding and people who used the service were protected from avoidable harm and abuse.
- Medicine and safety alerts were appropriately managed and there was oversight to ensure these had been actioned. Records we reviewed confirmed action had been taken in response to recent alerts.
- Medicines that required additional monitoring were appropriately managed and we saw patients had received blood tests within the recommended time frames. Staff at the practice, including the clinical pharmacist undertook regular searches of the clinical systems and ensured relevant patients were identified and invited for appointments.
- There was oversight of pathology results and clinical practice throughout.

Overall summary

- The practice had implemented clinical oversight for clinical and locum staff. Any identified needs were discussed and fed into the appraisal and review process.
- All infection control requirements had been put in place and patients were sufficiently protected from any risks pertaining to the Covid-19 pandemic. However, the role of infection control lead required further clarity.

We rated the practice as good for providing effective services because:

- Since the last inspection all staff had received appropriate training and appraisal to ensure they were able to meet the needs of patients. Staff were supported through supervision meetings to access training and increase their skills where they wished to.
- The practice submitted evidence of a clinical audit improvement plan and two-cycle audits had been completed. The practice had a system of audits that were shared with staff and used to drive practice improvements. However, external peer review and sharing with other surgeries was not in place at present.
- Patients with long-term conditions were reviewed appropriately. Records we looked at showed that patients were treated in line with national guidance.
- Patients with a diagnosis of diabetes, or a possible diagnosis of diabetes, were reviewed following abnormal blood results.
- Staff referred patients to secondary care and local resources as appropriate.
- There was evidence of appropriate shared care management.

The practice was previously rated good for providing caring services and there was no change to this rating because:

- GP survey results had improved since the previous inspection.
- Staff we spoke with showed a strong commitment to patient care.
- Evidence of patient support and social prescribing was demonstrated.
- The practice had identified and supported carers.

The practice was previously rated good for providing responsive services and there was no change to this rating because:

- Appropriate changes had been put in place to support patients throughout the Covid-19 pandemic.
- Patients were able to access the practice remotely and face to face.

Complaints were managed in a timely way and were discussed and learned from. The practice had introduced better ways to increase and monitor patient feedback with a view to identifying and acting on any trends. This would be demonstrated, if effective, in the future.

We rated the practice as Good for providing well-led services because we saw many areas of good governance newly implemented since the inspection in February 2020.

- The practice had sought support from the Royal College of General Practitioners (RCGP), the Primary Care Network (PCN) and the Clinical Commissioning Group (CCG) following the inadequate report in February 2020. Each area of concern had been reviewed and addressed and the conditions of the warning notices had been met.
- The practice demonstrated that improvements in June 2020 had been maintained.
- Patient feedback was positive.
- The governance and culture of the practice promoted high quality person-centred care.
- Leaders were approachable and supportive, and staff felt better informed about practice issues.

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

Overall summary

- There was no dedicated infection control lead who was appropriately trained and responsible for all infection control processes at the practice. Those responsibilities should include identification of risk, regular infection control audit, staff training and implementation and response to all concerns.
- The clinical audit programme did not include peer and network discussion and learning.
- The process to obtain and monitor patient satisfaction did not include verbal feedback.
- The system to record and monitor diabetes patients was not failsafe.
- Although medicine reviews were occurring, they were not always consistently detailed.

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

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

Dr Rosie Benneyworth BS BM 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 inspector and included a national specialist advisor, a GP specialist advisor and an assistant CQC inspector.

Background to Chadderton Medical Practice

Chadderton Medical Practice is the registered provider and provides primary care services to its registered list of approximately 5310 patients. The practice delivers commissioned services under the General Medical Services (GMS) contract and is a member of NHS Oldham Clinical Commissioning Group (CCG). The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedure, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder and injury.

Regulated activities are delivered to the patient population from the following address:

Chadderton Town Health Centre

Middleton Road

Chadderton

Oldham

OL9 0LH

The practice has a website that contains information about what they do to support their patient population and the in-house and online services offered at www.chaddertonmedicalpractice.nhs.uk

There are three GP partners (two male and one female) and two long-term locum GPs (one male and one female). There are two practice nurses, a healthcare assistant and a clinical pharmacist. There is a practice manager and several administrative and support staff.

The opening hours are dependent on Covid-19 restrictions, but the practice is open Monday to Friday from 8am to 6.30pm for online consultations and face to face appointments when risk assessed and where required. On Wednesdays and Thursdays the practice is available from 7am. Information about how to access support and patient care during Covid-19 restrictions is available via the practice website and a recorded message on the telephone.

In addition to the extended hours operated by the practice, there is an extended hours service which operates between 6.30pm and 9pm on week-nights and from 9am until 2pm at weekends and bank holidays at three hub locations across Oldham. There is also a local out of hours service provided through NHS 111. These services are also Covid-19 restricted and information can be obtained on the practice website and via telephone.

The patient age profile for the practice is in line with the CCG averages. Life expectancy for males is 77 years, which is above the CCG average of 76 years and below the national average of 79 years. Life expectancy for females is 80 years, which is the same as the CCG average and

below the national average of 83 years. Information published by Public Health England, rates the level of deprivation within the practice population group as three, on a scale of one to 10. Level one represents the highest levels of deprivation and level ten the lowest. The National General Practice Profile states that 68% of the practice population is from a white background and 28% from an Asian background.