

Rocky Lane Medical Centre

Inspection report

80 Rocky Lane
Liverpool
L16 1JD
Tel: 01512953965

Date of inspection visit: 13 July 2023
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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 focused inspection at Rocky Lane Medical Centre on 12 July 2023. Overall, the practice is rated as good.

Safe - good

Effective - Not inspected, rating of good carried forward from previous inspection

Caring - Not inspected, rating of good carried forward from previous inspection

Responsive - Not inspected, rating of good carried forward from previous inspection

Well-led - Not inspected, rating of good carried forward from previous inspection

Following our previous inspection on 18 May 2021, the practice was rated good overall and for all key questions apart from safe, which was rated requires improvement.

The full reports for previous inspections can be found by selecting the 'all reports' link for Rocky Lane Medical Centre on our website at www.cqc.org.uk

We carried out this inspection to follow up on:

- A breach of regulation from a previous inspection on 21 May 2021.
- The areas identified where the provider should make improvements from the inspection on 21 May 2021.

How we carried out the inspection/review

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.

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.

We have rated this practice as Good overall.

Overall summary

We found that:

- Action had been taken to address the breach of regulation. The required information to demonstrate high risk medicines were safely monitored was in place.

The provider had also made improvements to the service as recommended in the 'shoulds' from the last inspection report.

We found that:

- Systems were in place to ensure patient records were updated when patient safety alerts were acted upon.
- Immediately after the last inspection, the practice held meetings with other health professionals such as health visitors. Since this time the meetings have lapsed and been replaced with informal arrangements to discuss patients as needed. Since the last inspection community midwives now attend the practice to see patients.
- Discussion with patients about do not attempt cardiopulmonary resuscitation (DNACPR), were recorded in the patients records and care plans and the provider told us that patients, families and carers had been involved in conversations about their care, including DNACPR decisions. Despite this a DNACPR order form was not held in the patients record we reviewed.
- Monitoring systems to ensure patient records were coded correctly were in place.
- The provider identified reauthorisation and regime dates for medication reviews of patients on long term medicines.
- The provider had a written agreement in place for GP locums working at the practice.
- The provider had improved communications with patients by re-establishing a Participation Group.

Whilst we found no breaches of regulations, the provider **should**:

- Take further action to establish formal meetings to discuss vulnerable patients with other health professionals.
- Take action to ensure a DNACPR order form is kept in the patients clinical record.
- Continue to document in the patient record evidence of effective medicines reviews

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead 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 Rocky Lane Medical Centre

Rocky Lane Medical Centre is located in Liverpool at:

80 Rocky Lane

Liverpool

L16 1JD

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.

The practice is situated within the Liverpool Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 3142. This is part of a contract held with NHS England.

The practice is part of a primary care network (PCN) of GP practices called the Childwall and Wavertree Network.

The National General Practice Profile states that 93% of the practice population is from a white British background. Information published by Public Health England, rates the level of deprivation within the practice population group as four on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The age distribution of the practice population is similar to the local and national averages with the highest population group being young people: the practice has 23% compared to the local figure of 18% and a national average of 20%.

The practice has one General Practitioner (GP) partner, two sessional GPs, one specialist nurse practitioner, a practice nurse, a practice manager and a number of receptionist/ administration staff.

The practice is open between 8am to 6pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Out of hours services are provided by Primary Care 24 (Merseyside) Limited.