

Parkfield Medical Centre - JG Oates

Quality Report

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Website: www.parkfieldmcwirral.nhs.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

Are services effective?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at this practice on 8 January 2015.

A breach of legal requirements was found. The practice was required to make improvements in the domain of 'Effective'.

After the comprehensive inspection the practice wrote to us to say what they would do to meet the following legal requirements set out in the Health and Social Care Act (HSCA) 2008:

Regulation 23 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Supporting staff; which corresponds with:

Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Staffing.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met

legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Parkfield Medical Centre on our website at www.cqc.org.uk.

Our key findings were as follows:

- The practice had addressed the issues identified during the previous inspection.
- Staff had received the appropriate training required for their role. There was a training matrix in place to monitor when refresher training was due.
- Effective systems were in place to ensure those patients with long term conditions received the treatment they needed, which met their needs.
- The practice had improved the uptake of cytology screening since our previous inspection.

Professor Steve Field (CBE FRCP FFPH FRCGP)Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services effective?

The practice is rated as good for providing effective services.

- Staff had received the appropriate training required for their role. There was a training matrix in place to monitor when refresher training was due.
- Effective systems were in place to ensure those patients with long term conditions received the treatment they needed, which met their needs.
- The uptake rate for cytology screening had improved and is now in line with local and national averages.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

People with long term conditions

Two new practice nurses had been recruited, who were supported through training and mentoring to ensure all patients with long term conditions received care and treatment that met their individual needs. The work of the nurses is overseen by the GP partners. The nurses attend meetings with other nurses in the locality and have the support of community matrons, who provide assistance in the care and management of patients who may be housebound.

Good



Working age people (including those recently retired and students)

The practice had improved the uptake of cytology screening since our previous inspection. The uptake rate had previously been 68% which was lower than CCG and national averages. This has now risen to 73.1%, which is comparable with the CCG rate of 73.6% and the national rate of 73.5%. The practice has systems in place to ensure that reminders have been sent to patients to attend these appointments. Those that do not wish to attend for testing are sent an opt out letter for them to sign, which asks patients to contact the surgery if they wish to discuss matters further.

Good





Parkfield Medical Centre - JG Oates

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Inspector carried out this inspection.

Background to Parkfield Medical Centre - JG Oates

Dr Hawthornthwaite was the lead partner at the practice and has recently retired. The lead partner is Dr Oates now leads the practice and this is reflected in the name change of the practice.

Parkfield Medical Centre is based in New Ferry, Wirral, Merseyside. The practice currently serves approximately 6,000 patients. All services are delivered under a Primary Medical Services (PMS) contract. The partnership is made up of three GPs, two male and one female. There are also three salaried GPs and two nurses. The practice employs two practice managers, an office manager and a range of administrative support staff. The practice falls within an area rated as being the fourth highest on the social deprivation measurement scale used by NHS England. Life expectancy of male patients registered with the practice is 74.9 years of age and 79.97 years of age for females. The practice has recently become a training practice and had one GP registrar placed with them at the time of our inspection.

The practice is located in a purpose built building, which it shares with a minor injuries unit. The practice partners, salaried GPs and nurses deliver services from a suite of 11 consulting rooms, three of which are dedicated to nursing

services at the practice. All rooms are equipped to, and meet the specification required for delivery of surgical procedures. The practice patients benefit from extended hours of opening above that of normal GP practices, due to the opening times of the minor injuries clinic which shares the building. As a result of this, GP and nurse appointments were available to patients between the hours of 8.00am and 8.00pm between Monday and Thursday of each week. The value patients placed on this was reflected in the Wirral Patient Access Survey, which showed 93% of those patients asked, said they were able to get an appointment with a GP at Parkfield Medical Centre.

The practice does not deliver out of hours services. Patients requiring GP services when the practice is closed, are diverted by phone to NHS 111 who then pass calls to the Wirral GP Out of Hours Service.

Why we carried out this inspection

This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection in January 2015. We inspected the practice against one of the five questions we ask about services: is the service effective? This is because the service was not meeting some legal requirements at the previous inspection.

Detailed findings

How we carried out this inspection

We carried out an announced visit on 23 March 2016. We spoke with, and interviewed, the practice manager and looked at records the practice maintained in relation to staff training.



Are services effective?

(for example, treatment is effective)

Our findings

Effective staffing

When we inspected the practice in January 2015 we identified some concerns in relation staff training. The practice did not have an effective system to record staff training and some basic training had not been completed.

 At this inspection we found the practice had addressed all of the concerns. Staff had received the appropriate training required for their role. There was a training matrix in place to monitor when refresher training was due.

The practice manager showed us a comprehensive staff training matrix which had been put in place. It held individual records showing which members of staff had attended specific training courses. The management of the practice could easily see when refresher training was due. We saw that systems in place were sufficient to ensure that staff were able to access training training required to deliver their duties effectively.

Two new practice nurses had been recruited, who were supported through training and mentoring to ensure all patients with long term conditions received care and treatment that met their individual needs. The work of the nurses is overseen by the GP partners. The nurses attend meetings with other nurses in the locality and have the support of community matrons, who provide assistance in the care and management of patients who may be housebound. Clinical audit is in place at the practice to ensure that treatment provided to patients with long term conditions remains effective and meets their needs.

The practice had improved the uptake of cytology screening since our previous inspection. The uptake rate had previously been 68% which was lower than CCG and national averages. This has now risen to 73.1%, which is comparable with the CCG rate of 73.6% and the national rate of 73.5%. The practice has systems in place to ensure that reminders have been sent to patients to attend these appointments. Those that do not wish to attend for testing are sent an opt out letter for them to sign, which asks patients to contact the surgery if they wish to discuss matters further.