

# Spring Lane Surgery

## Quality Report

15/17 Spring Lane  
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Manchester  
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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 service

Good



Are services safe?

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 Spring Lane Surgery on 7 October 2016. The overall rating for the practice was good. The full comprehensive report on the 7 October 2016 inspection can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focussed inspection carried out on 23 May 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 7 October 2016.

At this inspection we found that sufficient improvement had been achieved to update the rating for provision of safe services to good. The practice had addressed the breaches of regulation and was now compliant with all regulations. This report covers our findings in relation to those improvements.

Overall the practice is now rated as good.

Our key findings were as follows:

- A DBS check had been completed for clinical staff.
- Indemnity insurance was in place for clinical staff.

**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 safe?**

At our previous inspection on 7 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- Staff recruitment checks prior to employment
- Clinical staff indemnity insurance

We issued a requirement notice in respect of these issues and found arrangements had improved when we undertook a focussed follow up inspection on 20 June 2017. The practice is now rated as good for providing safe services.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

### **Overview of safety systems and process**

At the previous inspection we found that a member of the clinical staff had been recruited without a Disclosure and Barring Check (DBS). (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). The member of staff was also working without indemnity insurance.

We found that all the necessary employment checks had now been carried out and the correct indemnity insurance was in place.

**Good**



# Summary of findings

## The six population groups and what we found

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

### Older people

The provider had resolved the concerns for safe identified at our inspection on 7 October 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### People with long term conditions

The provider had resolved the concerns for safe identified at our inspection on 7 October 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### Families, children and young people

The provider had resolved the concerns for safe identified at our inspection on 7 October 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### Working age people (including those recently retired and students)

The provider had resolved the concerns for safe identified at our inspection on 7 October 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### People whose circumstances may make them vulnerable

The provider had resolved the concerns for safe identified at our inspection on 7 October 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



# Summary of findings

The specific findings on these groups can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## **People experiencing poor mental health (including people with dementia)**

The provider had resolved the concerns for safe identified at our inspection on 7 October 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

**Good**



# Spring Lane Surgery

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

A CQC Inspector reviewed and analysed the evidence provided at the time of the inspection.

## Background to Spring Lane Surgery

Spring Lane Surgery is situated near Radcliffe town centre. At the time of this inspection we were informed 6,350 patients were registered with the practice.

The practice population experiences higher levels of deprivation than the practice average across England. There are a lower proportion of patients above 65 years of age (12.2%) than the practice average across England (16.7%). The practice has a higher proportion of patients under 18 years of age (15.6%) than the practice average across England (14.8%). 57.2 percent of the practice's patients have a longstanding medical condition compared to the practice average across England of 54%.

At the time of our inspection two GP partners and two salaried GPs were providing general medical services to patients registered at the practice. The GPs are supported in providing clinical services by an advanced nurse practitioner, a practice nurse and a health care support worker. Clinical staff are supported by the practice manager and a team of administration staff.

The practice contracts with NHS England to provide General Medical Services (GMS) to the patients registered with the practice.

The practice has opted out of providing out-of-hours services to their patients. This service is provided by a

registered out of hours provider (BARDOC). The practice website provides patients with details of how to access medical advice when the practice is closed. Patients are also provided with these details via a recorded message when they telephone the practice outside the usual opening times.

## Why we carried out this inspection

We undertook a comprehensive inspection of Spring Lane Surgery 7 October 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on 7 October 2016 can be found by selecting the 'all reports' link for Spring Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a focussed inspection of Spring Lane Surgery on 20 June 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

## How we carried out this inspection

Following the inspection on 7 October 2016 the practice supplied an action plan with appropriate timescales telling us how they would ensure they made the relevant improvements. In line with their agreed timescale the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the safe domain.

## Detailed findings

We carried out a focussed follow up inspection of Spring Lane Surgery on 20 June 2017. This involved looking at information the practice used to deliver care and speaking with the practice manager.

# Are services safe?

## Our findings

At our previous inspection on 7 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- Staff recruitment checks prior to employment
- Clinical staff indemnity insurance

We issued a requirement notice in respect of these issues and found arrangements had improved when we undertook a focussed follow up inspection on 20 June 2017. The practice is now rated as good for providing safe services.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

### Overview of safety systems and process

At the previous inspection we found that a member of the clinical staff had been recruited without a Disclosure and Barring Check (DBS). (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). The member of staff was also working without indemnity insurance.

We checked the personnel file of this member of staff. There was evidence to demonstrate that a DBS check had been carried out for this member of staff and indemnity insurance was now in place.