

# Lever Chambers 2

## Inspection report

Lever Chambers Centre for Health,  
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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?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



# Overall summary

We inspected Lever Chambers 2 on 7 November 2016 as part of our inspection programme. The practice was given an overall rating of Good with the following key question ratings:

Safe – Good

Effective – Good

Caring – Good

Responsive – Good

Well-led – Good

We undertook an annual regulatory review of the practice on 2 July 2019 and a comprehensive inspection was agreed.

We undertook a comprehensive inspection of Lever Chambers 2 on 10 October 2019 to review the key questions Safe, Effective, Caring, Responsive and Well Led.

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 requires improvement overall.**

We have rated this practice as **requires improvement** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe.
- The practice did not have appropriate systems in place for the safe management of medicines.
- The practice did not always learn and make improvements when things went wrong, they did not involve the relevant person or offer an apology.
- There was inconsistency in clinical documentation, specifically around the recording of medicine reviews.
- There were gaps in the recruitment checks for newly appointed staff.

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

- Some performance data was significantly below local and national averages

We have rated this practice as **requires improvement** for providing a well led service because:

- Leaders could not demonstrate that they had the capacity and skills to deliver high quality sustainable care.
- The practice culture did not effectively support high quality sustainable care.
- The practice did not have clear and effective processes for managing risks, issues and performance
- The practice did not always act on appropriate and accurate information.
- There was little evidence of systems and processes for learning, continuous improvement and innovation.

We rated this practice **good** for providing caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- The practice had a number of new staff including the practice manager and practice nurse who had recently introduced new policies, procedures and risk assessments.

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.

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

- Ensure that all staff complete their mandatory training in a timely manner
- Ensure that there is a central record of all clinicians training

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

**Dr Rosie Benneyworth** BM BS 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	Requires improvement	
Working age people (including those recently retired and students)	Requires improvement	
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 lead inspector.  
The team included a GP specialist advisor and a practice manager specialist advisor.

## Background to Lever Chambers 2

Lever Chambers 2 is located at Lever Chambers Centre for Health, Ashburner Street, Bolton, BL1 1SQ and has a branch surgery at Great Lever Health Centre, Rupert Street, Great Lever, Bolton, BL3 6RN

The main surgery has good transport links and there is a pharmacy located nearby.

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. These are delivered from both sites.

Lever Chambers 2 is situated within the Bolton Clinical Commissioning Group (CCG) and provides services to 3843 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a male GP who has a non clinical partner. The practice has one male GP and one female GP who both have a contract with the provider for several sessions each week. There is a female nurse practitioner and a practice nurse. The clinical team are supported by a practice manager and several administration staff.

The practice has a similar age profile to that of the CCG and nationally. The National General Practice Profile states that 61.3% of the practice population is from a white background, 31.4% from an Asian background with a further 7.3% of the population originating from black, mixed or other non-white ethnic groups. Information published by Public Health England, rates the level of deprivation within the practice population group as one, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 75 years compared to the national average of 79 years. Female life expectancy is 79 years compared to the national average of 83 years.

This section is primarily information for the provider

## Requirement notices

### 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 requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>How the regulation was not being met...</b></p> <p>There was evidence that safe care and treatment was not being provided in a safe way for service users. In particular:</p> <ul style="list-style-type: none"><li>• Medicine reviews were not consistently recorded.</li><li>• Emergency medicines were stored in an open container on top of a fridge within reach of children</li><li>• Up to date medical records are not available to clinicians as 11% only were summarised</li></ul>
Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>How the regulation was not being met...</b></p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular:</p> <ul style="list-style-type: none"><li>• The provider did not always follow the policy for significant events and incident reporting to enable staff to learn from significant events and incidents effectively.</li><li>• The provider did not always learn and make improvements when things went wrong, they did not always involve the relevant person or offer an apology</li><li>• The provider did not always follow the systems and processes in place to gather the required documentation in relation to recruitment</li></ul>