

SPCT Practices

Inspection report

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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 Salford Primary Care Together (SPCT) on 15 August 2023. Overall, the practice is rated as Good.

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Following our previous inspection on 11 March 2022 the practice was rated requires improvement for the key questions safe, effective and well led. This amounted to an overall rating of requires improvement. They were found good for the key questions safe and responsive.

Since the previous inspection key members of the leadership team have left the organisation. In January 2023 the previous Chief Clinical Officer was appointed as the Chief Accountable Officer and is now the sole executive in SPCT. Upon appointment they reviewed the quality of care and identified immediate need for support. They worked with the Local Medical Council (LMC) and Integrated Care Board (ICB) and introduced a mutual aid recovery process with help from another practice in Salford. Mutual aid is an organisational model where voluntary, collaborative exchanges of resources and services for common benefit take place amongst community members to overcome social, economic, and political barriers to meeting common needs. A 360 degree review was undertaken and all areas for improvement were identified and worked on. There has been continuous audit and monitoring and continuous learning and improvement so much so that at this inspection we found several areas of outstanding practice.

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

Why we carried out this inspection.

We carried out this inspection to follow up breaches of regulation from a previous inspection. All five key questions were inspected. We reviewed all areas identified as requiring improvement at the last inspection.

How we carried out the inspection.

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.
- A shorter site visit.

Overall summary

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.

At this inspection we found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs and this was continually monitored.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients and ensure that they could access care and treatment in ways that suited them best.
- There was a wide range of services, clinical and non-clinical that recognised that a patient's emotional and social needs were as important as their physical needs.
- In the latest survey, over two-thirds of patients raised concerns regarding difficulties contacting the practice by telephone and regarding the appointment booking process. In response to patient feedback regarding poor access the practice has introduced a simpler way to make and obtain appointments with most appointments face to face unless otherwise requested.
- Information about the services available, how to access them and how to make a complaint was available and easy to understand in easy read format and different languages.
- A new hub based approach had been implemented to ensure consistency across all sites and achieve better care navigation for patients. The care navigation system ensured patients were placed with the most suitable health care professional.
- The way the practice was led and managed promoted the delivery of high quality, person centred care. They provided high quality care and treatment and inspired staff to use innovative ways to improve services for patients.
- Leaders and all the GPs worked closed together. There was no hierarchy and there was a collaboration of equal proportions. As a community interest company every staff member has a salary which meant they were incentivised to work because of the values they believed in and the teams they worked in and not because of profit. This drove care and treatment to be very much patient centred and provided a safe and supportive environment to work within.

We saw some areas of outstanding practice:

- The practice had implemented a same day urgent care service (SDUC) with one clinician based at each site offering additional face to face capacity for urgent access. This enabled other clinicians to concentrate on mainstream patients, maintain continuity of care and provide access to specific patients when requested.
- There was direct access for SAS patients via a designated telephone number. SAS patients are those who have been excluded from their mainstream GP list. The service provided by SPCT ensured that patients who had been removed from a GP practice could still access primary care medical services in a secure environment.
- The practice had recruited a GP with a special interest and qualifications in complaint management. There was a plan in place with recommendations to implement 'How do we learn'. These recommendations had been discussed and the practice liaised with NHS Standards and the Parliamentary and Health Service Ombudsman (PHSO) to enable best practice.
- The practice ran an inclusion service that particularly focused on vulnerable groups including sex workers, people on probation, asylum seekers, refugees and the Traveller community. Barriers to access were removed with appointments

Overall summary

at all four sites, including a drop in at a local charity with no need for identification documents. There was a mobile phone number for the inclusion service that allowed patients to text or WhatsApp when they had no credit but could hop on to free Wi-Fi at eateries in the area for example MacDonalDs. WhatsApp access also helped patients that struggled with literacy who could record voice notes and have voice notes sent back to them telling them about appointments.

The practice should:

- Record vaccination status for all clinical and non-clinical staff as per guidelines.
- Continue and embed improvement plan for uptake of child immunisations.
- Continue and embed improvement plan for uptake of cytology screening.
- Continue to improve patient satisfaction.

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 SPCT Practices

SPCT Practices are located at Eccles Gateway with two branch surgeries and an inclusion service. As part of this inspection, we visited the Little Hulton Health Centre and Eccles Gateway.

SPCT is situated at:

Little Hulton Health Centre

Longshaw Drive

Little Hulton

Lancs

Greater Manchester

M28 0BB

The practice has two branch surgeries at:

Eccles 1st Floor

Eccles Gateway

28 Barton Lane

Eccles

Manchester

M30 0TU

Willow Tree

94 Littleton Road

Salford

Manchester

M7 3SE

The inclusion service is situated at:

Salford Loaves and Fishes

1 Paddington Close

Salford

M6 5BU

As part of this inspection, we visited the Little Hulton Health Centre and the Eccles branch site. The provider is registered with the Care Quality Commission to deliver the regulated activities:

- Diagnostic and Screening Procedures
- Maternity and Midwifery Services
- Treatment of Disease, Disorder or Injury
- And Family Planning.

These regulated activities are delivered from all sites.

Patients can access services at any site.

The practice is situated within the Salford location of the Greater Manchester Integrated Care Board and delivers an Alternative Provider Medical Services (APMS) to a patient population of 20,530. This is part of a contract held with NHS England.

The practice is part of three wider networks of GP practices. They have voting rights in the Eccles and Irlam primary care network (PCN) and advisory roles in Broughton PCN and Walkden and Little Hulton PCN. A voting right is the right given to the practice to vote on decisions made by the PCN. An advisory role means the practice can take part in discussions but does not have a voting right in decisions made.

Information published by the Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the lowest decile (one of 10). The lower the decile, the more deprived the practice population is relative to others. According to the latest available data, the ethnic make-up of the practice area is, 89.5% White, 3.7% Asian, 3.5% Black, 2.1% Mixed, and 1.2% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

The organisational structure over all sites consists of a chief accountable officer who is part of a team of 10 GPs, 10 practice nurses, an advanced nurse practitioner and a dedicated pharmacist. They are supported by a practice manager, an assistant practice manager a senior administration team and a practice administration team. There is also a finance and contracts lead and an operations lead.

The practice has introduced a hub based approach which consists of a team of 6 staff dealing solely with prescriptions and recall, 5 staff dedicated to workflow, 7 staff responsible for care navigation, 3 medical secretaries and a registrations team of 3 staff. Each team covers all sites.

The practice is open between 8am and 6.30pm Monday to Friday. On a Tuesday morning and a Thursday morning Little Hulton site is open from 7.15am.

The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments. Most appointments are face to face. There is also a same day urgent care service (SDUC) available at all sites and an inclusion service which provides care and treatment for the hardest to reach vulnerable people in Salford.

Extended access is provided locally by the various primary care networks, where late evening and weekend appointments are available. Calls are diverted to NHS 111 between 6.30pm and 8am Monday-Friday, all day at weekends and on Bank Holidays.