

# Irlam Medical Practice 2

#### **Inspection report**

Irlam Medical Centre Macdonald Road, Irlam Manchester Greater Manchester M44 5LH Tel: 0161 775 2760 www.irlamgp.co.uk

Date of inspection visit: 14/12/2018 Date of publication: 15/02/2019

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?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Requires improvement	

# Overall summary

We carried out an announced comprehensive inspection at Irlam Medical Practice 2 on 14 December 2018 as part of our inspection programme. The practice was previously inspected on 2 November 2014 and was rated in outstanding in all key questions.

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 and good for all population groups.

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

- The practice did not always have clear systems and processes to keep patients safe. This included taking appropriate action on patient safety alerts and ensuring recruitment checks were documented when employing new staff members.
- The practice did not keep a signing out logbook of blank prescriptions being used.
- The practice did not have a fire risk assessment in place.

We rated the practice as **requires improvement** for providing well-led services because:

• The overall governance arrangements were lacking. For example, the system for monitoring staff training was ineffective and we found that some staff training had not been completed since 2014.

- The practice did not always have clear and effective processes for managing risks. For example, there was no policy in place for acting on patient safety alerts. We found some alerts that had been received by the practice, but had not been opened.
- The practice did not have a recruitment procedure in place.

We rated the practice as **good** for providing effective, caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients received effective care and treatment that met their needs.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

The areas where the provider **must** make improvements

- Ensure that care and treatment is provided in a safe
- 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:

• Formalise a policy for significant events.

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

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

#### Population group ratings

Older people	Good
People with long-term conditions	Good
Families, children and young people	Good
Working age people (including those recently retired and students)	Good
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 adviser.

#### Background to Irlam Medical Practice 2

Irlam Medical Practice 2 provides primary care services to 4114 patients. The practice delivers services under a General Medical Services (GMS) contract.

The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities. The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder and injury.

Regulated activities are delivered from the following address:

Irlam Medical CentreMacdonald RoadIrlamM44 5LH

The website of the practice is: www.irlamgp.co.uk

The practice has three GP partners (one male and two female) and one salaried GP who are supported by two practice nurses, a healthcare assistant, and a team of reception and administration staff.

The age profile of the practice population mostly consists of patients aged 15-45. Information taken from Public Health England placed the area in which the practice was in the fifth most deprived decile (from a possible range of between 1 and 10). In general, people living in more deprived areas tend to have greater need for health services.

Patients requiring a GP outside of normal working hours are advised to contact the surgery and they will be directed to the local out of hours service which is provided by NHS 111.

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  Surgical procedures  Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment  How the regulation was not being met. The provider did not ensure that care and treatment is provided in a safe way. In particular: The provider did not ensure that patient safety alerts were reviewed. The provider did not always document recruitment checks that had been carried out. The practice did not have a fire risk assessment in place. The provider did not keep a log of blank prescriptions.

### Regulated activity

Diagnostic and screening procedures

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

### Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

How the regulation was not being met. There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular we found: The system for monitoring staff training was ineffective. The practice was lacking policies such as managing patient safety alerts, recruitment, and significant events.