

Rutherford Medical Centre

Inspection report

1 Rutherford Road Liverpool L18 0HJ Tel: 01517221803 www.rutherfordmedicalcentre.co.uk

Date of inspection visit: 20, 25, 26 September 2023 Date of publication: 21/11/2023

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 to people's needs?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced focused inspection at Rutherford Medical Centre on 20, 25 and 26 September 2023. Overall, the practice is rated as **Requires Improvement.**

Safe – requires improvement

Effective - requires improvement

Caring – good

Responsive – good

Well-led – good

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

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities.

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 short site visit.

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.

We found that:

We rated the provider as **Requires Improvement** for providing safe services. This was because:

- The arrangements for managing medicines did not always keep patients safe.
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Overall summary

- Systems for managing historical safety alerts were not always effective.
- The system in place for recording and acting on historic safety alerts was not effective.

We rated the provider as **Requires Improvement** for providing effective services. This was because:

• Patients with long-term conditions were not always receiving appropriate monitoring and reviews.

We rated the provider as **Good** for providing caring services. This was because;

- Staff dealt with patients with kindness and respect.
- Patient feedback about their involvement in decisions about their care and being treated with care and concern was positive.

We rated the provider as **Good** for providing responsive services. This was because;

- Patients were able to make appointments in a way that met their needs.
- Feedback from patients was being used to drive improvement.

We rated the provider as **Good** for providing well-led services. This was because:

- There was compassionate, inclusive and effective leadership at all levels.
- The practice had a culture which drove high quality sustainable care.
- The practice involved the public, staff and external partners to sustain high quality and sustainable care.

We found one breach of regulations. The provider **must**:

• Ensure care and treatment is provided in a safe way to patients.

The provider **should**:

- Improve the uptake of cervical screening for eligible patients.
- Take action to ensure that all Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) assessments are reviewed annually.

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 and associate CQC 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 Rutherford Medical Centre

Rutherford Medical Centre is located in Liverpool at:

1 Rutherford Road

Liverpool

L18 0HJ

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the Liverpool Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 8251 patients. This is part of a contract held with NHS England. The practice is part of Childwall and Wavertree Primary Care Network, a wider network of GP practices.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the seventh lowest decile (7 out 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 3% Asian, 91% White, 1% Black, 2% Mixed, and 3% Other.

There is a team of five GPs who also provide cover at another of the partners registered locations and three salaried GPs. The practice has an advanced nurse practitioner, a team of four practices nurses and one health care assistant. The GPs are supported at the practice by a team of reception/administration staff. The practice manager is based at the main location to provide managerial oversight.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments. Out of hours services are provided by Primary Care 24 Ltd.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are 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 The searches and review of the clinical records found care to service users was not always being delivered in line with best practice guidance. The searches and review of a sample of the clinical records found that service users with a long-term condition had not always been identified and coded in the patient record system. Service users were overdue recall for monitoring checks, service users with asthma were not always being called for review, service users prescribed medicines that required monitoring were not always receiving this. The clinical searches identified workflow tasks that had not been safely followed up by clinical staff. The system in place for recording and acting on historic safety alerts was not effective.

This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.