

# Oak Gables Medical Practice

### **Inspection report**

The Oak Gables Partnership, Crompton Health Centre High Street, Shaw Oldham OL2 8ST Tel: 01706664250

www.theoakgablespartnership.co.uk

Date of inspection visit: 17 October 2022 Date of publication: 30/11/2022

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?	Requires Improvement	
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 inspection and site visit at Oak Gables Medical Centre on 16 October 2022. Overall, the practice is rated as Good.

Safe - Requires Improvement

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

The practice was rated Good at our previous inspection on 15 July 2016.

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

#### Why we carried out this inspection/review

This was a comprehensive inspection undertaken as part of our comprehensive inspection programme.

#### How we carried out the inspection/review

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

#### This included

- Conducting staff interviews using video conferencing
- · Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- Feedback from staff using questionnaires
- A 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
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## Overall summary

• information from the provider, patients, the public and other organisations.

### We have rated this practice as Good overall.

We rated the practice requires improvement in the Safe key question because:

• The practice cared for patients in a way that kept them safe and protected them from avoidable harm, this included safeguarding. However, we saw areas, as described in the safe key question, where improvements could be made to ensure risks were identified and managed properly. These included significant incident reporting, and medicines management. Immediately following the inspection we received some assurances in the way of newly written protocols for implementation.

#### We also found that:

- Patients received effective care and treatment that met their needs.
- We found that staff dealt with patients with kindness and respect and involved them in decisions about their care.
- We saw that the practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic and continued to do so. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.

We found a breach of Regulations 12 and the provider must:

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

The practice should also:

- Record safeguarding codes/alerts on the records of all family members of children with safeguarding concerns.
- Continue to monitor all chronic diseases and long term conditions to assure themselves that all patients receive the same service and none are missed.
- Implement and embed the training plan for all staff.
- Maintain consistent information in relation to each person employed.

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 Hospitals and Interim Chief Inspector of Primary Medical Services

### 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. A GP specialist adviser also spoke with the GP partners and completed clinical searches and records reviews remotely.

### Background to Oak Gables Medical Practice

Oak Gables Medical Practice is located Greater Manchester at:

The Oak Gables Partnership

Crompton Health Centre

High Street

Shaw

Oldham

OL28ST

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

The practice is situated within the Oldham Integrated Care Partnership Operating model and delivers General Medical Services (GMS) to a patient population of just under 10,000 patients. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices in the Oldham area involving three other practices and covering a population of just under 42,000 patients.

Information published by Public Health England shows that deprivation within the practice population group is in mid decile at number five. The higher the decile, the least deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 96% white British, and 4% other. There was also a higher than average number of patients over the age of 60 years.

There is a team of seven doctors providing cover at the practice. The GPs are supported by a nursing team made up of practice nurses, health practitioners and a phlebotomist. The practice is also involved in the education and training of junior doctors and medical students. All students work under the close guidance of the GP team.

The GPs are supported at the practice by a large team of reception/administration staff. There is also a practice manager and deputy manager with oversight of the day to day running of the practice and a large number of team leaders who support them.

The practice is open between 8am and 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by a newly formed Hub where late evening and weekend appointments are available. Out of hours services are provided by Go to Doc.

## 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 Family planning services Maternity and midwifery services Treatment of disease, disorder or injury Surgical procedures	<ul> <li>Regulation 12 CQC (Registration) Regulations 2009 Statement of purpose</li> <li>Medicines management was not failsafe as as some patients in receipt of some high risk medicines had not been monitored or reviewed in line with requirements.</li> <li>Diary entries that were kept for patients overdue Lithium monitoring checks were not effectively used.</li> <li>Patients with chronic diseases and long term conditions were not all receiving the same service and some were missing annual reviews, follow-up test and appropriate coding.</li> <li>Protocols for high risk medicines monitoring and a log of all safety alerts including any action taken as a result were not embedded.</li> <li>This was in breach of Regulation 12(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</li> </ul>