

Marine Lake Medical Practice

Inspection report

The Concourse
Grange Road, West Kirby
Wirral
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Date of inspection visit: 22 November 2022
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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 responsive to people's needs?

Good



Are services well-led?

Good



Overall summary

We carried out an announced focused inspection at Marine Lake Medical Practice on 21 and 22 November 2022. Overall, the practice is rated as requires improvement.

Safe – Requires improvement

Effective - Requires improvement

Caring - Not inspected, rating of good carried forward from previous inspection

Responsive - Partially inspected, rating of good carried forward from previous inspection

Well-led - Good

The full reports for previous inspections can be found by selecting the 'all reports' link for Marine Lake Medical Practice 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. We undertook this inspection as part of a random selection of services and due to emerging risk.

We inspected the key questions of:

Safe, Effective and Well Led. We also assessed access to GP services under the key question- Responsive.

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:

Overall summary

- The provider did not have effective systems in place for the monitoring of high-risk medicines or for documenting and acting on safety alerts.
- Patients with long term conditions did not always receive effective management of their care and treatment.
- There were sufficient staff who were suitably qualified and trained.
- Patients were treated with respect and were involved in decisions about their care.
- The practice understood its patient population and adjusted how it delivered services to meet the needs of its patients.
- Patients could access care and treatment in a timely way.
- The practice was led and managed effectively, leaders were accessible and supportive.
- There was an effective governance framework in place in order to gain feedback and to assess, monitor and improve the quality of the services provided.
- The provider was aware of the requirements of the Duty of Candour.

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

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

In addition, the provider **should**:

- Implement a system whereby non-medical prescribers prescribing is monitored, reviewed and assessed.
- Improve the uptake of eligible people for cervical cancer screening.
- Take steps to train all non-clinical staff to a minimum competency level 2 in safeguarding
- Implement a system whereby patient test results for those receiving dual care and carried out by secondary care, were obtained and documented on the practice's record.

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. 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. The team also included a second CQC inspector.

Background to Marine Lake Medical Practice

Marine Lake Medical Practice, known as Marine Lake Medical Practice and Estuary Medical Practice is located in Wirral at:

The Concourse

Grange Road,

West Kirby

CH48 4HZ

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

The practice is situated within the NHS Cheshire and Merseyside Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 19,500 patients. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called Healthier West Wirral.

Information published by Public Health England shows that deprivation within the practice population group is in decile 8 (8 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 97.1% White, 1.2% Asian, 1.2% Mixed, 0.1% Black, and 0.3% Other.

The age distribution of the practice population shows there are more older people than the local and national averages. With less younger and working age people than average.

There is a team of 12 GPs (6 male and 6 female). The practice also has advanced nurse practitioners, practice nurses and healthcare assistants. The practice is supported by advanced clinicians such as physician associates and clinical pharmacists from the primary care network. The clinical team are supported at the practice by a team of reception/administration staff and an operations manager, practice manager and office manager, who provide managerial oversight.

The practice is open between 8am to 6.30pm Monday to Friday with extended hours appointments available between Monday to Friday evening and Saturday via the PCN extended hours service. The practice offers a range of appointment types including book on the day, telephone consultations, eConsultations, face to face, home visits and advance appointments.

Out of hours services are provided by NHS111.

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 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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider did not demonstrate that care and treatment was provided in a safe and effective way for patients at all times</p> <ul style="list-style-type: none">• The proper and safe management of medicines was not operated effectively. In particular: <p>The processes for monitoring patient's health in relation to the use of medicines, including high risk medicines, with appropriate monitoring and review.</p> <ul style="list-style-type: none">• There was no system in place to ensure all alerts and information relevant to general practice were received, disseminated, monitored and acted upon.• Medication reviews were not always completed and reviewed regularly for patients living with long term conditions. <p>This was in breach of Regulation 12(1) and 12 (2) (b) (g) (i) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>