

Four Acre Health Centre

Inspection report

Burnage Avenue
Clock Face
St. Helens
WA9 4QB
Tel: 01744819884

Date of inspection visit: 16, 21 and 9 December 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?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Requires Improvement	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced comprehensive inspection at Four Acre Health Centre on 16, 21 November and 9 December 2022. Overall, the practice is rated as requires improvement.

Safe - good

Effective – good

Caring - good

Responsive - requires improvement

Well-led - requires improvement

Following our previous inspection on 7, 8, 9 and 16 March 2022 the practice was rated inadequate overall and for key questions safe and well-led. Effective and responsive were rated as requires improvement and caring was rated as good.

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

Why we carried out this inspection

We carried out this inspection to follow up concerns identified from our 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 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 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.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients reported difficulty accessing the practice by telephone and reported less satisfaction making an appointment.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care. Further work was required to embed the governance and oversight of risk into every day practice.

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

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Whilst we found no breaches of regulations, the provider **should**:

- Take action to improve feedback from patients.
- Continue to improve the uptake of cervical cancer screening and childhood immunisations.

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

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

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 CQC team inspector who assisted with the site visit and 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 Four Acre Health Centre

Four Acre Health Centre is located in St Helens at: Burnage Avenue, Clock Face, St Helens, Merseyside, WA9 4QB.

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

The provider offered some private appointments which were not reviewed as part of this inspection.

The practice is situated within the Cheshire and Merseyside Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 8,100. This is part of a contract held with NHS England.

The practice is part of St Helens South 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 second lowest decile (two of 10). The lower the decile, the more deprived the practice population is relative to others. A lower level of deprivation can indicate challenges in providing health care. The supply of healthcare services tends to be lower in more deprived areas due to a number of factors but has an increased demand. The population tends to have poorer health status among individuals with a greater need for health services. For example, there may be higher levels of long-term conditions such as those affecting the cardiovascular system and respiratory system.

This practice has higher than local and national average prevalence of hypertension, asthma, chronic obstructive pulmonary disease, depression, obesity and diabetes.

According to the latest available data, the ethnic make-up of the practice area is 98.5% white, 1.5% Asian, Black, Mixed, and Other.

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

There is a lead GP and 3 whole time equivalent salaried GPs. The practice has 3.5 whole time equivalent Advanced Nurse Practitioners, a clinical pharmacist, a practice nurse, a GP Assistant, 9 reception/admin staff, a part time counsellor and deputy practice manager. At the time of the inspection the practice manager post was vacant.

The practice is open between 8 am to 6 pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments. The practice is also a registered training practice for medical students.

Extended access and out of hours is provided St Helens Rota, where late evening and weekend appointments are available.

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 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had systems or processes in place that did not operate effectively in the absence of managerial oversight to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none">• Policies and procedures were not always specific to the practice and related to NHS services.• Complaint and incident investigations and actions were not always recorded.• Incidents were not always recorded on the electronic reporting system. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>