

# Padiham Group Practice

## Quality Report

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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 service

Good



Are services safe?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Padiham Group Practice on 13 September 2016.

At the inspection in September 2016 the overall rating for the practice was good, although the key question Safe was rated requires improvement. The full comprehensive report on the September 2016 inspection can be found by selecting the 'all reports' link for Padiham Group Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on the 14 March 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in one regulation that we identified in our previous inspection on 13 September 2016. This report covers our findings in relation to that requirement.

Overall the practice is rated as good

Our key findings were as follows:

At our previous inspection in September 2016 we found that;

- Not all potential risks to patients and staff had been adequately assessed and appropriate systems were not in place to address risks including: a legionella risk assessment and checks that cleaning had been carried out.
- A member of non-clinical staff checked vaccine storage fridge temperatures each day, although records were not complete and there was no guidance on meeting regulations for vaccine storage.
- During the inspection, evidence showed that a number of staff and GPs did not have up to date training to the required level for safeguarding vulnerable children and adults. The practice was unable to provide a safeguarding register during the inspection.
- Training records did not provide assurance that all staff had completed mandatory and role specific training.

We requested information for this desk top review about any progress the practice may have undertaken in responding to the areas we identified previously where the provider should take action. At this review we saw evidence that all staff had been registered with an online training provider. The practice manager had been tasked with maintaining the training records for all staff to

# Summary of findings

ensure that all records were current and up to date. A Legionella risk assessment had been carried out. The practice manager had submitted evidence to show that staff were following guidance on vaccine storage. Evidence to demonstrate that clinical staff had attended safeguarding training to the appropriate level was submitted by the practice.

**Professor Steve Field** CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### **Are services safe?**

The practice is rated as good for providing safe services. The practice had implemented systems to ensure that all staff were registered with an online training provider and there was an action plan in place to complete role-specific and mandatory core training. GPs had attended updated safeguarding training. A Legionella risk assessment had been carried out.

**Good**



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The provider had resolved the concerns for safety identified at our inspection on 13 September 2016 which applied to everyone using this practice, including this population group. The overall population group ratings have not been impacted and the rating for this group remains the same. The specific findings relating to this population group can be found at: [cqc.org.uk](http://cqc.org.uk) for every group.

Good



### People with long term conditions

The provider had resolved the concerns for safety identified at our inspection on 13 September 2016 which applied to everyone using this practice, including this population group. The overall population group ratings have not been impacted and the rating for this group remains the same. The specific findings relating to this population group can be found at: [cqc.org.uk](http://cqc.org.uk) for every group.

Good



### Families, children and young people

The provider had resolved the concerns for safety identified at our inspection on 13 September 2016 which applied to everyone using this practice, including this population group. The overall population group ratings have not been impacted and the rating for this group remains the same. The specific findings relating to this population group can be found at: [cqc.org.uk](http://cqc.org.uk) for every group.

Good



### Working age people (including those recently retired and students)

The provider had resolved the concerns for safety identified at our inspection on 13 September 2016 which applied to everyone using this practice, including this population group. The overall population group ratings have not been impacted and the rating for this group remains the same. The specific findings relating to this population group can be found at: [cqc.org.uk](http://cqc.org.uk) for every group.

Good



### People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety identified at our inspection on 13 September 2016 which applied to everyone using this practice, including this population group. The overall population group ratings have not been impacted and the rating for this group remains the same. The specific findings relating to this population group can be found at: [cqc.org.uk](http://cqc.org.uk) for every group.

Good



# Summary of findings

## People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety identified at our inspection on 13 September 2016 which applied to everyone using this practice, including this population group. The overall population group ratings have not been impacted and the rating for this group remains the same. The specific findings relating to this population group can be found at: [cqc.org.uk](http://cqc.org.uk) for every group.

Good



# Padiham Group Practice

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

A CQC inspector reviewed and analysed the documentation submitted to us by the practice.

## Background to Padiham Group Practice

Padiham Group Practice provides primary health care services to 12,708 patients from 36 Burnley Road, Padiham, BB12 8BP in East Lancashire under a general medical services contract with NHS England. The practice is part of East Lancashire Clinical Commissioning Group (CCG) and works actively in the Burnley locality.

The practice premises are a two-storey purpose built practice building owned by the GP partners.

The practice clinical team consists of five GP partners (three male, two female), three salaried GPs (one male, two female) and a locum GP (male), two female nurse practitioners and three female nurses and two female health care assistants. A practice manager, assistant practice manager and team of 15 administrative, secretarial and reception staff support the clinicians. The practice is also a training practice and supports medical students and trainee GPs.

The practice is open Mondays, Thursdays and Fridays 8am until 6.30pm and Tuesdays and Wednesday 8am until 8.30pm to offer extended hours appointments to patients.

The practice boundary covers surrounding villages as well as the town of Padiham. Information published by Public Health England rates the level of deprivation within the practice population group as four on a scale of one to 10

(level one represents the highest levels of deprivation and level 10 the lowest). East Lancashire has a higher prevalence of COPD, smoking and smoking related ill-health, cancer, mental health and dementia than national averages.

The practice has a predominantly white British population, with a higher than average proportions of patients who are over 55 years old and fewer 10 – 44 year olds. Male life expectancy is 77 years, which is in line with the CCG average but below the national average of 79 years and female life expectancy is 80 years which is below the CCG average of 81 years and the national average of 83 years. The practice has a high percentage (10%) of unemployed patients, compared with the CCG average of 6% and national average of 5%.

## Why we carried out this inspection

We undertook a comprehensive inspection of Padiham Group Practice on 13 September 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall, although the key question safe was rated as requires improvement. The full comprehensive report following the inspection on Month Year can be found by selecting the 'all reports' link for Padiham Group Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook a follow up desk based focused inspection of Padiham Group Practice on 14 March 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

# Detailed findings

## How we carried out this inspection

We carried out a desk-based focused inspection of Padiham Group practice on 14 March 2017. This involved reviewing evidence that:

- Clinicians were all trained to safeguarding children level 3
- Staff had attended role specific training and core training.
- Legionella risk assessment.
- Refrigerator temperature checks.



# Are services safe?

## Our findings

At our previous inspection on 13 September 2016, we rated the practice as requires improvement for providing safe services. This was because potential risks to patients were not adequately assessed for example; a Legionella risk assessment (Legionella is a term for a particular bacterium which can contaminate water systems in buildings) and the checks carried out to ensure vaccines were stored at the recommended temperature. We found the practice did not maintain appropriate records to demonstrate that all staff including some clinical staff had received up to date mandatory core training, safeguarding and role specific training.

These arrangements had significantly improved when we undertook a follow up desk top review 14 March 2017. The practice is now rated as good for providing safe services.

### Overview of safety systems and process

The practice submitted an action plan with timescales detailing how they intended to improve their staff training. They supplied us with evidence to confirm that all staff employed at the practice had been registered with an on line training provider.

Certificates to demonstrate all of the GPs had attended training to level 3 in safeguarding children had been submitted. In addition one of the GPs had attended a domestic violence awareness workshop and had shared this learning with the rest of the team.

A Legionella risk assessment to be carried out by a professional contractor.

The practice submitted evidence to demonstrate that the temperature of the refrigerators used to store vaccines and immunisations were being checked and recorded on a daily basis. In addition guidance in relation to the storage of vaccines was available for staff to reference.