

Speke Neighbourhood Health Centre

Inspection report

75 South Parade

Speke

Liverpool

Merseyside

L24 2SF

www.spekeneighbourhoodhc-drmangarai.nhs.uk

Date of inspection visit: 30 January 2019

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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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We undertook a comprehensive inspection of Speke Neighbourhood Health Centre on the 12 December 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement overall. The full comprehensive report following the inspection on December 2017 can be found by selecting the 'all reports' link for Speke Neighbourhood Health Centre on our website at www.cqc.org.uk.

We undertook an announced comprehensive inspection of Speke Neighbourhood Health Centre on 30 January 2019 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 12 December 2017. This report covers our findings in relation to those requirements and additional improvements made since our last inspection.

During this inspection 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 have rated this practice as good overall and good for all population groups.

We found that:

- The practice had clear systems to keep people safe and safeguarded from abuse. There were adequate systems to assess, monitor and manage risks to patient safety. Systems for sharing information with staff and other agencies to enable them to deliver safe care and treatment were in place.
- The practice had appropriate systems to safeguard children and vulnerable adults from abuse. However, the lead GP for safeguarding did not attend safeguarding meetings and children who did not attend for their appointment at the hospital or in the practice were not routinely followed up. Children on at-risk registers who did not attend for appointments were not routinely followed up by the practice.
- There were comprehensive risk assessments in relation to safety issues. A practice risk assessment was now in place. The practice learned and made improvements when things went wrong.

- Systems were in place to keep clinicians up to date with current evidence-based practice.
- We reviewed the patients on high risk medicines and the processes in place for appropriate blood monitoring prior to prescribing the medicines. We found that not all patients had appropriate and safe blood monitoring so that careful dose adjustment could be made if required.
- The practice had developed new systems to monitor the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence- based guidelines. However, audit systems required further development and implementation.
- Since the last inspection the provider had taken action to ensure staff had the skills, knowledge and experience to carry out their roles.
- Patients could access care and treatment from the practice within an acceptable timescale for their needs.
- The practice took complaints and concerns seriously and responded to them appropriately to improve the quality of care. However, patients were not informed of the steps to take if they remain dissatisfied with the outcome once the complaint has been responded to.
- Leaders were knowledgeable about issues and priorities relating to the quality and future of services. They understood the challenges and were addressing them.
- Staff stated they felt respected, supported and valued. They were proud to work in the practice.
- There was a process to identify, understand, monitor and address current and future risks including risks to patient safety. There were clear responsibilities, roles and systems of accountability to support good governance and management.
- Quality and operational information was used to ensure and improve performance. Performance information was combined with the views of patients.
- There was evidence of systems and processes for learning, continuous improvement and innovation.

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

- Take action to follow up failed attendance of children's appointments following an appointment in secondary care or for immunisation.
- Review the systems in place for monitoring patients' health in relation to the use of medicines including high risk medicines with appropriate monitoring and clinical review prior to prescribing.

Overall summary

- The practice safeguarding lead should consider attending the monthly safeguarding meeting with the local health visiting team to monitor patients at risk.
- Take action to follow up on the fire risks assessment for the building.
- Review the practice approach to the management of test results and discharge letters to ensure this is managed in a timely manner. Take action to monitor delays in referrals and to monitor patients who did not attend for appointments tests.
- Review the clinical audits undertaken to ensure a two-cycle audit is completed. Ideally, a clinical audit should be a continuous cycle that is continuously measured with improvements made after each cycle.
- Take steps to promote effective communication between the GP partners.

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

Professor Steve Field CBE FRCP FFPH FRCGP Chief Inspector of General Practice

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC lead inspector.
The team included a GP specialist adviser.

Background to Speke Neighbourhood Health Centre

Speke Neighbourhood Health Centre is operated by Mangarai & Partners. The practice is situated at 75 South Parade, Liverpool, Merseyside, L24 2SF. The website address is .

The practice provides a range of primary medical services including examinations, investigations and treatments and a number of clinics such as diabetes, asthma and hypertension. The practice is responsible for providing primary care services to approximately 2493 patients. The practice is based in an area with higher levels of economic deprivation when compared to other practices nationally. The staff team includes a full-time partner GP, a part-time partner GP and a part-time locum GP, a practice nurse, a practice manager and administration and reception staff. The GP partners are male and the locum GP and practice nurse are female.

Speke Neighbourhood Health Centre is open from 8am to 6.30pm each day Monday to Friday. Patients requiring a GP outside of these hours are advised to contact the GP out of hours service, by calling 111.

The practice is in a purpose-built building that is shared with other GP practices and community health services such as health visiting and midwifery. The practice is situated on the ground floor and is accessible to patients with a physical disability. A large car park is available for patients and staff.

The practice has a General Medical Service (GMS) contract. The practice offers a range of enhanced services including, avoiding unplanned hospital admissions, learning disability health checks, childhood immunisations and vaccines and seasonal influenza and pneumococcal vaccines.

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