

Westminster Medical Centre

Inspection report

Aldams Grove Kirkdale Liverpool L4 3TT Tel: 01519223510

Date of inspection visit: 31 August and 1 September

Date of publication: 20/10/2022

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?	Good	
Are services effective?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced focused inspection at Westminster Medical Centre on 31 August and 1 September 2022. Overall, the practice is rated as good.

Safe - Good

Effective - Good

Well-led – Requires improvement

The ratings for caring and responsive were carried through from the previous inspection in July 2016.

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

Why we carried out this inspection

We carried out this inspection to follow up concerns reported to us.

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:

- Systems and processes were under review to improve managerial oversight of the practice. The GP Partners took responsibility for the clinical oversight of care and treatment provided.
- The practice was supported by the local primary care network.
- Patients received effective care and treatment that met their needs.
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Overall summary

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

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

The provider **should**:

- Review the storage of oxygen cylinders to ensure they are stored securely.
- Review and improve the uptake of cervical cancer screening and childhood immunisations.
- Review the patient record flags and information shared with third parties.
- Review the induction system for staff tailored to their role.

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.

Background to Westminster Medical Centre

Westminster Medical Centre is located in Liverpool at:

Westminster Medical Centre

Aldams Grove

Kirkdale

Liverpool

L43TT

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

The practice is situated within the Cheshire and Merseyside Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of 6,394. This is part of a contract held with NHS England.

The practice is part of North Liverpool primary care network, a wider network of GP practices.

Information published by Public Health England shows that deprivation within the practice population group is in the lowest decile (one 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 95.8% White, 1.5% Asian, 1.2% Black, 1% Mixed and 0.5% 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.

The practice has a team of two GP Partners who are supported by locum GP's, a clinical pharmacist, a practice nurse and a team of reception/administration staff. At the time of the inspection the practice manager post was vacant. The practice is also a GP training centre.

The practice is open between 8 am to 6 pm Monday to Friday. The practice operates a telephone triage appointment system.

Out of hours services are accessed by contacting NHS 111.

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	Regulation 17 HSCA (RA) Regulations 2014 Good governance There were no systems or processes that enabled the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular: • The practice did not have consistently clear and effective processes for managing non-clinical risks, issues and performance.