

Spring View Medical Centre

Inspection report

Mytham Road

Little Lever

Bolton

Lancashire

BL3 1HQ

Tel: 01204578128

www.springviewmedicalcentre.nhs.uk

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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 well-led?

Requires improvement



Overall summary

We inspected Spring View Medical Centre 4 December 2014 as part of our inspection programme. The practice was given an overall rating of Good with the following key question ratings:

Safe – Good

Effective – Good

Caring – Good

Responsive – Good

Well-led – Good

We undertook an annual regulatory review of the practice on 20 May 2019 and a focused inspection was agreed in line with the five-year time limit.

We undertook a focused inspection of Spring View Medical Centre on 8 October 2019 to review the key questions Effective and Well Led. During the inspection it was necessary to open the key question Safe because of concerns identified during discussions about incident reporting, medicine management and the documentation of clinical records.

At this inspection on 8 October 2019 we rated the practice as requires improvement. 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 requires improvement overall.

We rated the practice as **requires improvement** for providing Safe, Effective and Well Led services because:

- Although the aim of the practice was to provide the best possible health care for their patients, we found that care was not consistently provided according to best practice, for example guidance was followed dependent on clinical awareness.
- Although their aim was to include all members of the team in decision-making not all staff described an open culture where discussion and learning took place, and some staff described an “us and them” feeling.
- The practice was not able to corroborate with evidence, the information they had provided at the annual regulatory review. For example, we did not see an improved safeguarding process, monthly searches to identify children at risk or monthly meetings where concerns were discussed.
- The practice could not evidence an improved process for incident reporting and learning.
- There was inconsistency in clinical documentation, specifically around the recording of medicine reviews.
- We found that there was not always a whole team approach with regard to providing care and staff worked in isolation.

The concerns that we found relate to all population groups and we have therefore rated the population groups as **requires improvement** overall.

The practice must:

- Ensure the care and treatment of patients is appropriate, meets their needs and reflects their preferences.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

Our inspection team consisted of a lead inspector and a GP specialist adviser.

Background to Spring View Medical Centre

Spring View Medical Centre Practice is located Mytham Road, Little Lever, Bolton, Lancashire, BL3 1HQ. It is a single storey purpose built practice located in the centre of Little Lever.

The practice is registered with the CQC to carry out the regulated activities diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The practice provides NHS services through a General Medical Services (GMS) contract to 5037 patients. The practice is a member of Bolton Clinical Commissioning Group (CCG).

There are three partners, (one male and two female) however only two are registered. The practice is currently submitting an application to register the third. One of the partners works part time and the other two are full time. There is a practice manager supported by administrative and support staff, a health care assistant and a vacancy for a practice nurse. Currently the practice is covering this vacancy with locum staff.

The practice is open from 8am until 6.30pm Monday to Friday. Extended access is offered on a Monday evening from 6.30pm until 8pm. They are also able to offer appointments out of core surgery times throughout the week, weekends and bank holidays through Bolton GP Federation.

The patient age profile for the practice is in line with the CCG average. Life expectancy for males is 77 years, which is in line with the CCG average of 77 years and below the national average of 79. Life expectancy for females is 82 years, which is above the CCG average of 81 and below the national average of 83. Information published by Public Health England, rates the level of deprivation at number five on the deprivation scale. Level one represents the highest levels of deprivation and level ten the lowest. The National General Practice Profile states that 9% of the practice population is from a black and minority ethnic (BME) background.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is 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 12 HSCA (RA) Regulations 2014 Safe care and treatment There was evidence that safe care and treatment was not being provided. In particular: Medicine reviews were not consistently recorded. Best practice guidelines were not consistently followed. Risks and incidents were not consistently raised.
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 The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular with regard to: Identifying risk Meeting and discussing risk and learning therefrom Safeguarding Following best practice Training, monitoring and improving Team and collaborative working Obtaining feedback from staff Creating a whole team approach