

The Limes Medical 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	
Are services effective?	Good	
Are services well-led?	Good	

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at The Limes Medical Practice on 21 July 2016. The overall rating for the practice was good. The full comprehensive report of the 21 July 2016 inspection can be found by selecting the 'all reports' link for The Limes Medical Practice on our website at www.cqc.org.uk.

This inspection was an announced focused follow-up inspection carried out on 9 March 2017 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 21 July 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

The practice was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection the practice was rated good overall. However, within the key question safe, the following areas were identified as requiring improvement because the practice was not meeting the legislation at that time:

Regulation 18 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Staffing

- Not all staff had received an appraisal from an appropriate person.
- Not all staff were supported enough in their role by the practice partners to enable them to carry out their role within a normal working week.

Our key findings during this inspection were as follows:

- We saw evidence that staff were provided with an appraisal of their work
- Discussion confirmed that staff received the support they needed.

The practice also provided evidence of other improvements identified following the previous inspection on 21 July 2016, for example:

- We saw evidence which demonstrated that discussions about NICE guidelines and MHRA alerts were now included in clinical meetings and staff were given a hard copy of these documents which were signed by the GPs and nursing staff.
- The nursing staff had changed their staff rota which enabled them to meet to discuss their work.

Summary of findings

- The system for GPs signing patient specific directions (PSD) had been reviewed so that they were completed correctly.
- Although a fire drill had not been carried out due to a fault on the alarm system, one had been planned for the following week.

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 was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated good overall. However, within the key question safe, the following areas were identified as improvements that should be addressed

- The nursing staff rota did not allow them to meet regularly to discuss their work.
- The system for GPs signing patient specific directions (PSD) needed to be reviewed so that they were not signed retrospectively, and that the PSD template should be completed correctly by the person administering the vaccine.
- Fire drills were not routinely carried out so that all staff were aware of the procedure during evacuation.

During this focused follow-up inspection the practice provided evidence of improvement following the previous inspection. We were told that the nursing staff rota had been changed so they had opportunity to meet to discuss their work and PSDs were now managed correctly. Although a fire drill had not taken place due to a fault on the fire alarm system, a fire drill was planned for the forthcoming week.

Good



Are services effective?

The practice is rated as good for providing safe services.

The practice was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated good overall. However, within the key question effective, the following areas were identified as improvements that should be addressed:

- NICE guidelines and MHRA alerts were not routinely discussed at clinical meeting.

During this focused follow-up inspection the practice provided evidence of improvement and we saw evidence to demonstrate that discussions about NICE guidelines and MHRA alerts were now included in clinical meetings.

Good



Are services well-led?

The practice is rated as good for providing well led services.

Good



Summary of findings

The practice was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated as good overall. However, within the key question well led, the following areas were identified as requiring improvement as the practice was not meeting the legislation at that time:

- Staff appraisals were not provided for all staff.
- Not all staff were supported enough in their role by the practice partners to enable them to carry out their role within a normal working week.

During the inspection on 9 March 2017 we were provided with evidence which demonstrated The Limes Medical Practice was now meeting the requirements of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Staffing.

We saw evidence that staff were provided with an appraisal of their work and we discussed with the practice manager the support provided to staff.

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 practice is rated as good for the care of older people.

This rating was given following the comprehensive inspection 21 July 2016. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-538863375>

Good



People with long term conditions

The practice is rated as good for the care of people with long-term conditions.

This rating was given following the comprehensive inspection 21 July 2016. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-538863375>

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people.

This rating was given following the comprehensive inspection 21 July 2016. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-538863375>

Good



Working age people (including those recently retired and students)

The practice is rated as good for the care of working-age people (including those recently retired and students).

This rating was given following the comprehensive inspection 21 July 2016. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-538863375>

Good



People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

This rating was given following the comprehensive inspection 21 July 2016. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-538863375>

Good



Summary of findings

People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia).

This rating was given following the comprehensive inspection 21 July 2016. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-538863375>

Good



The Limes Medical Practice

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC inspector.

Background to The Limes Medical Practice

The Limes Medical Centre is located in Walkden, Salford. The address of the practice is 8-12 Hodge Road, Manchester, Salford, M28 3AT. The practice has limited parking facilities but has good public transport links with bus stops nearby and a train station that has frequent trains into Manchester city centre. The practice is located within three terraced houses that have been converted for the purpose of the practice. The practice employs five GP partners (two male and three female), as well as two practice nurses (female), an assistant practitioner (female), a phlebotomist, a practice manager and a team of administration staff.

The practice is open between 8.30am and 6pm Monday to Friday with the exception of every second Thursday from 1pm to 2.30pm where the practice is closed for staff training. Appointments are from 8.50am to 11.10am and 2.20pm to 5.10pm daily. In addition to pre-bookable appointments that can be booked up to four weeks in advance, urgent appointments are also available for people that needed them. Outside of opening hours, patients are directed to the 111 out of hour's service.

The practice has approximately 5859 patients and operates under a general medical services contract. The practice has an above average of working age people and elderly compared to the national average.

Why we carried out this inspection

We undertook a comprehensive inspection of The Limes Medical Practice on 21 July 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. At that inspection the practice was rated good overall. However, within the key question safe, areas were identified as requiring improvement because the practice was not meeting the legislation at that time: Regulation 18 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Staffing. The full comprehensive report following the inspection on 21 July 2016 can be found by selecting the 'all reports' link for The Limes Medical Practice on our website at www.cqc.org.uk.

We undertook a follow-up focused inspection of The Limes Medical Practice 9 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.

How we carried out this inspection

We carried out a follow up focused inspection of The Limes Medical Practice 9 March 2017. This involved reviewing evidence that:

- Relevant staff had now completed an appraisal of their work.
- All staff were supported in their role.
- Nursing staff had the opportunity to meet regularly to discuss their work.

Detailed findings

- There was a system for the GPs signing patient specific directions (PSD) so that they were not signed retrospectively, and that the PSD template was completed correctly by the person administering the vaccine.

- NICE guidance and MHRA alerts were regularly discussed at clinical meetings.

Although a fire drill had not been carried out due to a fault on the system, arrangements had been made for a fire drill to take place the following week.

Are services safe?

Our findings

The practice is rated as good for providing safe services.

The practice was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated good overall. However, within the key question safe, the following areas were identified as improvements that should be addressed:

- The nursing staff rota did not allow them to meet regularly to discuss their work.

- The system for GPs signing patient specific directions (PSD) needed to be reviewed so that they were not signed retrospectively, and that the PSD template should be completed correctly by the person administering the vaccine.
- Fire drills were not routinely carried out so that all staff were aware of the procedure during evacuation.

During this focused follow-up inspection the practice provided evidence of improvement following the previous inspection. We were told that the nursing staff rota had been changed so they had opportunity to meet to discuss their work and PSDs were now managed correctly. Although a fire drill had not taken place due to a fault on the fire alarm system, a fire drill was planned for the forthcoming week.

Are services effective?

(for example, treatment is effective)

Our findings

The practice is rated as good for providing safe services.

The practice was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated good overall. However, within the key question effective, the following areas were identified as improvements that should be addressed:

- NICE guidelines and MHRA alerts were not routinely discussed at clinical meeting.

During this focused follow-up inspection the practice provided evidence of improvement and we saw evidence to demonstrate that discussions about NICE guidelines and MHRA alerts were now included in clinical meetings.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

The practice is now rated as good for providing well led services.

The practice was previously inspected on 21 July 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated good overall. However, within the key question well led, the following areas were identified as requiring improvement as the practice was not meeting the legislation at that time:

- Staff appraisals were not provided for all staff.

- Not all staff were supported enough in their role by the practice partners to enable them to carry out their role within a normal working week.

During the inspection on 9 March 2017 we were provided with evidence which demonstrated The Limes Medical Practice was now meeting the requirements of Regulation 18 Staffing of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We saw evidence that staff were provided with an appraisal of their work and we discussed with the practice manager the support provided to staff.