

The Birches Medical Centre

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



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 Birches Medical Centre on 11 April 2016. The overall rating for the practice was good. The full comprehensive report on the 11 April 2017 inspection can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

At our previous inspection on 11 April 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- staff did not work within the scope of their practice and flu vaccinations were given without the authority of a GP.

In addition we identified the following issues the service should improve:

- A record should be kept of the investigation and review of all significant events.
- A system of continuous clinical audit should be established to test the effectiveness of the service and to monitor quality and make improvements.

- A record should be kept of meetings held for the purpose of monitoring issues discussed.
- The temperature of the vaccine fridges should be checked daily and medicine stock levels should be audited.
- A record should be kept of the work carried out to improve infection control so that it can be monitored, and a review date logged for the next infection control audit.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

This inspection was an announced focussed inspection carried out on 10 July 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation that we identified in our previous inspection on 11 April 2017.

At this inspection we found that sufficient improvement had been achieved to update the rating for provision of safe services to good. The practice had addressed the breaches of regulation and was now compliant with all regulations. This report covers our findings in relation to those improvements.

Summary of findings

Our key findings were as follows:

- New systems were in place for recording and monitoring significant events and clinical audits.
- There was a system for recording staff discussions and meetings.
- Additional staff training had been provided.
- Records for monitoring medicine stock levels were recorded for the purpose of auditing.
- Relevant procedures were altered to support these changes to 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?

At our previous inspection on 11 April 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- staff did not work within the scope of their practice and flu vaccinations were given without the authority of a GP.

We issued a requirement notice in respect of this issue and found arrangements had improved when we undertook a focussed follow up inspection on 10 July 2017. The practice is now rated as good for providing safe services.

In addition we identified the following issues the service should improve:

- A record should be kept of the investigation and review of all significant events.
- A system of continuous clinical audit should be established to test the effectiveness of the service and to monitor quality and make improvements.
- A record should be kept of meetings held for the purpose of monitoring issues discussed.
- The temperature of the vaccine fridges should be checked daily and medicine stock levels should be audited.
- A record should be kept of the work carried out to improve infection control so that it can be monitored, and a review date logged for the next infection control audit.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

At this inspection we found that all the necessary steps had been taken to address these issues.

- New systems were in place for recording and monitoring significant events and clinical audits.
- There was a system for recording staff discussions and meetings.
- Additional staff training had been provided.
- Records for monitoring medicine stock levels were recorded for the purpose of auditing.

Good



Summary of findings

- Relevant procedures were altered to support these changes to practice.

Are services effective?

At our previous inspection on 11 April 2016, we rated the practice as good for providing effective services although we identified the following issue that the practice should improve:

- A system of continuous clinical audit was not in place to test the effectiveness of the service and to monitor quality and make improvements.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the system of ongoing clinical audit since the last inspection.

At this inspection we found this issue had been addressed through an improved system of recording and monitoring.

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 safe identified at our inspection on 11 April 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

Good



People with long term conditions

The provider had resolved the concerns for safe identified at our inspection on 11 April 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

Good



Families, children and young people

The provider had resolved the concerns for safe identified at our inspection on 11 April 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safe identified at our inspection on 11 April 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safe identified at our inspection on 11 April 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Summary of findings

The specific findings on these groups can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safe identified at our inspection on 11 April 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

Good



Summary of findings

The Birches Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector reviewed and analysed the evidence provided at the time of the inspection.

Background to The Birches Medical Centre

The Birches Medical Centre is located in Polefield Road, Prestwich Manchester. There is local parking and public transport links close to the practice. The Birches Medical Centre is situated within the geographical area of Bury Clinical Commissioning Group.

There are three GPs working at the practice. Two are partners, one male and one female and one is a salaried GP who is female. The GPs work between three and six sessions per week. There are three female practice nurses and a male advanced nurse practitioner. All of these staff work part time. There is also a part time female health care worker. The practice is supported by a practice manager and a team of reception and administration staff.

The practice is open between 8 am and 6.30 pm Monday to Friday (except bank holidays). Appointments are between 8.00 am and 12.30 pm and 1.30 pm and 5.45 pm. Telephone appointments are available daily from 8 am to 6.30 pm. Patients requiring a GP outside of normal working hours are directed to use the Bury and Rochdale Doctors On Call (BARDOC) using the surgery number.

The practice has a General Medical Services (GMS) contract with Bury CCG. The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities.

The Birches Medical Centre is responsible for providing care to 4339 patients.

Why we carried out this inspection

We undertook a comprehensive inspection of The Birches Medical Centre on 11 April 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on 11 April 2016 can be found by selecting the 'all reports' link for The Birches Medical Centre on our website at www.cqc.org.uk.

We undertook a focussed inspection of on 10 July 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

Following the inspection on 11 April 2016 the practice supplied an action plan with appropriate timescales telling us how they would ensure they made the relevant improvements. In line with their agreed timescale the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the safe domain.

We carried out a focussed follow up inspection of The Birches Medical Centre on 10 July 2017. This involved looking at information the practice used to deliver care and speaking with the practice manager.

Are services safe?

Our findings

At our previous inspection on 11 April 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- staff had not worked within the scope of their practice and flu vaccinations had been given without the authority of a GP.

We issued a requirement notice in respect of this issue and found arrangements had improved when we undertook a focussed follow up inspection on 10 July 2017.

In addition we identified the following issues the service should improve:

- Detailed records had not been kept of the investigation and review of all significant events.
- A record was not always kept of meetings held for the purpose of monitoring issues discussed.
- The daily temperature of the vaccine fridges had not been checked when nursing staff were not on duty and there was no evidence that medicine stock levels had been audited.
- The infection control audit did not demonstrate that outstanding actions had been addressed and a record was not kept of when this had taken place and who was responsible for monitoring these actions.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

Safe track record and learning

A new recording system had been introduced to record and monitor details about investigations and reviews of all significant events. No further significant events had occurred since the last inspection on 11 April 2016.

There was now a system to ensure communication between nursing staff about patients' care needs was recorded and disseminated to all relevant staff. This was managed by the practice manager and meant patients their care needs could be monitored more effectively.

Overview of safety systems and processes

The review date was now logged for when the next infection control audit should take place and there was now an improved recording system to monitor when outstanding actions had been addressed and who was responsible for monitoring these actions.

The protocol for monitoring the fridge temperatures had changed to include details of how checks would be completed when the nursing staff were not on duty.

Records of medicine stock levels were now kept for the purpose of auditing and staff had been provide with additional training on this new system.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 11 April 2016, we rated the practice as good for providing effective services although we identified the following issue that should be improved:

- A system of continuous clinical audit was not in place to test the effectiveness of the service and to monitor quality and make improvements.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the system of ongoing clinical audits since the last inspection.

At this inspection we found this issue had been addressed and a system of continuous clinical audit was now in place. This was overseen by the GPs through an improved system of recording and monitoring.