

# Maghull Family Surgery

## Inspection 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 location

Good 

Are services safe?

Good 

# Overall summary

We carried out an announced comprehensive inspection at Maghull Family Surgery on 27 June 2017. The overall rating for the practice was good but we rated the practice as requires improvement for providing safe services. This was because the practice did not have robust arrangements in place for monitoring patients on high risk medicines. We issued a requirement notice for the provider to address this issue.

The full comprehensive report on the June 2017 inspection can be found by selecting the 'all reports' link for Maghull Family Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was carried out on 31 July 2018 to confirm that the provider had carried out their plan to meet the legal requirements in relation to the breach in regulations identified in our previous inspection. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

We found that the provider had taken appropriate action to ensure an effective system was in place for monitoring patients on high risk medicines.

Our key findings were as follows:

- The provider had reviewed and updated their systems and processes to ensure that risks associated with high risk medicines were closely monitored to protect patient safety. A spreadsheet had been introduced to ensure a regular overview of patients requiring regular tests linked to the medicines they were prescribed.

We had also made a number of recommendations following our June 2017 inspection. We therefore also looked at the providers progress in addressing these. Our findings were as follows:

- The provider had reviewed the processes in place for the management of test results to ensure there are no delays dealing with results.
- A system had been put in place to monitor patient referrals to hospital under the two week wait rule.
- The system for managing patient safety alerts had been reviewed to ensure all relevant alerts were acted upon and that information on the actions taken were documented.
- Blank prescription forms were stored securely and removed from surgery/consulting rooms when not in use.
- A risk assessment has been carried out to identify a list of medicines, in line with best practice, that should be in place for use in an emergency situation.
- An action plan had been implemented to improve the service, in response to results of the national GP patient survey.

**Professor Steve Field** CBE FRCP FFPH FRCGP

Chief Inspector of General Practice.

## Population group ratings

## Our inspection team

The inspection was carried out by a CQC lead inspector.

## Background to Maghull Family Surgery

Maghull Family Surgery is located in Maghull, Merseyside and falls within South Sefton Clinical Commissioning Group. The practice has two contracts in place, a Personal Medical Services (PMS) and a GMS (General Medical Services) contract. Under both contracts the practice serves a local population of approximately 4800 patients.

The practice clinical team consists of two GP partners (male) and one non-clinical partner, supported by two long term locum GPs, (one male and one female). A further (male) locum GP is available on an ad hoc basis for additional cover as and when required. The service has a practice nurse who works four days per week. The clinical team is supported by a practice manager, a practice administrator and seven administrative and reception staff.

The practice is open between 8am and 6.30pm Monday to Friday. Appointments are from 9am to 11.30am every morning and from 3.30pm to 6pm daily. Extended surgery hours are offered at the practice on Tuesday of each week, from 6.30pm to 8pm.

The practice is in a facility shared with Maghull Community Health Centre. Community midwives, health visitors and nurses are based in the building. The practice has a slightly higher than average population of older

patients, with 22.6% of patients being aged 65 and over, compared to the England average of 16.7%, and the practice had 10.6% of patients over age 75 years, compared to the England average of 7.6%.

The practice does not provide out of hours services. When the surgery is closed patients are directed to the GP out of hour's service provider (NHS 111).

### **Why we carried out this inspection**

We undertook a comprehensive inspection of Maghull Family Surgery on 29 June 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall but as requires improvement for providing safe services. The full comprehensive report following the inspection on June 2017 can be found by selecting the 'all reports' link for Maghull Family Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook this follow up focused inspection of Maghull Family Surgery on 31 July 2018. 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.

## Are services safe?

We had carried out an announced comprehensive inspection at Maghull Family Surgery on 27 June 2017 and we rated the practice as requires improvement for providing safe services. This was because the practice did not have robust arrangements in place for monitoring patients on high risk drugs. We found that GPs had prescribed high risk medicines without checking whether the patient had received the correct monitoring and blood tests. We issued a requirement notice for the provider to address this issue.

### **Appropriate and safe use of medicines**

Our findings during this follow up inspection were that the provider had reviewed and updated their systems and

processes to ensure that risks associated with high risk medicines were closely monitored to protect patient safety. A spreadsheet had been introduced to ensure a regular overview of patients requiring regular tests linked to the medicines they were prescribed. This showed that all required checks/monitoring of patients prescribed high risk medicines were up to date.

We found the provider had made other improvements in response a number of recommendations we had made at our previous inspection under the key question of safe.

**Please refer to the evidence tables for further information.**