

# Charlestown Medical Practice

## Quality Report

Charlestown Rd  
Blackley  
Greater Manchester  
M9 7ED

Tel: 0161 741 2060

Website: [www.gtdhealthcare.co.uk/practice/charlestown-medical-practice](http://www.gtdhealthcare.co.uk/practice/charlestown-medical-practice)

Date of inspection visit: 15 August 2017

Date of publication: 24/08/2017

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 caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Good



# Summary of findings

## Contents

### Summary of this inspection

Overall summary	Page 2
The five questions we ask and what we found	4
The six population groups and what we found	6

### Detailed findings from this inspection

Our inspection team	8
Background to Charlestown Medical Practice	8
Why we carried out this inspection	8
How we carried out this inspection	8
Detailed findings	10

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Charlestown Medical Practice on 14 June 2016. The overall rating for the practice was good however there were improvements required in the key question safe. The full comprehensive report on the 14 June 2016 inspection can be found by selecting the 'all reports' link for Charlestown Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection carried out on 15 August 2017 to confirm 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 inspections. 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.

Our key findings at this inspection were as follows:

- We reviewed a range of documents which demonstrated they were now meeting the requirements of Regulation 12 Health & Social Care Act 2008 (Regulated Activities) Regulations 2014: Safe Care and Treatment.
- There was now an effective system in place to manage and monitor infection control.
- There were clear processes and checks for the healthcare assistant (now called assistant practitioner) in following the Patient Specific Directions (PSD). A Patient Specific Direction (PSD) is an instruction to administer a medicine to a list of individually named patients where each patient on the list has been individually assessed by that prescriber. The prescriber must have adequate knowledge of the patient's health, and be satisfied that the medicine to be administered serves the individual needs of each patient on that list.
- The GPs had appropriate emergency medicines available when attending home visits.
- The practice held records to show staff were immunised against infectious diseases, in particular for Hepatitis B. Hepatitis B is an infection of the liver caused by a virus that's spread through blood and body fluids.
- Blank prescription forms and pads were securely stored and there were systems in place to monitor their use.

# Summary of findings

- There was now a patient participation group (PPG) in place that had met regularly since the last inspection and were looking at ways to engage with the patient population.

**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.

On inspection we reviewed documentary evidence to demonstrate how the practice had improved in relation to the key question safe since the last inspection.

- There was an effective system in place to manage and monitor infection control.
- There were clear processes and checks for the healthcare assistant in following the Patient Specific Directions (PSD).
- The GPs had appropriate emergency medicines available when attending home visits.
- The practice held records to show staff were immunised against infectious diseases, in particular for Hepatitis B. Hepatitis B is an infection of the liver caused by a virus that's spread through blood and body fluids.
- Blank prescription forms and pads were securely stored and there were systems in place to monitor their use.

Good



### Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

On this inspection we reviewed documentary evidence to demonstrate how they had improved some of their practices in relation to the key question Effective since the last inspection.

- There was now a plan of clinical audit to monitor and improve the services provided.

Good



### Are services caring?

The practice is rated as good for providing caring services.

This rating was given following the comprehensive inspection 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



### Are services responsive to people's needs?

The practice is rated as good for providing responsive services.

Good



# Summary of findings

This rating was given following the comprehensive inspection 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

## Are services well-led?

The practice is rated as good for being well-led.

This rating was given following the comprehensive inspection 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

On this inspection we reviewed documentary evidence to demonstrate how they had improved some of their practices in relation to the key question well-led since the last inspection.

- There was now a patient participation group (PPG) in place that had met regularly since the last inspection and looking at ways to engage with the patient population.

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

This rating was given following the comprehensive inspection 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

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 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

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 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

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 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

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 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

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 14 June 2016. A copy of the full report following this inspection is available on our website.

<http://www.cqc.org.uk/search/services/doctors-gps>

Good



# Charlestown Medical Practice

## 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 Charlestown Medical Practice

Charlestown Medical Practice is located in the Blackley area of Manchester. It is part of and managed by GTD healthcare, a not for profit social enterprise.

The practice is located in the same building as a range of community clinics providing services. The practice is fully accessible to those with mobility difficulties. There is a small car park with disabled parking spaces.

At the time of our inspection there were approximately 4000 patients registered with the practice. The practice is overseen by North Manchester Clinical Commissioning Group (CCG). The practice has an Alternative Primary Medical Services (APMS) contract. The APMS contract is the contract between general practices and NHS England for delivering primary care services to local communities.

The practice employs one full time GP (male) and two part time GPs (female). There is also a nurse practitioner and assistant practitioner, formerly known as a healthcare assistant. Members of clinical staff are supported by a practice manager and administrative staff. At the time of the inspection there was no permanent practice nurse in place however this was covered through agency staff.

The practice has an average patient population with regard to gender and age mix, although there was a slightly higher than average number of patients in the working age group

and children age group. The male life expectancy for the area is 74 years compared with the CCG averages of 73 years and the national average of 79 years. The female life expectancy for the area is 78

years compared with the CCG averages of 78 years and the national average of 83 years.

The practice is open:

- Monday - 8am to 8pm
- Tuesday - 8am to 6.30pm
- Wednesday- 8am to 6.30pm
- Thursday - 8am to 8pm
- Friday - 8am to 6.30pm
- Saturday – 9am to 1pm

Patients requiring a GP outside of normal working hours are advised to call “Go-to-Doc” using the usual surgery number and the call is re-directed to the NHS 111 out-of-hours service. The surgery is part of Prime Ministers GP Access (GPPO) scheme offering extended hours and weekend.

## Why we carried out this inspection

We undertook a comprehensive inspection of Charlestown Medical Practice 14 June 2016 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 requires improvement in the key question safe. The report for this inspections can be found by selecting the ‘all reports’ link for Charlestown Medical Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).



# Detailed findings

We undertook a follow up focused inspection of Charlestown Medical Practice on 15 August 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 14 June 2016 the practice supplied an action plan telling us how they would ensure they met the requirements of Regulation 12 Health & Social Care Act 2008 (Regulated Activities) Regulations 2014: Safe Care and Treatment.

We carried out an announced visit on 15 August 2017. A CQC inspector reviewed and analysed the evidence provided by the practice and made an assessment of this against the regulations.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

# Are services safe?

## Our findings

At our previous inspection on 14 June 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of infection control, systems and processes associated with Patient Specific Directions (PSD) events and emergency medicines available to GPs for home visits.

These arrangements had significantly improved when we undertook a follow up inspection on 15 August 2017. The practice is now rated as good for providing safe services.

### Overview of safety systems and process

- The Nurse Practitioner had overall responsibility for infection prevention and control (IPC) in the practice. They worked with the health care assistant (HCA) (now assistant practitioner) and this ensured daily and weekly checks were carried out and recorded. They ensured there was a programme in place for regular IPC audits with appropriate action plans, in accordance with GTD Healthcare's IPC guidance and policy. There was a GTD Healthcare organisational lead for IPC who provided support and guidance on any IPC matters.
- There were patient specific directions (PSD) in place that were now adhered to and monitored by either the HCA (assistant practitioner) or the nurse practitioner. PSD signed sheets were audited on a monthly basis by a

clinician and cross referenced within the clinical records. A Patient Specific Direction (PSD) is an instruction to administer a medicine to a list of individually named patients where each patient on the list has been individually assessed by that prescriber. The prescriber must have adequate knowledge of the patient's health, and be satisfied that the medicine to be administered serves the individual needs of each patient on that list.

- Blank prescription form and pads were securely stored and there were systems in place to monitor their use.

### Monitoring risks to patients

- The practice held records to show staff were immunised against infectious diseases, in particular for Hepatitis B. Hepatitis B is an infection of the liver caused by a virus that's spread through blood and body fluids.

### Arrangements to deal with emergencies and major incidents

Emergency drug were taken out on home visits by the GP. GTD Healthcare issued guidance as a minimum standard that certain medicines should always be taken on home visits and this had now been actioned. There were other emergency drugs available to take out on a home visit and the GP, who reviewed each request for a home visit, only took any drugs they felt necessary for the visit.

# Are services effective?

(for example, treatment is effective)

## Our findings

Please note this is a focused inspection of the overview of safety systems and processes within the key question safe.

Please refer to the comprehensive inspection report for this service that is available on our website at the following web site <http://www.cqc.org.uk/search/services/doctors-gps>

On this inspection we reviewed documentary evidence to demonstrate how they had improved some of their practices in relation to the key question Effective since the last inspection.

### **Management, monitoring and improving outcomes for people**

- There was now a plan in place for clinical audits in order to monitor and improve the services provided.

## Are services caring?

### Our findings

Please note this is a focused inspection of the overview of safety systems and processes within the key question safe. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following web site <http://www.cqc.org.uk/search/services/doctors-gps>

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

Please note this is a focused inspection of the overview of safety systems and processes within the key question safe. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following web site <http://www.cqc.org.uk/search/services/doctors-gps>

# Are services well-led?

Good 

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

## Our findings

Please note this is a focused inspection of the overview of safety systems and processes within the key question safe.

Please refer to the comprehensive inspection report for this service that is available on our website at the following web site <http://www.cqc.org.uk/search/services/doctors-gps>

On this inspection we reviewed documentary evidence to demonstrate how they had improved some of their practices in relation to the key question well led since the last inspection.

### **Seeking and acting on feedback from patients, the public and staff**

There was now a patient participation group (PPG) in place that had met regularly since the last inspection and were looking at ways to engage with the patient population. There were eight active members of the group