

Olive Medical Practice

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	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Requires Improvement	
Are services well-led?		Good	

Overall summary

We carried out an announced inspection at Olive Medical Practice on 11 August 2021.

Overall, the practice is rated as good.

Safe - good

Effective -good

Caring - good

Responsive – requires improvement

Well-led - good

Following our previous comprehensive inspection on 25 September 2019 the practice was rated requires improvement overall, with the key question Safe rated as inadequate and the rating of requires improvement for the other four key questions -effective, caring, responsive and well led. The practice was issued a warning notice for breach of regulation 12(1) Safe care and treatment and a requirement notice for regulation 17(1) Good governance. A follow up inspection to check the practice had taken action in response to the warning notice was undertaken in January 2020 where we observed that all the areas identified in the warning notice had been addressed.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Olive Medial Practice on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on concerns identified previously. The inspection found significant improvements in the key questions safe and well led and both of these are now rated good. We rated the practice as good for providing effective services, however the population group for working age people (including those recently retired and students) was rated as requires improvement as cervical screening data for 2019/20 remains below target. Caring was rated good however responsive services was rated as requires improvement as published patient feedback was negative.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included

- Conducting several staff interviews using video conferencing.
- Completing clinical searches on the practice’s patient records system and discussing findings with the provider.
- Reviewing patient records to identify issues and clarify actions taken by the provider.

Overall summary

- Requesting evidence from the provider.
- A short site visit.

Our findings

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 Good overall.

We found that:

- A comprehensive quality improvement plan had been implemented and effective progress and achievement made in improving service delivery in many areas. Governance, risk management, and systems to promote safe and effective care and treatment were in place.
- The improvements observed at our follow up inspection in January 2020 in relation to safeguarding matters had continued to develop and improve to ensure patients identified as at risk were monitored effectively. Patients were appropriately coded on the safeguarding registers and a comprehensive risk assessment process was in place.
- Systems to monitor babies, children and young people non-attendance at appointments both at the GP practice and at secondary care appointments were monitored and responded to.
- Action was taken to ensure test results and allocated clinical tasks were responded to in a timely manner with appropriate action implemented in response to patient safety alerts.
- A system to monitor clinical decision making for those working in advanced clinical roles was established.
- The practice recognised patient dissatisfaction with telephone access and were in the process of negotiating a new telecommunication system to improve access for patients.
- The practice team were working hard to improve performance data such as cervical screening and childhood immunisations. The practice actively sought patient feedback and used this to improve service quality.
- The practice had implemented systems to ensure they provided care in a way that kept patients safe and protected them from avoidable harm. This included implementing and following national and local guidelines to keep people safe throughout the COVID-19 pandemic.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice team were positive and enthusiastic. They told us there had been a cultural shift to inclusive team work and they were all working together to provide a quality service with patients.

Overall summary

Whilst we found no breaches of regulations, the provider **should**:

- Continue to develop and implement initiatives to improve telephone access and to improve feedback on their experience of the practice.
- Continue to review and improve the records of patients who are carers.
- Continue to monitor and document improvements for cervical screening and immunisations children.

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 was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who completed clinical searches and records reviews without visiting the location. A second CQC inspector supported this inspection as part of their induction.

Background to Olive Medical Practice

Olive Medical Practice, (3 Lime Street, Blackburn, Lancashire BB1 7EP) is located in a two storey premises situated in a residential area close to the centre of the town. There is limited on-street parking.

The practice delivers primary medical services to a patient population of approximately 7555 people via a general medical services (GMS) contract with NHS England. The practice is part of the NHS Blackburn with Darwen Clinical Commissioning Group (CCG) and is part of a wider network of GP Blackburn with Darwen North PCN).

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

Information published by Public Health England rate the level of deprivation within the practice population group as two on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice delivers services to a patient cohort consisting of 65% Asian, 31% White and the remainder a mix of Black and other ethnicities. The practice caters for a lower proportion of patients over the age of 65 years (8%) compared to local average 15% and England averages 18%. The practice has a higher proportion of younger patients under the age of 18 years (31%, compared to 24% locally and the England average of 20%). The practice also caters for a lower percentage of patients who experience a long-standing health condition (30%, compared to the local and England averages of 51% and 52% respectively.

The practice is staffed by three male GP partners, one salaried GP (male) and one long standing part time female locum GP. The GPs are supported by one long term locum advanced nurse practitioner, and two clinical pharmacists. The practice is advertising for a practice nurse. A practice manager, a deputy practice manager and a team of administrative and reception staff support the clinical team.

The practice is open between 8am and 6.30pm each weekday, with later evening appointments available on Wednesday evenings until 8.30pm. Patients are also able to access additional extended hours appointments, which are offered from local hub locations by the local GP federation on weekday evenings, and at weekends.

The practice is in the process of adding a private non-therapeutic circumcision service for young male children at weekends. The practice manager and the GPs at the practice are reviewing procedures in line with national guidance to ensure the service they provide will be safe and effective.

Extended access to pre-booked appointments are available in the earlier evening and at weekend. Outside normal surgery hours, patients are advised to contact the out of hour's service by dialling NHS 111.