

Spring Lane Surgery Quality Report

15-17 Spring Lane Radcliffe Manchester M26 2TQ Tel: 01617246938 Website: www.springlanesurgery.co.uk

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

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Overall summary

Letter from the Chief Inspector of General Practice

This is a focused inspection of Spring Lane Surgery on 07 October 2016 for one area within the key question safe. The evidence was reviewed at Spring Lane Surgery.

We found the practice to be requires improvement in providing safe services. Overall, the practice is rated as good.

The practice was previously inspected on 07 May 2016. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated requires improvement for providing safe services but rated good overall. At the inspection on 07 October 2016 we found that some improvements had been made in relation to DBS (disclosure and baring service) checks but there were still areas identified that required improvement

There were areas of practice where the provider must make improvements:

• The provider must ensure that all recruitment checks are carried out for staff prior to employment and that all clinical staff have indemnity cover.

Professor Steve Field (CBE FRCP FFPH FRCGP) Chief Inspector of General Practice

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 requires improvement for providing safe services.

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

We reviewed the practice's recruitment procedure and found that some improvements had been made. The practice had ensured that all current staff had received a DBS (disclosure and baring service) check. However, the practice had not ensured that a valid DBS check was in place for a newly recruited clinical member of staff before employment commenced. The member of staff was also lacking indemnity insurance.

Are services effective?GoodThe practice is rated as good for providing effective services.GoodThis rating was given following the comprehensive inspection 07
May 2015. A copy of the full report following this inspection is
available on our website. http://www.cqc.org.uk/search/services/
doctors-gpsGoodAre services caring?
The practice is rated as good for providing caring services.GoodThis rating was given following the comprehensive inspection 07
May 2015. A copy of the full report following this inspection 07
May 2015. A copy of the full report following this inspection is
available on our website. http://www.cqc.org.uk/search/services/

Requires improvement

doctors-gps
Are services responsive to people's needs?
The practice is rated as good for providing responsive services.
This rating was given following the comprehensive inspection 07
May 2015. 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?
Good

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

This rating was given following the comprehensive inspection 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people Good The practice is rated as good for the care of older people. This rating was given following the comprehensive inspection 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps People with long term conditions Good The practice is rated as good for the care of people with long-term conditions. This rating was given following the comprehensive inspection 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps Families, children and young people Good The practice is rated as good for the care of families, children and young people. This rating was given following the comprehensive inspection 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps Working age people (including those recently retired and Good 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 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps People whose circumstances may make them vulnerable Good 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 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps

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 07 May 2015. A copy of the full report following this inspection is available on our website. http://www.cqc.org.uk/search/services/ doctors-gps Good

What people who use the service say

As part of this focused inspection we did not speak to any people who use the service.

A comprehensive inspection was undertaken 07 May 2015.

A copy of the full report following this inspection is available on our website http://www.cqc.org.uk/search/ services/doctors-gps

Areas for improvement

Action the service MUST take to improve

• The provider must ensure that all recruitment checks are carried out for staff prior to employment and that all clinical staff have indemnity cover.



Spring Lane Surgery 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 Spring Lane Surgery

Spring Lane Surgery is situated near Radcliffe town centre. At the time of this inspection we were informed 6,350 patients were registered with the practice.

The practice population experiences higher levels of deprivation than the practice average across England. There are a lower proportion of patients above 65 years of age (12.2%) than the practice average across England (16.7%). The practice has a higher proportion of patients under 18 years of age (15.6%) than the practice average across England (14.8%). 57.2 percent of the practice's patients have a longstanding medical condition compared to the practice average across England of 54%.

At the time of our inspection two GP partners and two salaried GPs were providing general medical services to patients registered at the practice. The GPs are supported in providing clinical services by an advanced nurse practitioner, a practice nurse and a health care support worker. Clinical staff are supported by the practice manager and a team of administration staff.

The practice contracts with NHS England to provide General Medical Services (GMS) to the patients registered with the practice.

The practice has opted out of providing out-of-hours services to their patients. This service is provided by a

registered out of hours provider (BARDOC). The practice website provides patients with details of how to access medical advice when the practice is closed. Patients are also provided with these details via a recorded message when they telephone the practice outside the usual opening times.

Why we carried out this inspection

We inspected this service as part of our new comprehensive inspection programme on 07 May 2015. At this inspection, within the key question safe, the inspection had identified improvements that the practice should make.

This inspection was a planned focused inspection to check whether the provider had taken the required action by the current legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

How we carried out this inspection

Following the inspection on 07 May 2015 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 a range of documentary evidence to demonstrate how they had improved their practices in relation to the 'safe' domain.

Detailed findings

We carried out an announced visit on 07 October 2016. A CQC inspector reviewed and analysed the evidence provided by the practice and made an assessment of this against the regulations.

Are services safe?

Our findings

Overview of safety systems and processes

The practice was previously inspected on 07 May 2015. 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, there were issues identified that the practice should make improvements on.

In line with agreed timescales the practice supplied a range of documentary evidence that demonstrated how they had improved in relation to the overview of safety systems and processes since the last inspection:

- The practice had implemented a new recruitment procedure and had recently carried out DBS checks for all staff members. However, there was a new member of the clinical team who had started employment before a valid DBS check had been performed. The staff member was also working without indemnity insurance. The practice informed us that they would ensure the member of staff would not have any further patient contact before the DBS and indemnity insurance were in place.
- We saw evidence that there was a system in place for ensuring the medicines within the doctor's bag and the medical emergency kit were being routinely checked.

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. We did not review this key question.

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.

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.

Are services well-led?

(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. We did not review this key question.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services	Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed The practice had not ensured that recruitment checks had been fully carried out prior to employment. This included a disclosure and barring service check for a clinical member of staff. The practice had also failed to ensure that medical indemnity cover was in place for a member of the clinical team prior to employment.
Surgical procedures Treatment of disease, disorder or injury	