

Knowsley Medical Centre

Quality Report

9-11 Knowsley Street

Bury

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Date of inspection visit: 17/11/2016

Date of publication: 15/12/2016

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

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Overall summary

Letter from the Chief Inspector of General Practice

This is a focused inspection of Knowsley Medical Centre for two areas within the key question safe.

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

The practice was previously inspected on 27 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, two areas were identified as requiring improvement, as the practice was not meeting the legislation at that time:

- Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment. 1. Care and treatment must be provided in a safe way for service users. 2. Without limiting paragraph (1), the things which a registered person must do to comply with that paragraph include—e. ensuring that the equipment used by the service provider for providing care or treatment to a service user is safe for such use and is used in a safe way;

- We noted checks had not been carried out on portable electrical equipment and the calibration of medical equipment was over 12 months out of date.
- Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed:
- People who use services and others were not protected against the risks associated with poor recruitment procedures.

During the inspection on 17 November 2016 the practice showed us evidence which demonstrated they are now meeting the requirements of Regulation 12 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The practice also provided evidence of other improvements made following our previous inspection including:

- An improved system for inviting at risk patients to attend for annual flu vaccinations
- A systematic approach is in place to ensuring the national QOF outcomes are achieved including those for diabetic patients.
- An improved system is in place for managing medicines and consumables such as needles to ensure there is sufficient stock and all stock is in date.

Summary of findings

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.

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

Evidence reviewed during the inspection included, checks on equipment such as calibration. We also saw a sample of personnel files showing appropriate recruitment checks had been carried out and checks on professional registration.

Good



Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

Good



Are services caring?

The practice is rated as good for providing caring services.

This rating was given following the comprehensive inspection 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

Good



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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

Good



Are services well-led?

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

This rating was given following the comprehensive inspection 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

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 27 May 2015. A copy of the full report following this inspection is available on our website

<http://www.cqc.org.uk/location/1-565517492>

Good



Summary of findings

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 27 May 2015.

A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/location/1-565517492>

Knowsley Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Inspector reviewed and analysed the documentary evidence provided during the inspection and observed the environment.

Background to Knowsley Medical Centre

Knowsley Medical Centre provides primary medical services in Bury from Monday to Friday.

The practice is open between 8.00am – 6.30pm Monday to Friday. Appointments with a GP are generally available depending on which GP is in surgery between 8:40am to 12 noon and 2pm to 5:30 pm.

Knowsley Medical Centre is situated within the geographical area of Bury Clinical Commissioning Group (CCG).

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

Knowsley Medical Centre is responsible for providing care to 4600 patients. Patients are from the third most deprived decile. Approximately 35% of patients were of black and minority ethnic (BME), mainly Pakistani heritage.

The practice consists of three GPs, two female and one male, a practice nurse and health care assistant. The practice was supported by a practice manager, receptionists and secretaries.

When the practice is closed patients are directed to the out of hours service by calling 111.

Why we carried out this inspection

We inspected this service as part of our new comprehensive inspection programme on 27 May 2015. At this inspection, within the key question safe, two areas were identified as requiring improvement, as the practice was not meeting the legislation at that time: Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment. Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

This inspection was a planned focused review to check whether the provider had taken the required action and was now meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, now amended 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 27 May 2015 the practice supplied an action plan with timescales telling us how they would ensure they met Regulation 12 and 19 HSCA 2008 (Regulated Activities) Regulations 2010 Management of medicines.

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 medicines management

Detailed findings

A CQC inspector reviewed and analysed the documentary evidence submitted 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 27 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, two areas were identified as requiring improvement, as the practice was not meeting the legislation at that time:

- Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment. 1. Care and treatment must be provided in a safe way for service users. 2. Without limiting paragraph (1), the things which a registered person must do to comply with that paragraph include—e. ensuring that the equipment used by the service provider for providing care or treatment to a service user is safe for such use and is used in a safe way;
- We noted checks had not been carried out on portable electrical equipment and the calibration of medical equipment was over 12 months out of date.
- Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed:
- People who use services and others were not protected against the risks associated with poor recruitment procedures.

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.

We saw evidence that showed the practice had procedures in place for monitoring equipment and staff safety and appropriate staff recruitment checks were carried out for example:

- An annual programme of calibration was in place and we noted equipment had been calibrated in 2015 and 2016.
- A programme of PAT testing was in place in line with good practice guidance. All equipment checked had been tested.
- We were provided with evidence that checks had been carried out to ensure clinical staff were registered with their professional bodies. We notes an annual programme of checks was now in place
- We reviewed personnel files for newly appointed staff and saw appropriate checks had been carried out such as, proof of identification, qualifications, registration with the appropriate professional body and the appropriate checks through the DBS.

The chaperone policy and procedure had been updated and training provided to all staff acting as chaperones to ensure they were following good practice guidance. All staff acting as chaperones had DBS checks carried out.

Are services effective?

(for example, treatment is effective)

Our findings

Please note this is a focused follow up 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/location/1-565517492>

Are services caring?

Our findings

Please note this is a focused follow up 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/location/1-565517492>

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

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

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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 follow up of safety systems and processes within the key question safe. We did not review this key question.

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