

Dr Alistair (Medical Services) Limited

Quality Report

Dr Alistair (Medical Services) Limited Golborne Health Centre Kidglove Road Golborne WA3 3GS The branch surgery address is: Ashton Clinic Queens Road Ashton in Makerfield Wigan

WN4 8LB

Tel: 01942 481580

Website: http://dralistair.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?	Good	
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

We carried out an announced comprehensive inspection at Dr Alistair (Medical Services) Limited on 3 August 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 3 August 2016 inspection can be found by selecting the 'all reports' link for Dr Alistair (Medical Services) on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 20 September 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 spoke with staff and 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.
- The practice had ensured that a Disclosure and Barring Service (DBS) check or risk assessment was in place for staff who carried out the role of a chaperone.
- Staff had received training in infection prevention and control (IPC), and there was a member of staff with a specific IPC responsibility.
- All staff had received training in safeguarding vulnerable adults.
- The practice reviewed the management system of blank prescription forms and introduced a system to manage their issue and distribution across the practice.
- There was improved availability of routine appointments.
- Practice procedures and guidance were reviewed and updated.

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 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.

- The practice had ensured that a Disclosure and Barring Service (DBS) check or risk assessment was in place for staff who carried out the role of a chaperone.
- Staff had received training in infection prevention and control (IPC), and there was a member of staff with a specific IPC responsibility.
- All staff had received training in safeguarding vulnerable adults.
- The practice reviewed the management system of blank prescription forms and introduced a system to manage their issue and distribution across the practice.

Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection 3 August 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 caring?

The practice is rated as good for providing caring services.

This rating was given following the comprehensive inspection 3 August 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 responsive to people's needs?

The practice is rated as good for providing responsive services.

This rating was given following the comprehensive inspection 3 August 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 spoke with staff and 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 improved availability of routine appointments.

Are services well-led?

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

This rating was given following the comprehensive inspection 3 August 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.

• Practice procedures and guidance were regularly reviewed and updated.



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	population	gioups and	vviiat vvc	IOGIIG

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 3 August 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 3 August 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 3 August 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 3 August 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 3 August 2016. 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 3 August 2016. A copy of the full report following this inspection is available on our website.

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





Dr Alistair (Medical Services) Limited

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 Dr Alistair (Medical Services) Limited

Dr Alistair (Medical Services) Limited, provides primary care services to its registered list of approximately 6100 patients. The main location of the practice is situated in Golborne and the branch surgery in Ashton-in-Makerfield.

Both the main and branch surgery are in facilities with disabled access. There are parking facilities, including disabled spaces, and are both accessible by local transport links

There are five GPs (three male and two female). There is an extensive nursing team that includes advanced nurse practitioners, a practice nurse and a team of healthcare assistants (assistant practitioners). The senior GP is the registered manager. There are also two assistant practice managers and a finance administrator with supporting reception and administration staff. The practice is a training practice for trainee GPs. Staff work across both sites to meet the needs of the patient population.

The age profile of the practice is very similar to the CCG and national averages. The male life expectancy for the area is

78 years compared with the CCG averages of 77 years and the national average of 79 years. The female life expectancy for the area is 82 years compared with the CCG averages of 81 years and the national average of 83 years.

The practice delivers commissioned services under the Alternative Provider Medical Services (APMS) contract with NHS England and is part of Wigan Clinical Commissioning Group. It offers direct enhanced services facilitating timely diagnosis and support for people with dementia, patient participation, rotavirus and shingles immunisation and unplanned admissions.

The practice is open from 8am to 8pm from Monday to Friday and 8am to 12pm on a Saturday.

Patients requiring a GP outside of normal working hours are advised to contact the surgery and they will be directed to the local out of hours service which is provided by Bridgewater NHS Foundation Trust –through NHS 111. Additionally patients can access GP services in the evening and on Saturdays and Sundays through the Wigan GP access alliance at locations across Wigan Borough.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Alistair (Medical Services) Limited on 3 August 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 required 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.

Detailed findings

We undertook a follow up focused inspection of Dr Alistair (Medical Services) Limited on 20 September 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 3 August 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 20 September 2017. A CQC inspector spoke with staff, 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 3 August 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of infection control, Disclosure and Barring Service (DBS) check or risk assessment for staff who carry out the role of a chaperone and safeguarding training.

These arrangements had significantly improved when we undertook a follow up inspection on 20 September 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- The findings of the last inspection showed the provider had not ensured that only staff who have completed a DBS check undertake chaperone duties or made sure there is a risk assessment to explain the reasoning for not undertaking a DBS check. On this inspection we saw the practice had ensured that a Disclosure and Barring Service (DBS) check was in place for all staff who carried out the role of a chaperone. It was now part of the practice policies and procedures that all staff have a DBS check no matter their role.
- On the previous inspection the practice nurse was nominated as the infection control clinical lead but had

been absent for a prolonged period and no other member of staff was covering these duties. We also found there was an infection control protocol in place however staff had not received up to date training. On this inspection we saw that all staff had received training in infection prevention and control (IPC), and there was a member of staff with a specific IPC responsibility. The practice had reviewed its policy for IPC and introduced an infection control team. There was a GP with overall responsibility, two IPC coordinators and also hand hygiene and cleaning coordinators. The practice had worked with the clinical commissioning group (CCG) IPC lead to implement this piece of work.

- We noted at the previous inspection that not all staff
 had undertaken safeguarding vulnerable adults training.
 However, at this inspection we saw evidence that all
 staff had received training in safeguarding vulnerable
 adults.
- On the previous inspection we saw that blank prescription forms and pads were securely stored, however there was no system in place to monitor their use. On this inspection we saw evidence the practice had reviewed the management system of blank prescription forms and introduced a system to manage their issue and distribution across the practice.



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



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. However we did review elements of 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

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

Access to the service

• On the previous inspection patients told us they were able to get emergency appointments when they needed them but at times could not get a routine appointment at a convenient time. However on this inspection we noted that there was improved availability of routine appointments. The practice had introduced a system called "the navigation appointment system". The practice had trained staff to advise patients of other services that were available to them, including the local pharmacy for some conditions and the walk in centre. This system was implemented in October 2016 and recently reviewed and evaluated. It had enabled the practice to increase the number of routine appointments available to patients. This had also increased the opportunities for continuity of care as patients can pre book appointments with the same GP.



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. However we did review elements of 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

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.

Governance arrangements

• On the previous inspection practice specific policies were implemented and were available to all staff but some were in need of review. However on this inspection we noted that practice procedures and guidance were regularly reviewed and updated, and also readily available to all staff.