

Peel Hall Medical Practice

Inspection report

Forum Health
Simonsway, Wythenshawe
Manchester
M22 5RX
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Date of inspection visit: 29 July 2021
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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

Requires Improvement



Are services safe?

Good



Are services effective?

Requires Improvement



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 Peel Hall Medical Practice on 27 and 29 July 2021. Overall, the practice is rated as Requires Improvement.

Safe - Good

Effective – Requires Improvement

Caring - Good

Responsive – Requires Improvement

Well-led - Good

Following our previous inspection on 9 November 2020, the practice was rated requires improvement overall and in the safe and well-led key questions; the practice was rated inadequate in the effective key question and good in the caring and responsive key questions.

The full reports for previous inspections can be found by selecting the “all reports” link for Peel Hall Medical Practice on our website at www.cqc.org.uk

Why we carried out this inspection;

The practice had been previously placed in special measures on 6 November 2019, the practice was subsequently inspected on 6 February 2020 to ensure that warning notices issued at the previous inspection had been complied with. In November 2020 we re-inspected the service and found that although improvements were made the practice remained inadequate in the effective key question and in special measures as insufficient improvements had been made. We were provided with action plans detailing how they were going to make the required improvements throughout this process. This inspection was to check the improvements made to date.

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 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
- Requesting evidence from the provider
- A short site visit

Our findings;

Overall summary

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 requires improvement overall and in the effective and responsive key questions and in all the population groups overall. We have rated the practice good in the safe, caring and well-led key questions.

We found that:

- The practice was rated good for providing safe services because we found that the practice had embedded new systems put in place to address concerns identified at the previous inspection such as the implementation of the new significant event process and oversight of risk.
- The practice was rated requires improvement for providing effective services because they were able to demonstrate progress had been made from the previous inspections. They had developed plans and had taken action to begin to address their lower than average performance and provided evidence that this had led to improvements beginning to be made.
- The practice was rated good for providing caring services because we found that patient satisfaction was generally high and that in areas where this was not as high, the practice had further surveyed their patients, analysed the results and formed action plans to address it.
- The practice was rated requires improvement for providing responsive services because although they had been proactive in trying to understand why patient satisfaction was lower and had surveyed patients independently it remained low. Unverified data supplied by the practice and publicly published data agreed that although satisfaction was improving many patients felt that it did not meet their needs.
- The practice was rated good for providing well-led service because we found that the practice had continued to build on improvements in all areas and had established systems and processes that were still being embedded but were working as intended.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.

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

- Reduce prescribing and review processes in areas of antibiotics, hypnotics, pain relief and psychotropic medicines.
- Develop formal supervision processes for the clinical pharmacist staff members.
- Implement plans to review clinical systems to ensure that historic safety alerts are considered during prescribing decisions and further embed systems to ensure blood results are actioned in a timely manner.
- Improve uptake of childhood immunisations and cervical screening in line with national targets.
- Further develop the current process for the documentation and recording of patients DNACPR.
- Review and collate data to demonstrate continued improvements with regards to patient satisfaction and effectiveness of actions taken.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

I am taking this service out of special measures. This recognises the significant improvements made to the quality of care provided by the service.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Overall summary

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 spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Peel Hall Medical Practice

Peel Hall Medical Practice is situated at;

Forum Health,

Simonsway,

Wythenshawe,

M22 5RX.

The service is housed in a modern purpose-built health and community services building and offers ground floor access and facilities for disabled patients and visitors. There is good access to public transport including the Metrolink and patient parking is available on the adjacent car park.

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

The practice is part of the Manchester Health and Social Care (MHSC) and provides services under a general medical service (GMS) contract with their Clinical Commissioning Group (CCG).

The practice is part of a wider primary care network (PCN) of GP practices known as the South Manchester Primary Care Network.

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

According to the latest available data, the ethnic make-up of the practice area is 86% White, 5.3% Asian, 3.9% Mixed, 3.7% Black, and 1.1% Other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There were approximately 9,431 patients on the practice register at the time of our inspection. Services are provided by four male and three female GPs. The practice also employs a clinical pharmacist, two nurses (one of whom is an independent prescriber) and one assistant practitioner.

The clinical team are supported by a practice manager, assistant practice manager, two medical secretaries and three administration staff in addition to a team of receptionists.

On-line services include appointment booking and ordering repeat prescriptions. The practice is a teaching practice for medical students from Manchester University.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered an appointment as and when they are available.

Extended access is provided locally by Manchester Extended Access Service (MEAS), where late evening and weekend appointments are available. Out of hours services are provided by GoToDoc.