

Unsworth Group Practice

Quality Report

Peter House Surgery
Captain Lees Road
Westhoughton
Bolton
BL5 3UB
Tel: 01942 812525
Website: www.unsworthgroup.com

Date of inspection visit: 29 December 2016
Date of publication: 23/01/2017

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

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	6
What people who use the service say	8

Detailed findings from this inspection

Our inspection team	9
Background to Unsworth Group Practice	9
Why we carried out this inspection	9
How we carried out this inspection	9
Detailed findings	11

Overall summary

Letter from the Chief Inspector of General Practice

This is a focused desk top review of evidence supplied by Unsworth Group Practice for one area within the key question safe.

After reviewing evidence supplied to support this inspection process we found the practice to be good in providing safe services. Overall, the practice is rated as good.

The practice was previously inspected on 17 November 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, recruitment was identified as requires improvement, as the practice was not meeting the legislation at that time. The area where the practice was told they must make improvement was as follows :

Regulation 19 (1)(3)(a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed :

- Recruitment checks were carried out and the staff files we reviewed showed that appropriate recruitment checks had been undertaken prior to employment. For example, proof of identification, qualifications, registration with the appropriate professional body where appropriate. However no evidence was available to demonstrate some of the nurses and phlebotomy staff had received Disclosure and Barring Service (DBS) checks. Not all of the staff trained to be chaperones had received a DBS check. There was no evidence of a risk assessment being conducted in relation to the need to (or not to) conduct DBS checks on the remaining practice staff. Whilst we acknowledge the provider had initiated the process to conduct DBS checks on some staff the provider must assess the different responsibilities and activities of all staff to determine if they are eligible for a DBS check. Where the decision has been made not to carry out a DBS check on staff, the practice should be able to give a clear rationale as to why.

The practice has submitted to the CQC, a range of documents which demonstrates they are now meeting

Summary of findings

the requirements of Regulation 19 (1)(3)(a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed.

In addition there were areas where the practice were told they should make improvements. These were as follows :

- The provider should take action to review their arrangements for assessing the risk from legionella.
- Clinical staff had received training in relation to consent and mental capacity. The provider should

extend this training (at the appropriate level) to other members of the practice team to maximise the support provided to patients in relation to consent to care and treatment.

The practice has submitted to the CQC, a range of documents which demonstrates they have made these suggested improvements.

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?

Previously the practice was rated as requires improvement for providing safe services and this focused inspection was carried out to check that the improvements had been made. A copy of the full report of the previous inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

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 that it had improved its procedures in relation to the overview of safety systems and processes since the last inspection.

Evidence submitted where the practice was told they must make improvements included :

- The practice recruitment policy dated 2016 which outlined that all staff (clinical and non-clinical) should be Disclosure and Barring Service (DBS) checked before commencement of position.
- A spreadsheet listing all staff and their associated DBS numbers, evidencing that all staff members are now DBS checked.

In addition we previously identified that the practice should :

- Take action to review their arrangements for assessing the risk from legionella.
- Provide all staff with awareness in relation to consent and mental capacity.

The practice submitted evidence that they had made improvements in this area. This included evidence that a legionella assessment had been undertaken and staff had received guidance and training for assessing patients under the Mental Capacity Act 2005.

Good



Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



Are services caring?

The practice is rated as good for providing caring services.

Good



Summary of findings

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

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 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



Are services well-led?

The practice is rated as good for providing well led services.

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

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 providing services for older people.

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



People with long term conditions

The practice is rated as good for providing services for patients with long term conditions.

This rating was given following the comprehensive inspection 17 November 2015 A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



Families, children and young people

The practice is rated as good for providing services to families, children and young people.

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



Working age people (including those recently retired and students)

The practice is rated as good for services to working age people (including those recently retired and students)

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



People whose circumstances may make them vulnerable

The practice is rated as good for providing services to people whose circumstances may make them vulnerable.

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



Summary of findings

People experiencing poor mental health (including people with dementia)

The practice is rated as good for providing services to patients experiencing poor mental health (including people with dementia).

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Good



Summary of findings

What people who use the service say

As part of this focused desk top review on 29 December 2016 we did not speak to any people who used the service.

This rating was given following the comprehensive inspection 17 November 2015. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Unsworth Group Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Inspector reviewed and analysed the documentary evidence submitted.

Background to Unsworth Group Practice

Unsworth Group Practice is a GP practice. The main surgery is located in Westhoughton and there is a branch surgery situated in the Blackrod area of Bolton. At the time of this inspection there were 20292 patients registered with the practice. Unsworth Medical Practice is the largest GP practice in Bolton. The practice population experiences lower levels of income

deprivation than the practice average across England. There is a similar proportion of patients above 65 years of age (17.4%) to the practice average across England (16.9%). The practice has a similar proportion of patients under 18 years of age (14.5%) than the practice average across

England (14.8%). 54.3 per cent of the practice's patients have a longstanding medical condition compared to the practice average across England of 54%.

At the time of this inspection the practice clinical team comprised of 11 GPs, a nursing team of five, and an assistant practitioner and two phlebotomists. The clinical staff were supported by the practice manager and a large administration/reception team.

The opening hours and appointment times of the main surgery at Westhoughton and the branch surgery at Blackrod are as follows :

Westhoughton Surgery

The opening times of the surgery are Monday 8am to 6.30pm, Tuesday and Wednesday 8am to 8.30pm, Thursday and Friday 8am to 6.30 pm. The practice is closed on Saturday and Sunday. GP appointments were provided in the morning, afternoon and early evening each day and late appointments were provided on Tuesdays and Wednesdays. Appointment times are displayed in the reception area and on the practice website.

Blackrod Surgery

The opening times of the surgery are Monday to Friday 8am to 6.30pm with late appointments offered on Wednesdays up to 8.30pm at the Westhoughton Branch exclusively to Blackrod patients. The practice is closed on Saturday and Sunday. GP appointments were provided in the morning, afternoon and early evening each day. Appointment times are displayed in the reception area and on the practice website.

The practice has opted out of providing out-of-hours services to their patients. In case of a medical emergency outside normal surgery hours advice was provided by Bury and Rochdale Doctors On Call (BARDOC). The practice contracts with NHS England to provide Personal Medical Services (PMS) to the patients registered with the practice.

Why we carried out this inspection

We initially inspected this service as part of our new comprehensive inspection programme on 17 November 2015. At that inspection, within the key question safe, recruitment was identified as 'requires improvement', as the practice was not meeting the legislation at that time Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed :

Detailed findings

This inspection on 29 December 2016 was a planned focused desk top 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 17 November 2015 the practice supplied an action plan with timescales telling us how they would ensure Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed :

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 staffing.

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

Previously the practice was rated as requires improvement for providing safe services and this focused inspection was carried out to check that the improvements had been made. A copy of the full report of the previous inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

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 that it had improved its practices in relation to the overview of safety systems and processes since the last inspection.

Evidence submitted where the practice was told they must make improvements included :

- The practice recruitment policy dated 2016 outlined that all staff (clinical and non-clinical) should be Disclosure and Barring Service (DBS) checked before commencement of position.
- There was a spreadsheet listing all staff and their associated DBS numbers, evidencing that all staff members are now DBS checked.

In addition we previously identified that the practice should :

- Take action to review their arrangements for assessing the risk from legionella.
- Provide all staff with awareness in relation to consent and mental capacity.

The practice submitted evidence that they had made improvements in this area. This included evidence that a legionella assessment had been undertaken and staff had received guidance, awareness and training for assessing patients under the Mental Capacity Act 2005.

Are services effective?

(for example, treatment is effective)

Our findings

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

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Are services caring?

Our findings

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

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

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

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

Are services well-led?

Good

l

(For example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

Our findings

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

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf

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

This rating was given following the comprehensive inspection 17 November 2015.. A copy of the full report following that inspection is available on our website http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3703.pdf