

Langbank Medical Centre

Inspection report

Broad Lane
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Liverpool
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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?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Good



Overall summary

We carried out an announced focused inspection at Langbank Medical Centre on 3 December 2019. We carried out an inspection of this service due to the length of time since the last inspection and due to changes in leadership at the practice.

Following our Annual Regulatory Review of the information available to us, including information provided by the practice, we planned to focus our inspection on the following key questions: Effective, Caring and Well-led. During the inspection we included the Safe and Responsive key questions as a result of our findings on the day.

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.

We rated the practice as requires improvement for population groups in the Effective key question and good for population groups in the Responsive key question.

We rated the practice as **requires improvement** for providing Safe services because:

- The fire risk assessment had not been fully addressed and was not fully adapted to the current fire detection and warning system.
- The system for managing patient blood results in a timely manner was not comprehensive.

We rated the practice as **requires improvement** for providing Effective services because:

- The system for ensuring staff training was not comprehensive.
- The practice did not carry out effective quality improvement activity to review the effectiveness and appropriateness of the care provided.

We rated the practice as **Good** for providing Caring, Responsive and Well-led services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Access to services was monitored and changes made as a result of listening to patients and staff feedback.
- Staff felt well supported. The practice sought the views of patients and staff and acted on them.

The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Ensure all premises and equipment used by the service provider are fit for use.
- Ensure persons employed in the provision of the regulated activity receive the appropriate training to enable them to carry out their duties.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements:

- All information pertaining to significant events should be retained in one place for ease of reference.
- The health and safety risk assessment should be more comprehensive and identify all risks and actions to be taken.
- Formalise the system for reviewing the practise of clinical staff to ensure consultations, referrals and prescribing are appropriate.
- Review uncollected prescriptions more frequently and record the sequential numbers on written prescriptions to enable an audit trail.
- A full record of safety alerts received, and action taken to be maintained.
- Formalise the care plans for patients.
- The practice should improve cancer screening uptake.

Overall summary

- The practice website to be updated with information about support groups and services and more information about the role and remit of the advanced nurse practitioners to be made available for patients.
- The processes to keep clinicians up to date and share learning should be reviewed,

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

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.
The team included a GP specialist advisor.

Background to Langbank Medical Centre

Langbank Medical Centre is located in Broad Lane, Norris Green, Liverpool, Merseyside. The provider is Langbank Medical Centre who 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.

Langbank Medical Centre is situated within the NHS Liverpool Clinical Commissioning Group (CCG) and provides services to approximately 4,747 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

At the practice there is a GP partner and regular locum GPs who provide regular sessions on a part-time basis. One salaried advanced nurse practitioner and a locum advanced nurse practitioner who work full-time and two full-time practice nurses, one of whom is currently undertaking prescribing training. A pharmacist employed through the Primary Care Network (PCN) is at the practice

for four hours, five days a week. The practice employs a pharmacist and a health care assistant who are currently on planned absence from the practice. The practice is supported by reception and administrative staff and a practice manager.

The practice provides training to third year medical students and physician associates from Liverpool university. They also take part in the Liverpool apprentice scheme, which involves providing training to one student a year in reception and administration duties.

The National General Practice Profile states that 96% of the practice population is from a white background. Information published by Public Health England, rates the level of 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. The majority of patients are within the aged 15 – 44 age group.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
The provider did not have a comprehensive system for ensuring blood test results were reviewed and actioned in a timely manner.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment
The provider had not ensured the fire risk assessment was comprehensive and actions from it had been undertaken.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance
The practice did not carry out effective quality improvement activity to review the effectiveness and appropriateness of the care provided.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing
The system for ensuring staff training was not comprehensive.