

# Dearden Avenue Medical Practice

## Quality Report

1A Dearden Avenue  
Little Hulton  
Manchester M38 9GH  
Tel: 0161 7035350  
Website: none at time of inspection

Date of inspection visit: 16 February 2017  
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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?

Requires improvement



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 was a focused inspection of Dearden Avenue Medical Practice in one area within the key question safe. The evidence was reviewed at Dearden Avenue Medical Practice.

At this inspection we found that although the practice had made improvements in some areas other improvements were still required in providing safe services. Overall, the practice is rated as good.

The practice was previously inspected on 28 October 2014. The inspection was a comprehensive inspection under the Health and Social Care Act 2008. At that inspection, the practice was rated good overall but required improvement for providing safe services.

Our key findings were as follows:

- At the inspection on 16 February 2017 we reviewed a range of documents and found that some of the required improvements had been made.

- Recruitment folders were in place for staff and all staff had an up to date Disclosure and Barring Service (DBS) check in place.
- The practice was holding regular team meetings and minutes of these were available.
- We found that the practice had a system in place for documenting significant events but there was an example of a significant event not being recorded.
- Infection control policies were in place but were not being followed and staff members struggled to locate these when we requested them.

The areas where the provider must make improvements are:

- Ensure all significant events are reported.
- Ensure recruitment files contain relevant information as stated in schedule three of the Health and Social Care Act.

The areas where the provider should make improvements are:

# Summary of findings

- All policies should be followed and easily accessible to staff.

**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 still rated as requires improvement for providing safe services.

On inspection we reviewed documentary evidence to demonstrate how they had made some improvements to their practices in relation to their recruitment process. All staff members now had a recruitment file in place and all staff had a current disclosure and barring service (DBS) check. Some staff members were missing required information as stated in schedule 3 of the Health and Social Care. For example, proof of identity.

The practice had a system in place for recording and reporting significant events but we found that there was an example of a significant event not being recorded.

Infection control policies were in place but there was evidence of them not being followed and staff members struggled to locate some of the infection control policies when we requested them.

Requires improvement



### Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection 28 October 2014. A copy of the full report following this inspection is available on our website. <http://www.cqc.org.uk/search/services/doctors-gps>

Good



### Are services caring?

The practice is rated as good for providing caring services.

This rating was given following the comprehensive inspection 28 October 2014. A copy of the full report following this inspection is available on our website. <http://www.cqc.org.uk/search/services/doctors-gps>

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 28 October 2014. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



# Summary of findings

## Are services well-led?

The practice is rated as good for being well-led. This rating was given following the comprehensive inspection 21 May 2015 but at that time there were areas identified where the provider should make improvements.

We found evidence that positive action had been taken to further strengthen this area that included evidence that regular team meetings were occurring and discussions were being documented.

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 28 October 2014. 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 28 October 2014. 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 28 October 2014. 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 28 October 2014. 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 28 October 2014. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

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 28 October 2014. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

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 28 October 2014.

A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

## Areas for improvement

### Action the service **MUST** take to improve

- Ensure all significant events are reported.
- Ensure recruitment files contain relevant information as stated in schedule three of the Health and Social Care Act.

### Action the service **SHOULD** take to improve

- All policies should be followed and easily accessible to staff.



# Dearden Avenue Medical Practice

## 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 Dearden Avenue Medical Practice

Dearden Avenue Medical Practice is situated in the Little Hulton area of Salford. At the time of this inspection we were informed 2260 patients were registered with the practice. The practice population experiences higher levels of income deprivation affecting children and older people than the practice average across England. There are also higher levels of unemployment among the working age population than the practice average across England. A lower proportion of the practice's patients were above 65 years of age (10.1%) than the practice average across England (17.2%). Also 26.7% of the practice patients are under the age of 18 years compared to the average across England (20.7%).

The practice employs two female GPs to provide general medical services to registered patients at the practice. The GPs are supported in providing clinical services by a practice nurse (female) who worked part time. The practice also employs a team of administration staff including a part time practice manager. The practice delivers commissioned services under the Personal Medical Services (PMS) contract.

Dearden Avenue Medical Practice has opted out of providing out-of-hours services to their patients. This service is provided by a registered out of hours provider. Prominently displayed information in the patient waiting area provides patients with details how to contact the out of hours provider (Salford Royal NHS Foundation Trust). Patients are also provided with these details via a recorded message when they telephone the practice outside the usual opening times.

## Why we carried out this inspection

We inspected this service as part of our new comprehensive inspection programme on 28 October 2014. At this inspection, within the key question safe, the inspection had identified improvements that the practice should make.

This inspection was a planned focused inspection to check whether the provider had taken the required action 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 28 October 2014 the practice supplied an action plan with appropriate timescales telling us how they would ensure they made the relevant improvements.

## Detailed findings

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 the 'safe' domain.

We carried out an announced visit on 16 February 2017. A CQC inspector reviewed and analysed the evidence provided by the practice 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 28 October 2014. 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, there were issues identified that the practice should make improvements on.

On inspection we reviewed documentary evidence to demonstrate how they had made some improvements in relation to the overview of safety systems and processes since the last inspection.

- The practice had ensured that all staff were Disclosure and Barring Service (DBS) checked when starting employment. As part of the inspection we checked all staff files which included a newly recruited member of the team. We found that some relevant recruitment information was in place and references were found to

have been requested for newly employed staff members. All staff members had received a DBS check. However, we found that recruitment files did not contain identification checks.

- We looked at significant events and while the practice had an effective system in place for documenting significant events and sharing lessons, we found an example of a significant event not being recorded. We discussed this issue with the practice who agreed that the significant event should have been documented and that they would ensure in the future that all events are reported.
- We looked at infection control within the practice and while we found the practice to be clean there was a lack of documentation to demonstrate that practice policies were being followed. For example, there was no cleaning log being completed by staff even though the infection control policy stated that the log should be completed to document that the practice has been cleaned. Practice staff also struggled to locate policies when they were requested.

# 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. 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 website <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. 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 well-led?

Good 

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

## Our findings

### Leadership and culture

The practice was previously inspected on 21 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 well-led, there were issues identified that the practice should make improvements on.

In line with agreed timescales the practice supplied a range of documentary evidence that demonstrated how they had improved in relation to leadership and culture since the last inspection.

- The practice provided us with minutes of meetings to show that team meetings were routinely occurring and the content of team meetings was being documented and any learning disseminated to staff members.

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>

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

#### Regulated activity

Diagnostic and screening procedures  
Family planning services  
Surgical procedures  
Treatment of disease, disorder or injury

#### Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance  
**The provider had not ensured that all significant events were documented.**

#### Regulated activity

Diagnostic and screening procedures  
Family planning services  
Surgical procedures  
Treatment of disease, disorder or injury

#### Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed  
**The provider could not evidence that the relevant recruitment checks for staff had been confirmed prior to employment as set out in schedule 3 of the Health and Social Care Act.**