

Manor Park Medical Practice

Inspection report

573 Melton Road Thurmaston Leicester LE4 8EA Tel: 01162696765 www.manorparkmedicalpractice.co.uk

Date of inspection visit: 17 November 2022 Date of publication: 24/01/2023

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?	Inspected but not rated	
Are services responsive to people's needs?	Inspected but not rated	
Are services well-led?	Good	

Overall summary

The provider took over the contract for the practice at Manor Park Medical Practice on 25 January 2022.

We carried out an announced comprehensive inspection at Manor Park Medical Practice on 17 November 2022 to review their progress since taking over the contract at the practice. Overall, the practice is rated as requires improvement.

Safe - good

Effective - requires improvement,

Caring – inspected but not rated

Responsive - inspected but not rated

Well-led - good

We found that the provider had made significant improvements and addressed most areas of concern found at the previous inspection, when the services were being provided by previous providers.

Due to GP patient survey data being collected during the transitional period of the two providers, the key questions of caring and responsive have not been rated. Additionally the current provider took over the running of the practice at short notice and has focussed on addressing immediate patient risk.

The full reports for previous provider inspections can be found on our website at www.cqc.org.uk.

Why we carried out this inspection

We carried out this inspection as it is a new provider of a practice which was previously in special measures. We reviewed all key questions as part of the inspection.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

Our findings

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
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Overall summary

• information from the provider, patients, the public and other organisations.

We found that:

- The provider had implemented systems and processes in order to ensure patients were treated safely.
- A significant backlog of work had been reviewed and assessed to ensure patients were receiving safe care and treatment.
- The practice had recruited and trained staff to become competent to carry out appointments effectively.
- The provider was open and honest about work which had been completed and work which remained outstanding. They had prioritised patients based on risks to them.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- The practice had implemented governance systems to ensure care and treatment provided was appropriate and effective for their patients.
- A new management structure and lead roles were implemented to support staff through the transitioning phase. The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

- Improve documentation in relation to reviewing patients on the safeguarding register.
- Take steps to reduce the number of patient records which require summarising.
- Continue to review patients whose reviews are outstanding for example those with asthma and chronic kidney diesease.

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 that have been made to the quality of care provided by this service.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector and a second CQC inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor and completed clinical searches and records reviews without visiting the location.

Background to Manor Park Medical Practice

Manor Park Medical Practice is located in Leicester at:

577 Melton Road

Thurmaston

Leicestershire

LE4 8EA

The practice has a branch surgery at:

122 Parker Drive

Leicester

Leicestershire

LE4 0JF

Both sites were visited as part of the inspection.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, surgical procedures and treatment of disease, disorder or injury and surgical procedures. These are delivered from both sites.

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the Leicester and Leicecestershire Integrated Care Board and delivers General Medical Services (GMS) to a patient population of about 14,500. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices known as the Millennium Primary Care network (PCN).

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the third lowest decile (three of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data from 2015, the ethnic make-up of the practice area is 54% white, 36% Asian, 5% Black. 3% Mixed and 2% Other.

There is a team of four GP partners, five salaried GPs who provide cover at both practices. At the time of our inspection there was three clinical pharmacists who were involved in reviewing patients' medicines. The practice has a team of two advanced nurse practitioners, four nurses who provide nurse led clinics for long-term condition of use of both the main and the branch locations. The nurses were supported by two phlebotomists. The GPs are supported at the practice by a team of reception and administration staff. The practice manager and assistant practice manager are available at both locations to provide managerial oversight.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally as part of the PCN, where late evening and Saturday appointments are available. Out of hours services are provided by NHS 111.