

Dr PF Mullen's Practice

Inspection report

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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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced inspection at Dr PF Mullen's Practice on 22 October 2019. We carried out an inspection of this service due to the length of time since the last inspection. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions:

- Effective
- Well Led

Because of the assurance received from our review of information we carried forward the ratings for the following key questions:

- Safe
- Caring
- Responsive

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 received 20 CQC feedback cards about patient care and experience, these cards were given to patients before and during the inspection. Comments made by patients were extremely positive about the services provided and the practice staff.

We have rated this practice as **Good** overall and good for all population groups.

We rated the practice as **Good** for providing effective services because:

- Patients' needs were assessed, and care and treatment were delivered in line with current legislation, standards and evidence-based guidance.
- The practice had a comprehensive programme of quality improvement activity and routinely reviewed the effectiveness and appropriateness of the care provided.

- The practice was able to demonstrate that staff had the skills, knowledge and experience to carry out their roles.
- Staff worked together and with other organisations to deliver effective care and treatment.
- Staff were consistent and proactive in helping patients to live healthier lives.
- The practice always obtained consent to care and treatment in line with legislation and guidance.

We rated the practice as **Good** for providing well-led services because:

- There was compassionate, inclusive and effective leadership at all levels. They had the capacity and skills to deliver high quality sustainable care.
- The practice had a clear vision and credible strategy to provide high quality sustainable care.
- The practice had a culture which drove high quality sustainable care.
- There were clear responsibilities, roles and systems of accountability to support good governance and management.
- There were clear and effective processes for managing risks, issues and performance.
- There was a demonstrated commitment to using data and information proactively to drive and support decision making.
- The practice involved the public, staff and external partners to sustain high quality and sustainable care.
- There was evidence of systems and processes for learning, continuous improvement and innovation.

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

- The provider should complete an appropriate risk assessment to identify a list of medicines that are not suitable for the practice to stock. The list should be kept under review.

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

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a CQC lead inspector.
The team included a GP specialist advisor.

Background to Dr PF Mullen's Practice

Dr PF Mullen's Practice (also known as Penny Lane Surgery) is located in the outskirts of Liverpool City centre. The practice has three GP partners and four salaried GPs and one GP covering maternity leave (two male and six female) two Practice Nurses and administration staff. The practice is a training practice and currently works with one registrar.

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

The practice is open 8.am to 6.30pm Monday to Friday. The practice participates in extended access, two days per week the surgery is open until 8:30pm for routine patient appointments. Patients requiring a GP outside of normal working hours are advised to contact an external out of hours provider (Primary Care 24). The practice had a GMS contract which also included provision for such services as various vaccinations and geriatric assessments. There were approximately 6,033 patients registered at the practice at the time of our inspection.

The profile of the neighbourhood shows the proportion of residents living with a limiting long term condition is 41% compared with 54% across the CCG and 51% nationally. The figure for the general population in England with a limiting long term illness is 20%. The National General Practice Profile states that 91% of patients are from a white British background. Information published by Public Health England, rates the level of deprivation within the practice population group as seven, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice provides ground floor facilities accessible to disabled patients. The facilities include toilet, waiting area, private consulting / treatment rooms. There is no dedicated car park on site.