

Rishton and Great Harwood Surgery

Quality Report

32 High Street
Rishton
BB1 4LA
Tel: 01254 617590
Website: www.rishtongp.com

Date of inspection visit: 20 December 2017
Date of publication: 09/01/2018

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.

Contents

Summary of this inspection

| | |
|-----------------|--------|
| Overall summary | Page 1 |
|-----------------|--------|

Detailed findings from this inspection

| | |
|---|---|
| Our inspection team | 3 |
| Background to Rishton and Great Harwood Surgery | 3 |
| Why we carried out this inspection | 3 |

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Rishton and Great Harwood Surgery on 23 May 2017. The overall rating for the practice was good, with the key question of well led rated as requires improvement. The full comprehensive report on the May 2017 inspection can be found by selecting the 'all reports' link for Rishton and Great Harwood Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 20 December 2017 to confirm that the practice had

carried out their plan to meet the legal requirements in relation to the breach in regulations that we identified in our previous inspection on 23 May 2017. This report covers our findings in relation to those requirements.

Overall the practice is now rated as good, with the previous rating of requires improvement for the key question of well led updated to a rating of good.

Our key findings were as follows:

Summary of findings

- The practice was able to demonstrate that policy and procedure documents had now been updated to be practice specific and contained up to date information.
- Risk management had improved. Appropriate risk assessment documentation had been produced and mitigating actions put in place to minimise risks associated with recruitment.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Rishton and Great Harwood Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

A desk based review of evidence submitted by the provider was carried out by a CQC lead inspector.

Background to Rishton and Great Harwood Surgery

Rishton and Great Harwood Surgery offers services from both a main surgery in Rishton (32 High Street, Rishton, BB1 4LA) as well as a branch surgery in Great Harwood Health Centre in Great Harwood (2b Water Street, Great Harwood, BB6 5QR). Patients can access services at either premises.

The practice delivers primary medical services to a patient population of 1075 under a general medical services (GMS) contract with NHS England. The practice caters for a higher proportion of patients experiencing a long standing health condition, 65%, compared to the local average of 58% and national average of 54%. The average life expectancy of the practice population is higher than the local average, but lower than the national average for both males and females (78 years for males, compared to the local average of 77 years and national average of 79 years. For females, 82 years, compared to the local average of 81 and national average of 83 years). The age distribution of the practice population closely mirrors the local and national averages.

Information published by Public Health England rates the level of deprivation within the practice population group as four on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is a partnership, with one male partner GP working full time and one female partner GP who works one afternoon per week. The practice does not employ any practice nurses, but patients can access appointments with nurses whose posts are funded by the Clinical Commissioning Group (CCG). These nurses run clinics based at Great Harwood Health Centre, which is in the same building that houses the practice's branch surgery. The GPs are supported by non-clinical staff consisting of two part time senior administrators and six receptionists. The practice is also supported for half a day per week by the CCG's advanced locality pharmacist. The practice has been supported on a part time basis by a newly appointed practice manager since February 2017.

The practice is open between 8:00am and 6:00pm Monday to Friday, apart from Wednesday and Friday when extended hours are offered until 7:00pm, and Thursday when it closes for the afternoon at 12:30pm. Appointments are from 9:00am to 5:30pm each day, although surgeries are split between the main and branch surgeries. Extended hours surgeries are offered until 7:00pm on Wednesdays and Fridays. When the practice is closed, patients are able to access out of hour's services offered locally by the provider East Lancashire Medical Services.

The practice had previously been inspected on 23 September 2015, when a full comprehensive inspection was completed. This visit resulted in a Warning Notice being served against the provider on 26 October 2015. The

Detailed findings

Notice advised the provider that the practice was failing to meet the required standards relating to Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Safe Care and Treatment.

On 17 June 2016 we carried out a focussed inspection of the Rishton surgery to check the provider had taken the required action in relation to the Warning notice which we issued on 26 October 2015. At this inspection we found that some improvements had been made, but that some concerns also remained.

A further full comprehensive inspection visit was completed on 7 September 2016 which resulted in the practice being rated inadequate overall, with inadequate ratings for the key questions of safe, effective and well led and requires improvement ratings for the key questions of caring and responsive. As a result the practice was placed into special measures and conditions were imposed on the provider's registration due to breaches to regulations 12 (safe care and treatment), 17 (good governance) and 18 (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

As per our inspection methodology, a further full comprehensive inspection visit was carried out in May 2017. This inspection found that improvements had been

made. The practice was rated good overall and was brought out of special measures. However, the key question of well led was rated as requires improvement and a requirement notice issued for a breach to regulation 17 (Good Governance).

Why we carried out this inspection

We undertook a comprehensive inspection of Rishton and Great Harwood Surgery on 23 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall, with a requires improvement rating for the key question of well led. The full comprehensive report following the inspection in May 2017 can be found by selecting the 'all reports' link for Rishton and Great Harwood Surgery on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Rishton and Great Harwood Surgery on 20 December 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Are services well-led?

Good 

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

Our findings

At our previous inspection on 23 May 2017, we rated the practice as requires improvement for providing well-led services as there were gaps in the overarching governance structure. For example some policy documentation contained out of date information or was not practice specific. Also, we found some examples where key risks had been identified but documentation relating to these risks and their mitigation had not been created.

We issued a requirement notice in respect of these issues and found arrangements had improved when we undertook a follow up desk based inspection of the service on 20 December 2017. The practice is now rated as good for being well-led.

Governance arrangements

At our previous inspection on 23 May 2017, we found there were gaps in the practice's overarching governance structure; we saw examples of policy documents that contained out of date information or were not practice specific.

As part of this desk based follow up review, the practice provided us with updated documents to satisfy us these

issues had been rectified. For example an updated infection control policy was supplied which contained information specific to the practice, and an updated safeguarding children policy was shared with the inspection team which contained appropriate information relating to Disclosure and Barring Service (DBS) checks (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).

Managing risks, issues and performance

At our previous inspection on 23 May 2017, we found there were some gaps in the practice's processes to manage risks and implement mitigating actions. Risk assessment documentation had not always been maintained appropriately, for example in relation to information contained in DBS checks.

As part of this desk based follow up review, we saw that appropriate risk assessment documentation was in place, and the practice provided us with comprehensive evidence to demonstrate that mitigating actions had been implemented in order to minimise risks associated with recruitment.