

Bowland Medical Practice

Quality 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 service

Good



Are services safe?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Bowland Medical Practice on 16 July 2015. The overall rating for the practice was good, with a requires improvement rating for the key question of safe and we issued requirement notices for breaches of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Safe care and treatment) and Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Fit and proper persons employed). The full comprehensive report on the July 2015 inspection can be found by selecting the 'all reports' link for Bowland Medical Practice on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 5 October 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches identified in the requirement notices.

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

Our key findings were as follows:

- The practice was able to demonstrate that a risk assessment relating to legionella had been completed .
- All non-clinical staff who carried out chaperone duties had DBS checks in place, and the practice's recruitment policy had been updated to reflect this was part of its recruitment procedure (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).

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?

At our previous inspection on 16 July 2015, we rated the practice as requires improvement for providing safe services as a legionella risk assessment had not been completed for the premises, and non-clinical staff who acted as chaperones for patients had not undergone a Disclosure and Barring Service (DBS) check to ensure their suitability for the role.

These arrangements had improved when we undertook a follow up inspection on 5 October 2017. The practice is now rated as good for providing safe services.

- The practice was able to demonstrate that a risk assessment relating to legionella had been completed .
- All non-clinical staff who carried out chaperone duties had DBS checks in place, and the practice's recruitment policy had been updated to reflect this was part of its recruitment procedure.

Good



Bowland Medical Practice

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 Bowland Medical Practice

Bowland Medical Practice serves a residential area located in the Benchill area of South Manchester. At the time of this inspection the practice had approximately 7,600 patients registered.

The practice population experiences much higher levels of income deprivation than the practice average across England. There is a lower proportion of patients above 65 years of age (13.4%) than the practice average across England (17.2%). The practice has a higher proportion of patients under 18 years of age (23.6%) than the practice average across England (20.7%). The proportion of the practice's patients with a long term condition is 58.9%, compared to the local average of 50.9% and national average of 53.2%

Services are provided by five partner GPs. The GPs are supported in providing clinical services by four practice nurses. The clinical staff are supported by the practice manager, finance manager and the other nine members of the practice team.

Bowland Medical Practice is accredited by the North Western Deanery of Postgraduate Medical Education as a GP Training Practice, providing post graduate training and experience for qualified doctors who are training to become GPs.

The opening times of the practice are Monday to Friday from 8.15am to 6.00pm with extended opening hours Tuesday 6.30pm to 7.30pm. The surgery is closed on Tuesdays and Fridays between 12 noon and 2.00pm for training.

The practice has a contract with NHS England to provide General Medical Services (GMS) to the patients registered with the practice, and is part of the NHS Manchester Clinical Commissioning Group (CCG).

The practice website provides patients with details of how to access medical advice when the practice is closed. Patients are also provided with these details via a recorded message when they telephone the practice outside the usual opening times. The out of hours service is provided locally by a registered out of hours service (Go To Doc).

Why we carried out this inspection

We undertook a comprehensive inspection of Bowland Medical Practice on 16 July 2015 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 rating of requires improvement for the key question of safe. We issued the provider with requirement notices for breaches of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Safe care and treatment) and Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Fit and proper persons employed). The full comprehensive report following the inspection on 16 July 2015 can be found by selecting the 'all reports' link for Bowland Medical Practice on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Bowland Medical Practice on 5 October 2017. This

Detailed findings

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 had addressed the concerns identified in the requirement notices.

How we carried out this inspection

We carried out a desk-based focused inspection of Bowland Medical Practice on 5 October 2017. This involved reviewing evidence that:

- Relevant staff who acted as chaperones had received appropriate checks through the Disclosure and Barring Service, and the recruitment policy updated to reflect these checks being undertaken as part of the employment process.
- An appropriate legionella risk assessment had been completed for the premises.

Are services safe?

Our findings

At our previous inspection on 16 July 2015, we rated the practice as requires improvement for providing safe services as a legionella risk assessment had not been completed for the premises, and non-clinical staff who acted as chaperones for patients had not undergone a Disclosure and Barring Service (DBS) check to ensure their suitability for the role (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).

These arrangements had improved when we undertook a follow up inspection on 5 October 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

In July 2015 we found that non-clinical staff who carried out chaperone duties had not received a Disclosure and Barring Service (DBS) check to confirm their suitability for the role, nor had risk assessments been completed to provide a rationale for this decision.

In October 2017 the practice provided evidence that non-clinical staff who had responsibility to act as chaperones for patients had received an appropriate DBS check and that the recruitment policy had been updated to reflect this as a part of the employment procedure when new staff were taken on.

Monitoring risks to patients

In July 2015 we found no evidence that the practice had completed a risk assessment relating to legionella for the premises (legionella is a term for a particular bacterium which can contaminate water systems in buildings).

For our October 2017 desk based review, the practice provided evidence that a legionella risk assessment had been completed on 8 September 2015. The practice manager was able to describe how actions required following this assessment had been completed, and that an updated risk assessment was scheduled to be completed in November 2017.