

Mrs Elaine Evans

Quality Report

Foxleigh Family Surgery
The Bridgewater Medical Centre
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Leigh
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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

This is a focused follow-up inspection of the practice of Mrs Elaine Evans for areas within the key questions safe. We now found the practice to be good in providing safe services.

We carried out an announced comprehensive inspection at the practice of Mrs Elaine Evans on 31 March 2016. The rating for the practice was good. The full comprehensive report on the 31 March 2016 inspection can be found by selecting the 'all reports' link for Mrs Elaine Evans on our website at www.cqc.org.uk.

At our previous inspection on 31 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- The practice did not have oxygen available in case of emergencies.
- The practice did not have robust procedures and processes to make sure that patients are protected from harm.

In addition we identified the following issues the service should improve:

- The systems to record and share learning from significant events and complaints should be improved.
- The role of the infection control lead should be clarified to ensure regular practice led audits are undertaken.
- All staff should be aware of practice specific policies, such as the whistleblowing policy.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

At this inspection we found that sufficient improvement had been achieved to update the rating for provision of safe services to good. The practice had addressed the breaches of regulation and was now compliant with all regulations. This report covers our findings in relation to those improvements.

Our key findings were as follows:

- Oxygen is now available to use in case of an emergency.
- The practice has robust procedures and processes to protect patients from harm.

Summary of findings

- There are good systems to record information and track significant events and complaints.
- The practice manager has the lead role for infection control to ensure that regular infection control audits are carried out.
- Staff are aware of practice specific policies, such as the whistleblowing policy.

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 this inspection we spoke with the practice manager and reviewed documentary evidence to assess how the practice had improved its safety systems since the last inspection. The practice is now rated as good for providing safe services.

We spoke with the practice manager and reviewed the following equipment and information:

- The oxygen cylinder
- Minutes of meetings
- Policies and procedures
- Systems and processes to manage significant events.

Our key findings were as follows:

- Oxygen was now available to use in case of an emergency.
- The practice has robust procedures and processes to protect patients from harm.
- There are good systems to record information and track significant events and complaints.
- The practice manager has the lead role for infection control to ensure that regular infection control audits are carried out.
- Staff are aware of practice specific policies, such as the whistleblowing policy.

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 provider had resolved the concerns for safety identified at our inspection on 31 March 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for the practice of Mrs Elaine Evans on our website at www.cqc.org.uk.

Good



People with long term conditions

The provider had resolved the concerns for safety identified at our inspection on 31 March 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for the practice of Mrs Elaine Evans on our website at www.cqc.org.uk.

Good



Families, children and young people

The provider had resolved the concerns for safety identified at our inspection on 31 March 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for the practice of Mrs Elaine Evans on our website at www.cqc.org.uk.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety identified at our inspection on 31 March 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for the practice of Mrs Elaine Evans on our website at www.cqc.org.uk.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety identified at our inspection on 31 March 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Summary of findings

The specific findings on these groups can be found by selecting the 'all reports' link for the practice of Mrs Elaine Evans on our website at www.cqc.org.uk.

People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety identified at our inspection on 31 March 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for the practice of Mrs Elaine Evans on our website at www.cqc.org.uk.

Good



Mrs Elaine Evans

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 Mrs Elaine Evans

The practice of Mrs Elaine Evans also known as Foxleigh Family Surgery provides primary care services to its registered list of approximately 2319 patients. The practice is situated at The Bridgewater Medical Centre, Henry Street, Leigh.

There is one male GP and one long term female locum GP. They are supported by a practice nurse, a practice manager and team of administration staff.

The male life expectancy for the area is 77 years compared with the CCG averages of 77 years and the National average of 79 years. The female life expectancy for the area is 81 years compared with the CCG average of 81 years and the national average of 83 years.

The reception, waiting areas, consulting rooms and disabled toilet facilities are on the ground floor of the practice. There is level access into the building and easy access for those patients in wheelchairs or with pushchairs.

Patients requiring a GP outside of normal working hours are advised to contact the surgery by phone and they will be directed to the local out of hour's service which is provided by Bridgewater NHS Foundation Trust through NHS 111. Additionally patients can access GP services on Saturdays and Sundays through the Wigan GP access alliance at locations across the borough.

The practice is situated within the geographical area of Wigan Clinical Commissioning Group.

Why we carried out this inspection

We undertook a comprehensive inspection of the practice of Mrs Elaine Evans on 31 March 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Overall the practice was rated as good although it was rated as requires improvement for providing safe services. The full comprehensive report following the inspection on 31 March 2016 can be found by selecting the 'all reports' link for Mrs Elaine Evans on our website at www.cqc.org.uk.

We undertook this focussed follow-up inspection of on 24 October 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 its legal requirements.

How we carried out this inspection

Following the inspection on 31 March 2016 the practice supplied an action plan with appropriate timescales telling us how they would ensure they made the relevant improvements. In line with their agreed timescale the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the safe domain.

We carried out an announced focused follow-up inspection of the practice of Mrs Elaine Evans on 24 October 2017. This involved looking at information the practice used to deliver care and speaking with the practice manager.

Are services safe?

Our findings

At our previous inspection on 31 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- The practice did not have oxygen available in case of emergencies.
- The practice did not have robust procedures and processes to make sure that patients were protected from harm.

In addition we identified the following issues the service should improve:

- The systems to record and share learning from significant events and complaints should be improved.
- The role of the infection control lead should be clarified to ensure regular practice led audits are undertaken.
- All staff should be aware of practice specific policies, such as the whistleblowing policy.

At this inspection we spoke with the practice manager and reviewed documentary evidence to see how the practice had improved their systems in relation the provision of safe services.

Our key findings were as follows:

- Oxygen was now available to use in case of an emergency. This was easily accessible to staff and was checked regularly to ensure it was in good working order.

- The practice had robust procedures and processes to make sure that patients were protected from harm. There was a record of vulnerable patients and those at risk of harm. Minutes of meetings demonstrated these patients were discussed with relevant staff and other health care professionals as needed. Patients were referred to secondary care and support as necessary.
- There were improved systems to record and share learning from significant events and complaints. Significant events were discussed during regular team meetings and minutes of meetings were shared with staff.
- The practice manager had the lead role for infection control and regular practice led infection control checks were completed. Staff had completed recent hand-washing training. The practice manager was attending infection control training which included attending monthly meetings run by the Bury Clinical Commissioning Group infection control lead. There were systems to manage infection control and there was evidence to demonstrate concerns had been addressed. The practice manager was working with Wigan Clinical Commissioning Group to carry out a full audit of the practice's infection control.
- Staff were now aware of practice specific policies, such as the whistleblowing policy. This information was included in the staff handbook and was held on the practice intranet.