

# Blackfriars Medical Practice

## Inspection report

Fresh Towers  
138 Chapel Street, Salford  
Manchester  
Greater Manchester  
M3 6AF  
Tel: 01618194790  
[www.blackfriarsmedicalpractice.co.uk](http://www.blackfriarsmedicalpractice.co.uk)

Date of inspection visit: 05/07/2018  
Date of publication: 31/07/2018

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.

# Overall summary

On 20 April 2018 we carried out a full comprehensive inspection of Blackfriars Medical Practice. This resulted in a warning notice being issued against the provider on 15 May 2018. The Notice advised the provider that the practice was failing to meet the required standards relating to Regulation 17 of the Health & Social Care Act 2008 (Regulated Activities). A copy of this report can be found on our website:

On 5 July 2018 we undertook a focused inspection to check that the practice had met the requirements of the Warning Notices. At this inspection we found that some improvements had been made and the provider had complied with some parts identified in the warning notice. In particular, we found that:

- The practice had made improvements in relation to training. We found that a system was now in place to check the training of staff members. However, we found that evidence of safeguarding training for a locum member of staff was not available at the time of the inspection, but was provided to us after the inspection.

- Recruitment procedures had been improved and the practice now ensured that professional medical registration was correct, and medical indemnity was in place for all staff members including locums. However, we found that identification checks had not been performed on all locum staff members.
- Clinical supervision was in place for all staff members and the practice kept a record of any discussion that took place. The lead GP had also implemented a system of randomly checking consultations to ensure current guidelines were followed.
- The significant event policy had been updated to ensure all incidents were recorded within 24 hours of discovery.

The rating awarded to the practice following our full comprehensive inspection 20 April 2018 of requires improvement remains unchanged. Improvements remain ongoing and the practice will be re-inspected in relation to their rating in the future.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**

Chief Inspector of General Practice

## Our inspection team

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

## Background to Blackfriars Medical Practice

Blackfriars Medical Practice is in Salford, Greater Manchester. The address of the practice is Fresh Towers, 138 Chapel Street, Salford, Greater Manchester, M3 6AF.

The practice has approximately 9000 registered patients and serves mostly a younger population group.

The practice has two partners and six associate GPs, two practice nurses, three health care assistants, a practice manager, a pharmacy team, and a team of administration staff. The practice is also a teaching practice to medical students.

Information taken from Public Health England placed the area in which the practice is in the fifth least deprived decile (from a possible range of between 1 and 10). In general, people living in more deprived areas tend to have greater need for health services.

Outside of practice opening times, patients are diverted to the NHS 111 out of hours service. The service operates under a General Medical Services contract and provides the following regulated activities: Maternity and midwifery, Diagnostic and screening procedures, Surgical procedures and Treatment of disease, disorder or injury.

# Are services safe?

## Safety systems and processes

- The practice had implemented a training matrix to ensure any training gaps were identified. We saw that all permanent staff had received training appropriate to their role and staff were booked onto courses for any overdue training. The practice told us that safeguarding training was requested from any clinical locum staff that were being employed, but we found one locum member of staff had not provided evidence of their safeguarding training. Evidence that the safeguarding training had been completed was sent in from the practice after the inspection.
- The practice had updated their recruitment policy to take locum members of staff into consideration. The practice had implemented a recruitment check list for locums to ensure that the registration was checked and that medical indemnity insurance was in place. However, the practice had not confirmed the identity of all locums with photographic identification. All staff had received a Disclosure and Barring Service check.

## Appropriate and safe use of medicines

- The practice had implemented a system to monitor the prescribing of clinicians by auditing at random several consultations to ensure best practice guidelines were followed, and prescribing was appropriate.

- The practice was in the process of obtaining a prescriber's number for all clinical prescribers within the practice, but we were informed this could take up to 12 weeks to come through.
- The practice had reviewed all the consultations carried out by a former member of clinical staff who was working outside their competency and not qualified to perform the role. The practice was confident that all patients seen by this member of staff were safe and no harm had come to them. The practice was also in the process of contacting any patients who was seen by this member of staff and needed to come back into the practice for a follow up consultation.

## Track record on safety and lessons learned and improvements made

- The practice had updated their significant event policy to ensure that all incidents were raised within 24 hours of becoming aware of the incident. All staff members were aware of this change. Significant events were discussed at team meetings and this was a standing agenda item. We looked at two recent significant events and found that the significant events had been investigated fully and both had been recorded within 24 hours of discovery.

# Are services effective?

## **Effective staffing**

- The practice now provided all staff with ongoing support and we saw that clinical supervision was given to all staff members and a record was kept of this.

# Are services well-led?

## **Governance arrangements**

- We found that governance within the practice had improved since the last inspection in 20 April 2018. The practice had made some improvements to their policies to ensure the safety of patients. Some improvements

were still needed, for example, identification checks for all locum staff members, and the improvements that had been made would take some time to become fully embedded