

Princess Road Surgery

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

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	5
Background to Princess Road Surgery	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Princess Road Surgery on 16 June 2016. At the inspection in June the overall rating for the practice was good, although the key question Safe was rated requires improvement. This was because the arrangements in respect of the management of significant events, recruitment records and staff appraisal all required improvement. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Princess Road Surgery on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 27 October 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 16 June 2016. This report covers our findings in relation to that requirement.

The practice is now rated as good for providing safe services, and overall the practice remains rated as good.

Our key findings were as follows:

- Since the previous inspection the practice had taken action to strengthen the arrangements in response to

significant event and incident recording. Logs were maintained of each significant event or incident and these detailed what the issue was, and what action was taken in response to the concern.

- Team meeting minutes showed that significant events and incidents were discussed with staff at these meetings.
- Evidence supplied showed the practice undertook a review of significant events to evaluate the actions that were implemented to ensure these were effective.
- The practice had reviewed its recruitment policy and this was up to date and was supported by a recruitment policy document for clinical staff.
- Evidence supplied demonstrated appropriate recruitment records were obtained for staff recruited since April 2013 and these included a Curriculum Vitae, references, disclosure and barring service checks (DBS), evidence of right to work in this country and proof of address.
- Recruitment records were also now available for locum GPs used by the practice and this included evidence of professional registration and liability insurance.
- Since the previous inspection the practice supplied evidence demonstrating that all staff had received an appraisal and a schedule for future appraisals was recorded.

Summary of findings

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?

The practice is rated as good for providing safe services.

- The system for reporting and recording significant events had improved, with written logs maintained detailing the actions undertaken by the practice to minimise the risk of reoccurrence.
- Learning from the outcome of investigations into significant events and incidents was shared with staff at minuted team meetings.
- Recruitment procedures were updated and reviewed at least annually.
- Recruitment practices had improved so safe recruitment procedures were undertaken of staff and locum GPs.
- Staff had received an appraisal and future appraisals were scheduled.

Good



Princess Road Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector reviewed and analysed the documentation submitted to us by the practice.

Background to Princess Road Surgery

Princess Road Surgery is based in the culturally diverse area of Withington, Manchester. It is part of the NHS Central Manchester Clinical Commissioning Group (CCG) and has 4500 patients. The practice provides services under a Personal Medical Services contract, with NHS England.

Information published by Public Health England rates the level of deprivation within the practice population group as level one on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest. Male and female life expectancy in the practice geographical area is 75 years for males and 79 years for females, both of which are below the England average of 79 years and 83 years respectively. The numbers of patients in the different age groups on the GP practice register were generally similar to the average GP practice in England.

The practice has a slightly lower percentage (53%) of its population with a long-standing health condition than the England average (54%). The practice has a lower percentage (59%) of its population with a working status of being in paid work or in full-time education than the England average (62%). The practice has a higher percentage (6%) of its population with an unemployed status than the England average of (5%).

Services are provided from a row of converted parade of shops and house with disabled access and on street parking. The practice has a number of consulting and treatment rooms used by the GPs and nursing staff as well as visiting professionals such as health visitors. The practice prides itself on having strong links with the University Medical School, with one of the senior partners achieving Best Community Teacher 2014, and regularly facilitating students in their placement studies.

The service is led by three GP partners and one salaried GP, a nurse practitioner and a practice nurse, the practice manager and a deputy practice manager. The team is supported by an administration team including a number of reception/administrative staff who also cover other duties such as dealing with samples and drafting prescriptions.

The practice is open from 6.45am to 6pm Monday, 8am to 6pm on Tuesdays and Fridays and 8am to 7pm on Wednesdays and Thursdays. The surgery is closed for one hour at lunchtime. Extended hours are provided on Monday mornings and Wednesday and Thursday evenings. The practice is also as part of a federation of GP practices who cover a number of practices in the area between 6pm and 8pm, Monday to Friday, as well as on Saturday and Sunday mornings. Patients are able to attend appointments at a small number of local health centres as part of this arrangement. Out of hours cover is provided by the NHS 111 service and Go to Doc.

Why we carried out this inspection

We undertook a comprehensive inspection of Princess Road Surgery on 16 June 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall, however

Detailed findings

the key question safe was rated as requires improvement. The full comprehensive report following the inspection on June 2016 can be found by selecting the 'all reports' link for Princess Road Surgery on our website at www.cqc.org.uk.

We undertook a follow up desk based inspection of Princess Road Surgery on 27 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 legal requirements.

How we carried out this inspection

We carried out a desk-based focused inspection of Princess Road Surgery on 27 October 2017.

This involved reviewing the following evidence:

- Records following the investigation of significant events and incidents.
- Evidence of further review following the implementation of changes as a result of significant event investigations.
- Team meeting minutes demonstrating learning was shared with staff following investigations of significant events and incidents.
- Recruitment policies and evidence that staff working at the practice had been vetted appropriately in accordance with legislation.
- Staff appraisal records including when these were undertaken and a schedule of future meetings

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 16 June 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of the management of significant events, recruitment records and staff appraisal all needed improvement.

Evidence supplied by the practice demonstrated that these arrangements had improved when we undertook our desk based follow up inspection on 27 October 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

Since the previous inspection the practice had taken action to strengthen the arrangements in recording and responding to significant events and incidents. Logs were maintained of each incident and these detailed what the issue was, and what action was taken in response to the concern. Team meeting minutes showed that significant events and incidents were discussed with staff at team meetings.

Evidence was also available that showed the practice carried out additional reviews of significant events to analyse and evaluate the actions that were implemented to ensure these were effective.

Overview of safety systems and process

The practice had reviewed its recruitment policy and this was up to date and was supported by a recruitment policy document for clinical staff.

Evidence was supplied that demonstrated appropriate recruitment records were obtained for staff recruited since April 2013 and these included a Curriculum Vitae, references, disclosure and barring service checks (DBS), evidence of the right to work in this country and proof of address. Recruitment records were also now available for locum GPs used by the practice and this included evidence of professional registration and liability insurance.

Since the previous inspection evidence supplied showed that all staff had received an appraisal and a schedule for future appraisals was recorded.