

# Heaton Moor Medical Group, Bosden Moor Surgery (branch GP 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 effective?

Good



Are services well-led?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

This inspection was an announced focused inspection carried out on 9 August 2017 at the branch location Bosden Moor Surgery, (formerly The Surgery) which is now part of the registration of Heaton Moor Medical Group (HMMG).

HMMG was inspected 15 November 2016 and was rated good overall. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Heaton Moor Medical Group on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This GP practice was previously registered to another provider (Dr Yogendra Dutt Sharma) and was known locally as The Surgery. However significant concerns were identified in relation to the key questions safe, effective and well led and the practice was rated inadequate overall and placed into special measures following our first inspection of the practice in February 2016.

At our re-inspection of the GP practice in 7 December 2016 Dr Yogendra Dutt Sharma, the registered provider, was no longer contracted with NHS England to provide primary medical services at The Surgery. The NHS England contract as of the 1 December 2016 was with the GP partners from HMMG.

HMMG had been supporting The Surgery from October 2016 and the re-inspection in December 2016 identified major improvements in the quality and safety of the service provided. HMMG had implemented an effective remedial action plan but recognised further work was required to improve services. The practice was rated as requires improvement overall and one requirement notice was issued. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Yogendra Dutt Sharma on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

HMMG completed the purchase of the GP Surgery in February 2017, notified the Care Quality Commission that the location was now a branch GP surgery and undertook a consultation process with patients to rename the practice to Bosden Moor Surgery. HMMG patients' register merged with the patients registered at Bosden Moor Surgery in April 2017.

The purpose of this focused inspection was to confirm that HMMG had carried out their plan to meet the legal requirements in relation to the breach in regulation that we identified in our previous inspection 7 December 2016.

Our key findings across all the areas we inspected were as follows:

# Summary of findings

- HMMG had successfully implemented a strategy to improve and develop the service provided at Bosden Moor Surgery and had addressed the significant issues, transforming the service provided to one that was safe, effective and well led.
- The practice building had been totally remodelled to a high standard, providing tastefully modern décor and facilities while retaining and enhancing patient access and improving capacity and the variety of the services provided.
- The planned integration of the patient record system with that of HMMG had been completed. This allowed patients to access a range of GP, nurse and specialist appointments across four locations within Stockport.
- Records management was centralised for the majority of administrative tasks, which enabled effective management of patient information.
- The practice had fully implemented and integrated their established governance systems at Bosden Moor Surgery. This ensured all staff had access to standardised policies, procedures and processes regardless of which of the four GP surgeries they were located at.
- Patient medication reviews at Bosden Moor Surgery had been completed and a recall and review cycle established dependent on the individual patient's needs.
- HMMG were actively trying to engage with patients at Bosden Moor Surgery and invited patients to join the wider HMMG patient participation group.
- HMMG implemented a range of audits including clinical audits.
- Regular multi-disciplinary meetings were held jointly with another of HMMG branch surgery because the same health care professionals covered both localities.
- HMMG was forward thinking and worked collaboratively with the clinical commissioning group (CCG) in piloting new ways of working to improve patient outcomes and to expand the variety of and access to a range of health care and treatment options.
- Staff training plans and annual appraisal were established and implemented.
- We saw that staff treated patients with kindness and respect, and maintained confidentiality.

**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 effective?

Under the CQC registration of a different registered provider the practice was rated as requires improvement for providing effective and well led services. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Yogendra Dutt Sharma on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Heaton Moor Medical Group (HMMG) took over running the surgery in December 2016.

This follow up focused inspection identified that HMMG, the new registered provider for this service, had implemented effective action to improve the quality of the service provided for this key question. HMMG had taken action and ensured patients' health care needs including long term conditions, were correctly identified, recorded and coded. Appropriate monitoring and patient health checks were now undertaken.

At this inspection we found:

- The planned integration of the patient record system with that of HMMG had been completed. This allowed patients to access a range of GP, nurse and specialist appointments across four locations within Stockport.
- Patient medication reviews at Bosden Moor Surgery had been completed and a recall and review cycle established dependent on the individual patient's needs.
- Regular practice nurse and health care appointments were available each week at the practice. From September 2017 the practice's diabetic nurse specialist will hold weekly diabetic clinics for patients with complex needs.
- Open access phlebotomy clinics were available each Monday morning at Bosden Moor Surgery and this service was being extended to include open access blood pressure monitoring.
- Patients had a choice of location to attend GP and nursing team appointments.
- Seven day extended opening hours were available to patients at the main GP surgery in Heaton Moor.
- Regular multi-disciplinary meetings were held jointly with another of HMMG branch surgery because the same health care professionals covered both localities.
- Staff training plans and annual appraisal were established and implemented
- We saw that staff treated patients with kindness and respect, and maintained confidentiality.
- Clinical auditing was used to monitor service quality and effectiveness.
- The practice worked collaboratively with external agencies to pilot new approaches to delivering healthcare to patients.

Good



### Are services well-led?

Previously under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Yogendra Dutt Sharma on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Heaton Moor Medical Group (HMMG) took over running the surgery in December 2016.

Good



# Summary of findings

This follow up focused inspection identified that HMMG the new registered provider for this service had implemented effective action to improve the quality of the service provided for this key question. Governance arrangements had been embedded at Bosden Moor Surgery and improvements in the quality of the service sustained.

At this inspection we found:

- HMMG had a clear vision and strategy to deliver safe, effective and well led GP services to patients. An effective governance framework supported with clear leadership was established.
- The practice had implemented its plans to totally review, update and redevelop the service provided to patients.
- The practice building had been totally remodelled to a high standard, providing tastefully modern décor and facilities while retaining and enhancing patient access and improving capacity and the variety of the services provided.
- The planned integration of the patient record system with that of HMMG had been completed. This allowed patients to access a range of GP, nurse and specialist appointments across four locations within Stockport.
- HMMG centralised many aspects of its organisational activities at the practice's registered location in Heaton Moor. This enabled effective management including monitoring and review of, for example, patient records.
- The practice had fully implemented and integrated their established governance systems at Bosden Moor Surgery. This ensured all staff had access to standardised policies, procedures and processes regardless of which of the four GP surgeries they were located at.
- HMMG were actively trying to engage with patients at Bosden Moor Surgery and invited patients to join the wider HMMG patient participation group.

# 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

Under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. This follow up focused inspection identified that Heaton Moor Medical Group, the new registered provider for this service, had implemented effective action to improve the quality of the service provided for this population group.

- Staff were able to recognise the signs of abuse in older patients and knew how to escalate any concerns.
- The practice offered proactive, personalised care to meet the needs of the older patients in its population.
- The practice was responsive to the needs of older patients, and offered home visits and urgent appointments for those with enhanced needs.
- The practice identified at an early stage those older patients who may need palliative care as they were approaching the end of life. It involved older patients in planning and making decisions about their care, including their end of life care.
- The practice had effectively introduced regular multidisciplinary team meetings to review all those patients assessed as vulnerable or frail and ensured proactive management of these patients to offer more support to them..

Good



### People with long term conditions

Under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. This follow up focused inspection identified that Heaton Moor Medical Group, the new registered providers for this service, had implemented effective action to improve the quality of the service provided for this population group.

- The practice had a team of nurses which included advanced nurse practitioners, practice nurses and health care assistants. Nursing staff had lead roles in the management of long-term disease and worked closely with community and secondary care health professionals to provide comprehensive care to patients.
- Patients now had access to regular practice nurse appointments to review their long-term conditions.
- Open access phlebotomy clinics were held every Monday at Bosden Moor Surgery.

Good



# Summary of findings

- Unverified data for this current year showed that the provider was on track to meet their targets in meeting the Quality and Outcomes Framework (QOF) indicators.
- There were emergency processes for patients with long-term conditions who experienced a sudden deterioration in health.
- All these patients had a named GP and there was a system to recall patients for a structured annual review to check their health and medicines needs were being met. For those patients with the most complex needs, the named GP worked with relevant health and care professionals to deliver a multidisciplinary package of care.

## Families, children and young people

Under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. This follow up focused inspection identified that Heaton Moor Medical Group, the new registered providers for this service, had implemented effective action to improve the quality of the service provided for this population group.

- From the sample of documented examples we reviewed we found there were systems to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of accident and emergency (A&E) attendances.
- The new provider ensured there was a practice nurse available at the Bosden Moor Surgery at least three days per week. This provided the female patients living locally increased access to cervical screening.
- Patients had access to appointments at four locations in Stockport. Appointments were available outside of school hours and the premises were suitable for children and babies.
- HMMG had a good track record in providing childhood immunisation. Data for the vaccinations given in 2015/16 indicated that the practice was achieving above the level expected with 90% or more in all the four indicators
- The practice worked with midwives, health visitors and school nurses to support this population group. For example, in the provision of ante-natal, post-natal and child health surveillance clinics.
- The practice had emergency processes for acutely ill children and young people and for acute pregnancy complications.

Good



# Summary of findings

## Working age people (including those recently retired and students)

Good



Under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. This follow up focused inspection identified that Heaton Moor Medical Group, the new registered providers for this service, had implemented effective action to improve the quality of the service provided for this population group.

- The needs of these populations had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care,
- The practice offered flexible surgery times and patients had access to appointments at four locations. Extended appointment hours were available from 7.30am every weekday and until 8pm Monday to Thursday. Weekend appointments with the GP, practice nurse and health care assistant were available on Saturdays from 8am until 2pm and on Sundays from 8am until 12 midday.
- The practice had promoted patient online access so that patients could now make GP appointments online.
- The practice was proactive in offering a full range of health promotion and screening that reflects the needs for this age group.

## People whose circumstances may make them vulnerable

Good



Under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. This follow up focused inspection identified that Heaton Moor Medical Group, the new registered providers for this service, had implemented effective action to improve the quality of the service provided for this population group.

- The practice held a register of patients living in vulnerable circumstances including homeless people and those with a learning disability.
- The practice offered longer appointments for patients with a learning disability.
- End of life care was delivered in a coordinated way which took into account the needs of those whose circumstances may make them vulnerable.
- The practice regularly worked with other health care professionals in the case management of vulnerable patients.
- The practice had information available for vulnerable patients about how to access various support groups and voluntary organisations.



# Summary of findings

- Staff interviewed knew how to recognise signs of abuse in children, young people and adults whose circumstances may make them vulnerable. They were aware of their responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.

## People experiencing poor mental health (including people with dementia)

Under the CQC registration of a different provider the practice was rated as requires improvement for providing effective and well led services. This follow up focused inspection identified that Heaton Moor Medical Group, the new registered providers for this service, had implemented effective action to improve the quality of the service provided for this population group.

- Patients at risk of dementia were identified and offered an assessment.
- The practice specifically considered the physical health needs of patients with poor mental health and dementia.
- The practice had a system for monitoring repeat prescribing for patients receiving medicines for mental health needs.
- The practice regularly worked with multi-disciplinary teams in the case management of patients experiencing poor mental health, including those living with dementia.
- The practice had information available for patients experiencing poor mental health about how they could access various support groups and voluntary organisations.
- The practice had a system to follow up patients who had attended accident and emergency where they may have been experiencing poor mental health.

Good



# Heaton Moor Medical Group, Bosden Moor Surgery (branch GP surgery)

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector and included a GP specialist adviser and a second CQC inspector.

## Background to Heaton Moor Medical Group, Bosden Moor Surgery (branch GP surgery)

Heaton Moor Medical Group (HMMG) has a main practice based in Heaton Moor in Stockport (32 Heaton Moor Road, Stockport SK4 4NX). It also has three branch surgeries including Bosden Moor Surgery, Fulmar Drive, Offerton, SK2 5JL, Littlemoor Surgery 10 Offerton Lane, Offerton, SK2 5AR and Dean Lane Medical Centre, 95 Dean Lane, Hazel Grove, SK7 6EJ.

HMMG completed the purchase of Bosden Moor Surgery in February 2017, notified the Care Quality Commission that the location was now a branch GP surgery and undertook a consultation process with patients to rename the practice to Bosden Moor Surgery.

Bosden Moor Surgery patients' register merged with the patients registered with HMMG in April 2017.

There are approximately 32000 patients on the practice register. The practice is a training and teaching practice managed by five GP partners (two female and three male). There are 13 salaried GPs and three registrars. There are three nurse practitioners, one diabetic nurse specialist, five practice nurses, two assistant practitioners and one healthcare assistant.

The clinical team is supported by a practice management team led by the practice manager, an administration team and a reception team.

The practice main location and the three branch surgeries are open 8am to 6.30pm every weekday. Bosden Moor surgery closes 1pm to 2pm each day. During these periods of closure patients ringing the surgery are diverted to one of the other branch surgeries.

HMMG offers appointments from 7.30am every weekday and until 8pm Monday to Thursday. Weekend appointments with the GP, practice nurse and health care assistant are available on Saturdays from 8am until 2pm and on Sundays from 8am until 12 midday.

Patients requiring a GP outside of normal working hours are advised to contact the GP out of hours service by calling 111.

The practice is part of NHS Stockport Clinical Commissioning Group. The practice has a Personal Medical Services (PMS) contract and has enhanced services contracts which include childhood vaccinations.

HMMG have refurbished the Bosden Moor Surgery building to a high standard. The interior décor is modern and

# Detailed findings

tasteful and is compliant with health and safety and infection prevention and control standards. Action has been taken to allow patients with disabilities easy access from the car park. There are now four consultation rooms available to allow GP, practice nurse and phlebotomy services to be provided. Each consultation room is fully equipped with new, modern equipment. Patients have access to ample car parking space close to the surgery.

## Why we carried out this inspection

This GP practice was previously registered to another provider (Dr Yogendra Dutt Sharma) and was known locally as the Surgery. We undertook a comprehensive inspection of Dr Yogendra Dutt Sharma on 7 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Yogendra Dutt Sharma on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection carried out on 9 August 2017 at the branch location Bosden Moor Surgery, (formerly the Surgery) which is now part of the registration of Heaton Moor Medical Group (HMMG).

HMMG was inspected 15 November 2016 and was rated good overall. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Heaton Moor Medical Group on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## How we carried out this inspection

During our visit we:

- Spoke with a range of staff including the practice manager, two GP partners, one practice nurse and the receptionist.
- Observed briefly how patients were being cared for in the reception area.
- Reviewed an anonymised sample of the personal care or treatment records of patients.
- Reviewed feedback provided to the practice by patients.
- Looked at information the practice used to deliver care and treatment plans.

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 effective?

(for example, treatment is effective)

## Our findings

Under the CQC registration of a different registered provider the practice was rated as requires improvement for providing effective and well led services. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Yogendra Dutt Sharma on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Heaton Moor Medical Group (HMMG) took over services provided at the surgery in December 2016. HMMG was inspected 15 November 2016 and was rated good overall. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Heaton Moor Medical Group on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This follow up focused inspection identified that HMMG, the new registered provider for this service, had implemented effective action to improve the quality of the service provided for this key question. HMMG had taken action and ensured patients' health care needs including long term conditions, were correctly identified, recorded and coded. Appropriate monitoring and patient health checks were now undertaken.

### Effective needs assessment

Systems were established to ensure care and treatment to meet patients' assessed needs were delivered in line with relevant and current evidence based guidance and standards, including National Institute for Health and Care Excellence (NICE) best practice guidelines.

- Staff had access to guidelines from NICE and used this information to deliver care and treatment that met patients' needs. Weekly clinical meetings ensured all clinical staff were kept up to date with national and local guidance.
- Checks that guidelines were followed were monitored through risk assessments, audits and random sample checks of patient records.
- The patients registered at Bosden Moor Surgery were now part of the larger patient register for all four surgeries that were part of HMMG.

### Management, monitoring and improving outcomes for people

At this inspection, we found that HMMG had continued and completed their remedial action plan to ensure patients

received a comprehensive and appropriate standard of care. The planned integration of the patient record system with that of HMMG had been completed. This allowed patients to access a range of GP, nurse and specialist appointments across four locations within Stockport.

In addition following the remodelling and refurbishment of Bosden Moor Surgery four consultation/treatment rooms were available allowing the practice to expand the service it provided as demand required. For example a small treatment room was now available for healthcare staff to take blood sample (phlebotomy) and check blood pressures. Open access appointments were now available for this phlebotomy service to patients registered at the practice and at the branch surgeries. This was offered every Monday morning and plans were in place to extend this for open access blood pressure checks.

The practice used the information collected for the Quality and Outcomes Framework (QOF) and performance against national screening programmes to monitor outcomes for patients. (QOF is a system intended to improve the quality of general practice and reward good practice). QOF data is a record of achievement for the 12 month period between April and March.

Previously (under the former GP provider) the practice's performance was below that of the local and national averages. HMMG implemented a comprehensive programme of identifying those patients require monitoring and provided health care reviews and developed and increased the registers of patients who had a long term health condition.

The QOF data available at this inspection was provided by HMMG and this showed the unverified progress, printed on 26 July 2017, that had been made for the whole of its patient population (32000). For example:

- The number of patients with diabetes on the register in whom the last blood test (HbA1c) was 64 mmol/mol or less in the preceding 12 months was 75%. Published data for this indicator in 2015/16 showed a clinical commissioning group (CCG) average of 80% and an England average of 78%.
- The record of diabetic patients with a blood pressure reading 140/80mmHG or less recorded within the preceding 12 months was 78%. Published data for this indicator in 2015/16 showed a CCG average of 81% and an England average of 78%.

# Are services effective?

## (for example, treatment is effective)

- The record of diabetic patients whose last measured total cholesterol was 5mmol/l or less within the preceding 12 months was 76%. Published data for this indicator in 2015/16 showed a CCG average of 85% and an England average of 80%.
- 80% of patients with diabetes registered at the practice received a diabetic foot check. Published data for this indicator 2015/16 showed a CCG and England average of 88%.

HMMG employed a diabetic nurse specialist and plans were established for weekly diabetic clinics to be held at Bosden Moor Surgery from September 2017, to review patients with complex diabetes.

Other unverified QOF data provided by the practice for the year to 26 July 2017 also showed good progress towards achieving all performance targets by the end of March 2018. For example:

- 78% of patients with hypertension whose blood pressure was measured in the preceding 12 months had results of less than 150/90 mmHg. Published data for this indicator in 2015/16 showed a CCG average of 84% and an England average of 82%.
- 70% of patients with asthma, on the register had an asthma review in the preceding 12 months. Published data for this indicator in 2015/16 showed a CCG and England average of 75%.
- 72% of patients diagnosed with dementia had had their care reviewed in a face to face meeting in the last 12 months. Published data for this indicator in 2015/16 showed a CCG average of 85% and an England average of 84%.
- 80% of patients with schizophrenia, bipolar affective disorder and other psychoses had a comprehensive, agreed care plan recorded in the preceding 12 months. Published data for this indicator in 2015/16 showed a CCG average of 92% and an England average of 89%.

HMMG had implemented a number of clinical audits to drive quality improvement. These included reviews of medicine prescribing procedures which in turn led to reviews of patients' health care needs and the provision of the regular required monitoring. In addition HMMG implemented systems to safeguard both children and vulnerable adults.

- HMMG had completed the medicine audits for overdue medication reviews and completed the reviews of

medicines prescribed to ensure they were within national guidelines and to ensure patients' health care needs were recorded and coded correctly. Patients medicine reviews were now undertaken in accordance with the practice policy and as patients' health care needs required. A medication review protocol was introduced and implemented. Flags on patients' electronic records alerted staff when the next medicine review was imminent. A further medicine review audit had recently been undertaken at Bosden Moor Surgery to compare and contrast activity before HMMG took over at the surgery and the subsequent review activity. Additional recommendations to improve repeat prescribing monitoring and patient reviews were identified following this audit.

- Policies for the safe management of high risk medicines such as those for mental health and blood thinning medicines were implemented at the surgery and shared care protocols for managing patients requiring specific medicines were established with the local NHS hospital trust.
- Other recent audit activity at Bosden Moor Surgery included review of the specific blood test (HbA1c) used to test for diabetes or pre-diabetes. This clinical audit identified areas for improvement including developing a protocol to trigger a GP prompt to code patients appropriately in response to their blood test HbA1c result.

### Effective staffing

Evidence was readily available that demonstrated that staff had the skills, knowledge and experience to deliver effective care and treatment. Staff we spoke with confirmed they had access to training and were supported with personal development.

- The practice had an induction programme for all newly appointed staff. This covered such topics as safeguarding, infection prevention and control, fire safety, health and safety and confidentiality.
- Staff told us about the regular ongoing training they had received including safeguarding, fire safety awareness, basic life support and information governance.
- Available evidence demonstrated that staff received role-specific training and updating. This included training in reviewing patients with long-term conditions, taking samples for the cervical screening programme and administering vaccinations. The practice's training

# Are services effective?

## (for example, treatment is effective)

plan enabled health care staff to develop their range of skills and competencies to assist with supporting the needs of the practice's population. For example three staff were undertaking additional training in spirometry (a test used to monitor patients with chronic obstructive airways disease). Specialist nurses were working with the health care staff to support and monitor their learning, development and proficiency in undertaking these healthcare tests.

- A healthcare practitioner was receiving additional training including diabetic foot checking and diabetic dietary needs to support the diabetic nurse specialist and so provide a joined up comprehensive patient service.
- The learning needs of staff were identified through a system of appraisals, meetings and reviews of practice development needs. Staff had access to appropriate training to meet their learning needs and to cover the scope of their work.

### Coordinating patient care and information sharing

The information needed to plan and deliver care and treatment was available to relevant staff in a timely and accessible way through the practice's patient record system and their intranet system. This included care and risk assessments, care plans, medical records and investigation and test results. HMMG was piloting a scheme to improve patient access to appointments over seven days. The practice was using, as part of the pilot, additional electronic patient record software which allowed other healthcare professionals access to the patients' health records. Patients requiring an appointment could attend the main GP surgery at Heaton Moor and GPs could access their health records with the patient's consent, regardless of their registered GP. This enabled the GP to access the patient healthcare history and therefore provide a more patient-centred response. The pilot had been successful with full surgeries with GPs and practice nurses at weekends and in the evenings. A phlebotomy service (blood taking) was also provided Monday to Saturday at the main GP surgery in Heaton Moor. The CCG had plans to roll out this service across Stockport.

Staff worked together and with other health and social care professionals to understand and meet the range and

complexity of patients' needs and to assess and plan ongoing care and treatment. This included when patients moved between services, including when they were referred, or after they were discharged from hospital.

The practice register of patients requiring end of life care was up to date. Care and treatment was delivered in a coordinated way which took into account the needs of different patients, including those who may be vulnerable because of their circumstances.

Meetings took place with other health care professionals on a six weekly basis where patients requiring palliative care or identified under safeguarding procedures were discussed.

### Consent to care and treatment

Staff sought patients' consent to care and treatment in line with legislation and guidance.

- Staff understood the relevant consent and decision-making requirements of legislation and guidance, including the Mental Capacity Act 2005.
- When providing care and treatment for children and young people, staff carried out assessments of capacity to consent in line with relevant guidance.
- Where a patient's mental capacity to consent to care or treatment was unclear the GP or practice nurse assessed the patient's capacity and, recorded the outcome of the assessment.

### Supporting patients to live healthier lives

- HMMG ensured there was a practice nurse available at the Bosden Moor Surgery at least three days per week. This provided female patients living locally increased access to cervical screening. Data from 2015/16 for the previous provider showed cervical screening achievement was lower at 77%, than the CCG and the national average of 81%. Unverified QOF data provided by the practice for the year to 22 August 2017 showed 79% of their eligible female patient population had benefited from a cervical smear test within the preceding five years.
- The practice also referred its patients to attend national screening programmes for bowel and breast cancer screening.

## Are services effective?

(for example, treatment is effective)

- HMMG childhood immunisation rates data for childhood immunisation rates for the vaccinations given in 2015/16 indicated that the practice was achieving above the level expected with 90% or more in all the four indicators.
- Patients had access to appropriate health assessments and checks. These included health checks for new patients and NHS health checks for patients aged 35–70. Appropriate follow-ups for the outcomes of health assessments and checks were made, where abnormalities or risk factors were identified.



# Are services well-led?

Good 

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

## Our findings

Under the CQC registration of a different registered provider the practice was rated as requires improvement for providing effective and well led services. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Yogendra Dutt Sharma on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Heaton Moor Medical Group (HMMG) took over services provided at the surgery in December 2016.

This follow up focused inspection identified that HMMG had implemented effective action to improve the quality of the service provided for this key question. HMMG had successfully implemented their action plan and this included embedding systems and governance arrangements.

### Vision and strategy

HMMG practice vision of maintaining a happy practice which was responsive to people's needs and expectations was underpinned with a range of aims and objectives. The practice's objectives to provide safe and effective primary care services to patients were driven by the management team and GP partners. There was a clear understanding by all staff spoken with at Bosden Moor Surgery of the standard of service that was expected.

- HMMG had successfully implemented a strategy to improve and develop the service provided at Bosden Moor Surgery and had addressed the significant issues including poor standards of care transforming the service provided to one that was safe, effective and well led.
- The staff spoken with at this visit were committed to delivering a high quality service.

### Governance arrangements

HMMG had a strong overarching governance framework which supported the delivery of their strategy and good quality care. This governance framework had been imported and embedded into the delivery of primary care services at Bosden Moor Surgery. HMMG proactively reviewed governance and performance management arrangements proactively for the whole of the service they provided from all four GP surgeries.

The governance framework ensured:

- The practice building had been totally remodelled to a high standard, providing tastefully modern décor and facilities while retaining and enhancing patient access and improving capacity and the variety of the services provided.
- The management team and partners provided distinct leadership. There was a clear staffing structure. Staff were aware of their own roles and responsibilities and how they contributed to the practice's vision of delivering patient centred care.
- Practice specific policies and protocols were available and these supported staff to undertake their duties quickly and effectively.
- HMMG was committed to staff training and support and this ensured staff understood the purpose of policies and protocols.
- A comprehensive understanding of the performance of the whole practice was maintained. There was a strong commitment to patient centred care and effective evidence based treatment. The practice worked closely with the clinical commissioning group (CCG) to implement pilot schemes and improvement strategies. These were closely monitored and reviewed to evaluate effectiveness.
- A comprehensive programme of continuous clinical and internal audit was in place which was used to monitor quality and to make improvements. Patients were central to the provision of care and services and protocols were implemented to ensure patients received comprehensive care and support.
- Arrangements for identifying, recording and managing risks, issues and implementing mitigating actions were effectively established and this included monitoring clinical audit outcomes, significant event analysis, complaint investigations, patient feedback and outcomes data for admissions, referrals and prescribing.

### Leadership and culture

The partners in the practice demonstrated they had the experience, capacity and capability to run the practice and ensure high quality care. They told us they prioritised safe, high quality and compassionate care. Staff told us the partners were very approachable and always took the time to listen to all members of staff.

The provider was aware of and had systems in place to ensure compliance with the requirements of the duty of candour. (The duty of candour is a set of specific legal



# Are services well-led?

Good 

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

requirements that providers of services must follow when things go wrong with care and treatment). The partners encouraged a culture of openness and honesty. HMMG had systems in place to ensure that when things went wrong with care and treatment:

- The practice gave affected people support, truthful information and an appropriate apology.
- The practice kept written records of verbal interactions as well as written correspondence.

There was a clear leadership structure in place, which was further supported by a senior management team and staff felt supported by management.

- Staff told us the practice held regular team meetings. A range of meeting minutes were available.
- Staff told us there was an open culture within the practice and there were opportunities every day to raise any issues with senior managers. They said they felt confident and supported in doing so.
- Staff said they felt respected, valued and supported, particularly by the practice management team and the partners in the practice. Staff told us the partners were very approachable and always took the time to listen to all members of staff. HMMG was proactive in supporting staff to undertake training to develop their skills and abilities.

## Seeking and acting on feedback from patients, the public and staff

The practice encouraged and valued feedback from patients and staff.

- The practice had a patient participation group (PPG) which included patients from all four GP surgeries. Local advertisements in the Bosden Moor Surgery for patients to join the PPG had resulted in two patients joining the group.
- HMMG had consulted with patients about the name of the surgery, when they took over. The name Bosden Moor Surgery was the most popular choice identified by patients from 40 responses received.

- More recently a patient feedback questionnaire had been made available to patients at reception. We viewed the ten returned questionnaires and these all contained positive feedback. For example one regarding a diabetes appointment with the practice nurse stated “extremely helpful and information boosted my confidence”. Others stated, “Surgery much improved”, “Surgery now excellent”, and “the level of care and attention top notch”. All praised the practice receptionist.
- The practice had gathered feedback from staff through staff meetings, appraisals and discussion. Staff attended staff away days and the CCG training courses (masterclasses). Staff told us they would not hesitate to give feedback and discuss any concerns or issues with colleagues and management.

## Continuous improvement

The commitment and focus demonstrated by HMMG to improve and develop through continuous learning and collaborative working with others had been extended to include Bosden Moor Surgery.

- HMMG was forward thinking and worked collaboratively with the CCG in piloting new ways of working to improve patient outcomes and to expand the variety and access to a range of health care and treatment.
- The practice was also proactive in working collaboratively with multi-disciplinary teams to improve patients' experiences and to deliver a more effective and compassionate standard of care.
- The practice was a GP training practice and supported trainee GPs effectively. Plans were in place to broaden clinical training further to include nursing students.
- The practice monitored its performance and benchmarked themselves with other practices to ensure they provided a safe and effective service.