

The Thornton Practice

Inspection report

Thornton Medical Centre
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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 location

Outstanding 

Are services safe?

Good 

Are services effective?

Outstanding 

Are services caring?

Good 

Are services responsive?

Outstanding 

Are services well-led?

Outstanding 

Overall summary

We carried out an announced comprehensive inspection at The Thornton Practice on 25 October 2018 as part of our inspection programme. Our inspection team was led by a CQC inspector and included a GP specialist advisor.

At the last inspection in December 2014 we rated the practice as good overall.

Our judgement of the quality of care at this service is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information from the provider, patients, the public and other organisations.

We rated this practice as outstanding overall.

This means that:

- Patients were protected from avoidable harm and abuse and that legal requirements were met.
- Patients had good outcomes because they received effective care and treatment that met their needs.
- Patients were supported, treated with dignity and respect and were involved as partners in their care.
- People's needs were met by the way in which services were organised and delivered.
- The leadership, governance and culture of the practice promoted the delivery of high quality person-centred care.

We rated the practice as **outstanding** for providing responsive services because:

- Services were tailored to meet the needs of individual people and were delivered in a way to ensure flexibility, choice and continuity of care.
- The practice had identified areas where there were gaps in provision locally and had taken steps to address them.

We rated the practice as **outstanding** for providing well-led services because:

- Leadership, governance and culture were used to drive and improve the delivery of high-quality person-centred care.
- The practice led local initiatives to improve care and shared their best practice to the benefit of the neighbourhood.
- Staff, patients and the patient participation group (PPG) had been involved by the practice leaders in the planning and delivery of care.

- The practice had developed a vision to deliver high levels of care, staff reported high levels of motivation, work satisfaction and involvement achieving the practice vision.

We saw several areas of outstanding practice including:

- Services were tailored to meet the needs of individual people and were delivered in a way to ensure flexibility, choice and continuity of care. The practice had identified areas where there were gaps in service provision locally and had taken steps to address these, by creating new roles and processes to better meet needs. Feedback received from patients and other stakeholders on the changes made was positive. We noted increased levels of staff and patient satisfaction.
- The practice looked at demand for appointments after a long-term audit of appointment availability and use, analysing capacity and patient demand. The results were used to ensure sufficient urgent and routine appointments were provided each day, linked to demand. The impact had been a significant reduction in the volume and unpredictability of unscheduled work. The practice linked this to less pressure for staff and patients by the positive survey results. We noted that staff and patients had provided positive feedback around this area.
- The PPG which had been established three years previously had, with the support and financial backing of the practice, led and completed several successful initiatives and projects to promote patient wellbeing and care, for example the "Healthy Heroes" and "BioBlitz" initiatives they had been recognised locally and nationally as an exemplar.
- There were high levels of engagement with external partners agencies to deliver care and lifestyle improvements to patients, for example, the "Fleetwood Town community trust." and multi-agency flu clinics.
- The practice used social media innovatively to engage with patients both at the practice and in the locality.

There were areas where the provider **should** make improvements are:

- Record all safety alerts and action taken in response to them.
- Include declarations in recruitment information held.
- Document a risk assessment of content and location of emergency medicines.

Overall summary

- Check and update entries in staff training matrix against certificates of training.

Professor Steve Field CBE FRCP FFPH FRCGP
Chief Inspector of General Practice

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Population group ratings

Older people	Outstanding	
People with long-term conditions	Outstanding	
Families, children and young people	Outstanding	
Working age people (including those recently retired and students)	Outstanding	
People whose circumstances may make them vulnerable	Outstanding	
People experiencing poor mental health (including people with dementia)	Outstanding	

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser.

Background to The Thornton Practice

The Thornton Practice, Church Road, Thornton-Cleveleys, Lancashire FY5 2TZ is part of the NHS Fylde and Wyre Clinical Commissioning Group (CCG). The Thornton Practice is the registered provider. Services are provided under a general medical services (GMS) contract with NHS England. The practice building provides ground level access, which is suitable for people with mobility issues. More information about the practice is available on their website address:

There are 12,500 registered patients registered at the main practice and the branch surgery located approximately a mile away. The practice population includes a higher number (58%) of patients with a long-standing health condition, and a lower number (3%) of people unemployed, in comparison with the national average of 54% and 4% respectively. Information published by Public Health England rates the level of deprivation within the practice population group as seven on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice has four GP partners and three salaried GPs, a GP trainee (currently training at the practice), two advanced nurse practitioners, a nurse manager, four practice nurses, two health care assistants (HCAs), a health advisor and a prescribing team. The clinical team is supported by two practice managers, a patient service manager and a team of patient advisors, receptionists and administration team. The practice reception is open between 8am to 6.30pm Monday to Friday. The practice provides online access that allows patients to order prescriptions and request and cancel an appointment.

The practice does not offer extended hours, patients are signposted to other commissioned services within the locality. Out of hours service is provided by Fylde Coast Medical Service.

The practice provides the following regulated activities: treatment of disease, disorder or injury, diagnostic and screening procedures, family planning and maternity and midwifery services.