

The MacMillan Surgery

Inspection report

The St Chads Centre
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Liverpool
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L32 8RE

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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

Good



Are services safe?

Requires improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at The MacMillan Surgery on 25 September 2019. We carried out an inspection of this service due to the length of time since the last inspection. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions:

- Safe
- Effective
- Well Led

We based our judgement of the quality of care at this service 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 have rated this practice as Good overall and Good for all population groups.

We rated the practice as **requires improvement** for providing safe services because:

- The system for ensuring that all the required documentation to demonstrate safe recruitment and on-going staff suitability was not comprehensive.
- Systems were not in place to assess the security of the premises and equipment and to identify health and safety risks or to take action to address them.

We rated the practice **as Good** for providing effective and well-led services because:

- Patients' needs were assessed, and care and treatment was delivered in line with current legislation, standards and evidence-based guidance.
- The practice had a programme of quality improvement activity in place and they reviewed the effectiveness and appropriateness of the care provided.
- Staff had the skills, knowledge and experience to deliver effective care, support and treatment.
- There was good communication between staff and staff told us they felt well supported.
- The practice sought the views of patients and staff and acted on them.

- There was a focus on continuous improvement.

The area where the provider **must** make improvements are:

- Systems and processes must be in place to ensure specified information is available regarding each person employed.
- Systems must be in place to assess the security of the premises and equipment and to identify health and safety risks and to take action to address them.

(Please see the specific details on action required at the end of this report).

The areas where the provider **should** make improvements:

- Reception staff should be provided with formal training on identifying and responding to patients with suspected sepsis.
- The provider should monitor the revised process for checking uncollected prescriptions.
- Amend the procedure for monitoring high risk medicines to include the frequency at which searches are undertaken to check patients are receiving the required checks.
- Retain training certificates to demonstrate staff training.
- Formalise the system for reviewing the practice of clinical staff to ensure consultations, referrals and prescribing are appropriate.
- Review the systems in place to encourage patients to attend for cervical and bowel cancer screening and childhood immunisations to increase uptake where possible.
- Provide formal training to non-clinical staff in the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS).
- The practice should look at providing detailed personalised care plans for patients who would benefit from this.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

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

Our inspection team

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

Background to The MacMillan Surgery

The MacMillan Surgery is located in the St Chads Centre, St Chads Drive, Liverpool, Merseyside. The provider is Dr Kok Foon Thong who is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The MacMillan Surgery is situated within the NHS Knowsley Clinical Commissioning Group (CCG) and provides services to approximately 5,372 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The MacMillan Surgery is operated by Dr Kok Foon Thong who works as a senior GP at the practice. There are four salaried GPs, three practice nurses, a health care assistant and a pharmacist. An advanced nurse practitioner is about to commence employment at the practice. The practice is supported by reception and administrative staff and an office manager. The office manager is currently being supported to carry out the role of practice manager by two experienced practice managers who work on a sessional basis at the service.

The National General Practice Profile states that 98% of the practice population is from a white background. Information published by Public Health England, rates the level of deprivation within the practice population group as one, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The majority of patients are within the aged 15 – 44 age group.

The practice is open from 8am – 6.30pm Monday, Wednesday, Thursday and Friday and until 7.30pm on Tuesdays. If patients need to see a GP urgently outside of these hours they were directed to NHS 111.

The practice is on one level and is accessible via stairs and a lift. The facilities include toilets, waiting area, private consulting / treatment rooms. Car parking is available on site and at fee paying car parks nearby. The practice has links to transport services. There is a pharmacy located within the building which also contains a number of health care services, such as x-ray, midwifery, walk-in- centre, community matron, Macmillan Service, school nursing and podiatry.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed
The provider had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed.

Regulated activity

Diagnostic and screening procedures
Maternity and midwifery services
Surgical procedures
Treatment of disease, disorder or injury

Regulation

Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment
The provider did not have robust systems in place to assess the security of the premises and equipment and to identify health and safety risks or to take action to address them.