

Helsby Health Centre

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 

Are services well-led?

Good 

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of Helsby Health Centre on 31 August 2016. The overall rating for the practice was requires improvement. The full comprehensive report on the August 2016 inspection can be found by selecting the 'all reports' link for Helsby Health Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 28 February 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 31 August 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The premises were safely maintained.

- The governance systems had been improved to ensure that the required recruitment information was obtained prior to the employment of staff.
- The governance systems had been improved to ensure that staff had received the training required for their roles.

In addition, the practice had made the following improvements:

- A record was made of action taken following the receipt of patient safety alerts.
- The storage of emergency medication had been reviewed.
- A system had been put in place to record the receipt and allocation of printable prescriptions.
- An infection control audit had taken place and the actions arising from this were being monitored.
- The system for recording when children do not attend for appointments had been reviewed.

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 practice had addressed the issues identified during the previous inspection. Appropriate recruitment checks were in place and staff had received the training they required to promote a safe working environment and working practices. Safety checks of the premises identified as not being completed at the last inspection had been carried out.

In addition, the practice was now making a record of action taken following the receipt of patient safety alerts. The storage of emergency medication had been reviewed. A system had been put in place to record the receipt and allocation of printable prescriptions. An infection control audit had taken place and the actions arising from this were being monitored. The system for recording when children do not attend for appointments had also been reviewed.

Good 

Are services well-led?

The practice is rated as good for providing well-led services. Improvements had been made to the governance systems to ensure the premises were safe, staff were safely recruited and had received the training they required for their roles.

Good 

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

The provider had resolved the concerns for safety and well-led identified at our inspection on 31 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for safety and well-led identified at our inspection on 31 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for safety and well-led identified at our inspection on 31 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety and well-led identified at our inspection on 31 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety and well-led identified at our inspection on 31 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety and well-led identified at our inspection on 31 August 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Helsby Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

The inspection was undertaken by a CQC inspector.

Background to Helsby Health Centre

Helsby Health Centre is responsible for providing primary care services to approximately 9050 patients. The practice is situated in Lower Robin Hood Lane, Helsby, Cheshire. There is a branch practice which is situated in School Lane in the village of Elton, Cheshire approximately three miles from the main health centre. The practice is based in an area with lower levels of economic deprivation when compared to other practices nationally. The number of patients with a long standing health condition is about average when compared to local and national averages.

The staff team includes seven partner GPs, one salaried GP, four practice nurses, two health care assistants, practice manager and administration and reception staff. The practice hosts medical students from the University of Liverpool.

Helsby Health Centre is open 8am to 6.30pm Monday to Friday. The branch practice is open from 8.30am to 12.30pm Monday to Friday. An extended hour's service for routine appointments and an out of hour's service are commissioned by West Cheshire CCG and provided by Cheshire and Wirral Partnership NHS Foundation Trust. The extended hour's service operates from Helsby Health Centre on Monday and Tuesday evenings.

The practice has a General Medical Services (GMS) contract. The practice offers a range of enhanced services such, minor surgery, near patient testing anti-coagulation and spirometry.

Why we carried out this inspection

We undertook a comprehensive inspection of Helsby Health Centre on 31 August 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 following the inspection on 31 August 2016 2016 can be found by selecting the 'all reports' link for Helsby Health Centre our website at www.cqc.org.uk.

We undertook an announced focused inspection on 28 February 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

The inspector :-

- Carried out a site visit
- Spoke with the practice manager and registered manager
- Reviewed documents

Are services safe?

Our findings

At our previous inspection on 31 August 2016 we rated the practice as requires improvement for providing safe services. Improvements were needed to the recruitment practices to ensure the suitability of staff for their roles. Improvements were needed to the management of health and safety to ensure the premises were safe and improvements were needed to ensure staff had the training they required to promote a safe working environment and working practices.

When we undertook a follow up inspection on 28 February 2017 we found that improvements had been made. We looked at a sample of recruitment records and found that all the necessary recruitment information had been obtained for two clinical members of staff and two locum GPs. All staff who acted as chaperones had received a Disclosure and Barring Service (DBS) check. These checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable.

Records showed that staff had received the training required for their roles including adult and child safeguarding, infection control, fire safety and information

governance. A health and safety handbook had been introduced for new staff. An on-line health and safety training course had been identified and it was planned that all staff would complete this.

Records showed that the checks of the premises that were outstanding at the last inspection had been completed. This included in-house checks of the fire alarm, health and safety risk assessments of the premises, fire risk assessments, review of the asbestos risk assessment and electrical wiring inspections. The electrical wiring inspection for the Helsby practice indicated that work was needed and dates to undertake this work were being identified. A fire drill had taken place at the main practice but not at the branch practice. This was addressed following the inspection.

In addition we found that further improvements had been made to ensure the safety of the service. The practice was now making a record of action taken following the receipt of patient safety alerts. The storage of emergency medication had been reviewed. A system had been put in place to record the receipt and allocation of printable prescriptions. An infection control audit had taken place and the actions arising from this were being monitored. The system for recording when children do not attend for appointments had also been reviewed.

Are services well-led?

Good 

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

Our findings

At our previous inspection on 31 August 2016 we rated the practice as requires improvement for providing well-led services. Improvements were needed to the governance systems to ensure the premises were safe, staff were safely recruited and had received the training they required for their roles.

When we undertook a follow up inspection on 28 February 2017 we found that improvements had been made. Systems had been introduced to ensure appropriate recruitment checks were carried out and staff had received the training they required to promote a safe working environment and working practices. Safety checks of the premises identified as not being completed at the last inspection had been carried out and a system had been introduced to ensure these checks were completed in accordance with the required frequencies.