

# Clifton Medical Centre

## Inspection report

Clifton Lane  
West Bromwich  
B71 3AS  
Tel: 01215887989

Date of inspection visit: 13 May 2021 to 21 May 2021  
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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

Requires Improvement



Are services safe?

Good



Are services effective?

Requires Improvement



Are services caring?

Requires Improvement



Are services responsive to people's needs?

Good



Are services well-led?

Good



# Overall summary

We carried out an announced inspection at Clifton Medical Centre between 13 to 21 May 2021. Overall, the practice is rated as Requires Improvement.

Set out the ratings for each key question

Safe - Good

Effective – Requires Improvement

Caring – Requires Improvement

Responsive - Good

Well-led - Good

Following our previous inspection on 19 December 2019, the practice was rated Inadequate overall and for all key questions, except for providing caring services which was rated as requires improvement and placed into special measures. A further inspection was carried out in January 2020 and a GP Focused Inspection Pilot (GPFIP) between 14 September 2020 and the 2 October 2020 was also carried out to check what improvements had been made.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Clifton Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on any breaches of regulations and ‘shoulds’ identified in the previous inspection.

## How we carried out the inspection/review

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Completing clinical searches on the practice’s patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A shortened site visit

## Our findings

We based our judgement of the quality of care at this service on a combination of:

# Overall summary

- 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 Requires Improvement overall and requires improvement for all population groups, except for older people and people whose circumstances make them vulnerable which we have rated as good.**

We found that:

- The practice had implemented effective systems to ensure care was provided in a way that patients safe and protected them from avoidable harm. This included safeguarding arrangements, recruitment processes and the management of medicines.
- The practice had strengthened their management of risk and we found infection control processes in place to ensure the safety of staff and patients, and a review of the risks in relation to the premises had been completed with an action plan in place to mitigate any future risks.
- The practice had implemented a range of processes to improve and strengthen their systems. Continuous monitoring of practice procedures, clinical outcomes, clinical registers and staff training was now in place to ensure improvements were maintained.
- Regular audits had been introduced to monitor quality improvement and ensure the information that was held for each patient was accurate.
- We found significant improvements in the management of patients' care and treatment. This included the appropriate monitoring of patients with long term conditions, the prescribing of medicines and the review of patients on high risk medicines.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. To reduce the risk of spreading the infection, patients who required a face to face appointment were seen at the amber site at Stone Cross Medical Centre.
- Governance arrangements had been strengthened to ensure risks to patients were considered, managed and mitigated appropriately.
- The practice had implemented a system of peer review for the clinical team. On reviewing a sample of patient records we found prescribing decisions were in line with recognised guidance and consultations contained relevant information.

Whilst we found no breaches of regulations, the provider **should**:

- Continue to encourage patients to attend cervical screening appointments.
- Take action to improve the uptake of childhood immunisations.
- Implement stronger systems to ensure DNACPR information is recorded appropriately.

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

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector who undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Clifton Medical Centre

Clifton Medical Centre is located at West Bromwich, an area in the West Midlands. There is a branch site situated at Victoria Health Centre in Smethwick. The practice has good transport links and there is a pharmacy located nearby.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, surgical procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury. These are delivered from both sites. During the current pandemic, no face to face appointments are offered at either Clifton Medical Centre or Victoria Health Centre. Patients who need to see a GP or nurse are directed to the amber site at Stone Cross Medical Centre.

Clifton Medical Centre is situated within the Sandwell and West Birmingham Clinical Commissioning Group (CCG) and provides services to 5,862 patients under the terms of a general Medical Services contract (GMS). This is a contract between general practices and NHS England for delivering services to the local community. The principal GP, Dr Devanna Manivasagam is registered with CQC as a GP partnership. Dr Devanna Manivasagam is also the principal GP of three other GP practices. These include, Swanpool Medical Centre, Bean Road Medical Centre and Stone Cross Medical Centre.

Practice staffing consists of three GP partners (one male and two female), two salaried GPs (both male) and five regular locum GPs. There are two practice nurses, a practice manager, a senior receptionist and several administration staff. The provider also employs an Executive Manager and a clinical pharmacist who work across all sites.

The practice opening hours are Monday to Friday 8am to 6.30pm. The practice is part of a primary care network and patients have access to appointments from 9am to 12pm Saturday and Sunday at the local hub. When the practice is closed, out of hours cover is provided through the NHS 111 service.

The National General Practice Profile states that 58.4% of the practice population are from a white ethnicity. Information published by Public Health England, rates the level of deprivation within the practice population group as two, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.