

Tudor Practice Stockland Green Limited

Quality Report

192 Reservoir Road Birmingham B23 6DJ

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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 caring?	Good	

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Tudor Practice Stockland Green Limited on the 2 and 17 November 2016. The overall rating for the practice was good; however, the practice was rated as requires improvement for providing caring services. The full comprehensive report on the November 2016 inspection can be found by selecting the 'all reports' link for Tudor Practice Stockland Green Limited on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 7 February 2018 to confirm that the practice had carried out their plan to make improvements in relation to measures taken to improve patients' satisfaction rates in areas such as patient involvement and access; as well as, improving measures to gain patient feedback and the uptake of national screening programmes. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

 Members of the management team were aware of the issues regarding phone access and we saw evidence of actively communication with the Clinical Commissioning Group (CCG) to explore options regarding commissioning a more effective phone system. Staff explained that there was online appointment booking facilities and patients were also able to place repeat prescription requests using the online facilities. Staff continued to promote their website and social media pages to raise awareness regarding these options. Data provided by the practice showed 26% of patients were registered for online services; this was above the contract requirements'.

- There were variations in patient satisfaction rates in relation to access. For example, satisfaction with opening hours had improved by 1% since the 2016 survey; however, access to appointments showed a 15% decline. In response to the national GP patient satisfaction scores in relation to access staff explained the practice were no longer closed on a Thursday afternoon.
- Following the increased opening hours, in order to monitor patient satisfaction the practice had carried out a practice led survey between August and December 2017. Forty patients completed and returned a survey form. Data showed patients were satisfied with the practice opening times, getting through by phone and GP consultations.
- Staff explained that since our November 2016 inspection, they had continued efforts to set up a Patient Participation Group (PPG). For example,

posters were located in the reception area; non-clinical staff actively spoke with patients discussing the benefits of joining the PPG. As a result, the practice recruited five active members and were holding regular meetings to discuss areas of improvement.

 The practice continued to encourage patients to engage with the cervical screening programme. For example, we saw posters in the reception area in a variety of languages. The practice sent out screening text reminders, appointment letters to women who missed three appointments and the clinical system identified patients which allowed GPs to proactively discuss the benefits of cervical screening during consultations'. The practice provided data taken from their clinical system which showed that uptake rates were 68% at the time of our inspection. We also saw evidence demonstrating all identified patients had been sent an appointment reminder letter.

However, there were also areas of practice where the provider needs to make further improvements.

In addition the provider should:

• Continue monitoring appointment and phone access to increase patient satisfaction.

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

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Families, children and young people

Good



Areas for improvement

Action the service SHOULD take to improve

• Continue monitoring appointment and phone access to increase patient satisfaction.



Tudor Practice Stockland Green Limited

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC Lead Inspector.

Background to Tudor Practice Stockland Green Limited

Tudor Practice Stockland Green Limited is located in Stockland Green Primary Care Centre Erdington, Birmingham; which is a multipurpose modern built building shared with other health care providers, providing NHS services to the local community.

Based on data available from Public Health England, the levels of deprivation in the area served by Tudor Practice Stockland Green Limited showes the practice is located in a more deprived area than national averages, ranked at one out of 10, with 10 being the least deprived. (Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial). The practice serves a higher than average patient population aged between five to nine and 15 to 39. The number of patients aged 40 and over is below local and national averages. Based on data available from Public Health England, the Ethnicity estimate is 6% Mixed, 17% Asian and 14% Black.

The patient list is 4,335 of various ages registered and cared for at the practice. Services to patients are provided under a General Medical Services (GMS) contract with Birmingham Cross City Clinical Commissioning Group (CCG). GMS is a contract between general practices and the CCG for delivering primary care services to local communities.

The surgery has expanded its contracted obligations to provide enhanced services to patients. An enhanced service is above the contractual requirement of the practice and is commissioned in order to improve the range of services available to patients.

On-site parking is available with designated parking for cyclists and patients who display a disabled blue badge. The surgery has automatic entrance doors and is accessible to patients using a wheelchair and push chairs.

Practice staffing comprises of one principal GP (male); who does not undertake any clinical sessions at the practice; however, provides managerial and clinical support to a salaried GP (male) and a practice manager who is also the company director. The clinical team also includes an advanced nurse practitioner, a practice nurse and a health care assistant. The non-clinical team consists of an assistant practice manager and a team of secretaries and receptionists.

The practice is open between 8am and 8pm on Mondays and 8am to 6.30pm Tuesdays to Fridays.

GP consulting hours are available between 8am and 7.30pm on Mondays; and between 8am and 5.30pm Tuesdays, Wednesdays, Thursdays and Fridays. The practice is part of the Primary Care Commissioning Framework (PCCF) and work jointly with other practices to improve access. This enabled access to appointments from four neighbouring practices between 8am and 8pm Mondays to Saturday.

Detailed findings

The practice has opted out of providing cover to patients in their out of hours period. During this time, services are provided by Birmingham and District General Practitioner Emergency Rooms (BADGER) medical services.

Why we carried out this inspection

We undertook a comprehensive inspection of Tudor Practice Stockland Green Limited on the second and 17 November 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall; however, requires improvement for providing caring services. The full comprehensive report on the inspection on November 2016 inspection can be found by selecting the 'all reports' link for Tudor Practice Stockland Green Limited on our website at www.cqc.org.uk.

This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care provided and to confirm improvements had been made.



Are services caring?

Our findings

At our previous inspection on 2 and 17 November 2016, we rated the practice as requires improvement for providing caring services as we found that results from 2016 national GP patient survey showed that patient satisfaction in areas such as consultation and GPs involving patients in their treatment as well as access was below local and national averages.

These arrangements had improved when we undertook a follow up inspection on 7 February 2018. The practice is now rated as good for providing caring services.

Kindness, respect and compassion

All of the 13 completed Care Quality Commission comment cards we received were positive about the service experienced. For example, patients referred to clinical and non-clinical staff as helpful, friendly and fantastic. Comments showed that patients felt staff treated them with dignity and respect.

As a result of actions taken since our previous inspection to encourage engagement in a patient participation group the practice formed a PPG in December 2017. We saw that there were five active members; the management team explained that the practice held two meetings since the group started. Meeting minutes we viewed demonstrated active discussions regarding areas of concern such as telephone access, encouraging the uptake of national screening and analysing the national GP patient survey results; as well as the practice own survey. We also saw discussions regarding the possibility of setting up a virtual PPG to run alongside the active group for patients who preferred electronic communication.

The national GP patient survey results were published July 2017, the results showed improvements in patients satisfaction and the practice was mainly performing comparable to local and national averages; however, remained below average regarding involving patients in decisions about their care. 380 survey forms were distributed and 87 were returned. This represented a 23% response rate which equated to 2% of the practice's patient list.

Results from the 2017 national GP patient survey showed areas of improvement in patients' satisfaction. For example, the practice was comparable to local and national averages for its satisfaction scores in areas such as consultations with GPs.

- 84% of patients said the GP was good at listening to them compared to the clinical commissioning group (CCG) average of 88% and the national average of 89%, demonstrating an increase of 9%.
- 81% of patients said the GP gave them enough time compared to the CCG and national average of 86%, demonstrating a 5% increase.
- 94% of patients said they had confidence and trust in the last GP they saw compared to the CCG average of 96% and the national average of 95%, demonstrating a 15% increase.
- 78% of patients said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 85% and a national average of 86%, showing a 9% improvement in patient satisfaction.
- 86% of patients said the last nurse they spoke to was good at treating them with care and concern compared to the CCG average of 88% and a national average of 91%, demonstrating a 2% increase.
- 87% of patients said they found the receptionists at the practice helpful compared to the CCG average of 83% and the national average of 87%, demonstrating a 4% increase in patient satisfaction.

Members of the management team explained that as a response to the 2016 GP patient survey the practice carried out a recruitment campaign. The practice was successful with the recruitment of clinical staff which enabled the practice to reduce the use of locums to cover clinics. The practice also recruited non-clinical staff. We were told that on some Saturdays the practice nurses would visit patients with learning disabilities as part of a practice led initiative to engage with patients who would not normally attend the practice. Data provided during our inspection showed that 14 health checks had been carried out the first week in February 2018.

The practice continued to actively encourage the completion of the Friends and Family Test. Data provided by the practice showed in December 2017 there were 31 completed FFTs, 25 (81%) would recommend the practice to a family or friend. During January 2018 the FFT completion rate increased to 44, data provided by the



Are services caring?

practice showed that 39 (89%). Comments from the FFT results we viewed described staff as professional, friendly, attentive, compassionate and the clinical team always listens to patients.

Involvement in decisions about care and treatment

Patients' feedback from comment cards we received was positive about their experience and patients felt involved in their care and treatment they receive.

Results from the national GP patient survey were also aligned with these comments. For example, results showed patients respond positively to questions about their involvement in planning and making decisions about their care and treatment. Results were comparable to local and national averages. For example:

• 82% of patients said the last GP they saw was good at explaining tests and treatments compared to the CCG average of 87% and national of 86%, demonstrating a 15% increase since the 2016 survey.

• 82% of patients said the last nurse they saw was good at involving them in decisions about their care compared to the CCG average of 83% and a national average of 85%, demonstrating a 6% increase.

However, patient satisfaction remained below local and national averages for the following:

• 71% of patients said the last GP they saw was good at involving them in decisions about their care compared to the CCG and a national average of 82%, demonstrating a 3% increase.

The practice carried out their own surveys between August and December 2017 to assess patients' level of satisfaction. Practice staff actively handed out a total of 40 survey forms which were all returned. Data provided by the practice showed high levels of patient satisfaction across a number of areas. For example, data showed 100% of patients involved in the survey felt the last GP they saw was good at involving them in decisions about their care. Data also showed that patients were satisfied with appointment access.