

Yardley Green Medical Centre

Inspection report

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Birmingham
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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?

Requires Improvement



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at Yardley Green Medical Centre on 26 October 2023. Overall, the practice is rated as requires improvement.

Safe - good

Effective – requires improvement

Caring – requires improvement

Responsive - requires improvement

Well-led - good

Following our previous inspection in July 2017, the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Yardley Green Medical Centre on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities. The focus of inspection included a review of all key questions.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice’s patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A site visit.

Our findings

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 found that:

Overall summary

- The practice provided care in a way that kept patients safe and protected them from avoidable harm. This included safeguarding systems, safe recruitment, infection prevention and control and the management of the premises and associated risks.
- Our review of clinical records found safe management of medicines, in particular those that required ongoing monitoring due to adverse risks. However, processes for undertaking medicines reviews and alerts required improvement.
- Systems were in place to support the practice to learn and make improvements when incidents and complaints occurred.
- Patients received effective care and treatment that met their needs. Our review of clinical records found appropriate follow up of patients with or at risk of long-term conditions with the exception of asthma where improvements were needed to follow up patients requiring high doses of steroids.
- Uptake of childhood immunisations and cancer screening programmes was below national targets and national averages.
- Patient feedback from various sources was mixed about the way staff treated and involved them. Results from the GP national patient survey on questions relating to patient experience were lower than local and national averages.
- The practice was taking significant action to try and improve access to services, which included a new telephone system, increased staffing and expansion of the premises. Early data available was showing signs of improvement, helping patients to access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care. There was a strong emphasis of working with partners to tackle health inequalities.
- The practice provided a supportive culture with clear direction for the future of the service.

We found a breach of regulations. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.

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

- Update policies accordingly, to ensure information contained within them is current and correct.
- Take action to improve uptake of cervical screening and other other cancer screening programmes.
- Take action to improve patient experience and patient involvement in the service to drive improvement.
- Continue to monitor access to ensure improvements are being delivered and take further action as needed.
- Improve systems and processes for the management of medicine and safety alerts.
- Take action to improve the identification of carers so that they may receive appropriate support.

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and 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 Yardley Green Medical Centre

Yardley Green Medical Centre is located in Birmingham at:

77 Yardley Green Road

Birmingham

West Midlands

B9 5 PU

The premises are purpose built for the provision of primary medical services. Yardley Green Medical Centre is adjoined to another GP practice and pharmacy.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the Birmingham and Solihull Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 11,310. This is part of a contract held with NHS England.

The practice is part of the Birmingham East Central Primary Care Network (PCN). A PCN is a wider network of GP practices that work together to address local priorities in patient care.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the lowest decile (one of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 45.2% Asian, 39.5% White, 8.6% Black, and 6.7% Mixed or other minority ethnic.

The age distribution of the practice population shows the practice is slightly younger than local and national averages. The ration of male and female patients registered at the practice is broadly similar.

The practice has a team of 6 GPs (male and female) including 3 partners, 1 Advanced Nurse Practitioner (ANP), 3 Clinical Pharmacists, 3 Practice Nurses (2 are independent prescribers), 1 Nurse Associate, 2 Healthcare Assistants. The clinical staff are supported by a Practice Manager, Reception Manager, an Administration Manager and a team of admin and reception staff.

The practice is open between 8.30am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access appointments available at the practice on a Thursday evening 6.30pm to 8pm and on a Saturday 10am to 2pm.

When the practice is closed primary medical services are available through an out of hours provider (BADGER).

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• Medicines reviews did not demonstrate all medicines that a patient was taking were reviewed.• Patients with asthma on high doses of asthma did not always receive appropriate follow up.• There was low uptake of child immunisations. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>