

Khattak Memorial Surgery

Quality Report

58 Benton Road, Birmingham, West Midlands, B11 1TX Tel: 0121 773 4622 Website: www.khattakmemorialsurgery.co.uk

Date of inspection visit: 22 August 2017 Date of publication: 27/09/2017

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

Contents

Summary of this inspection	Page	
Overall summary	2	
The five questions we ask and what we found	4	
The six population groups and what we found	5	
Detailed findings from this inspection		
Our inspection team	6	
Background to Khattak Memorial Surgery	6	
Why we carried out this inspection	6	
How we carried out this inspection	6	
Detailed findings	8	

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Khattak Memorial Surgery on 17 January 2017. Overall the practice was rated as requires improvement. The full comprehensive report on the January 2017 inspection can be found by selecting the 'all reports' link for Khattack Memorial Surgery on our website at www.cqc.org.uk.

This inspection was a follow up focused inspection carried out on 22 August 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 17 January 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice rating is now good.

Our key findings were as follows:

• Staff were aware of the location of emergency equipment to assure themselves that they all knew

how to assist in the event of an emergency. We were shown evidence that demonstrated this had been discussed in staff meetings and staff had been physically shown the location.

- The practice had reviewed the information governance policy to ensure that staff undertook the recording and management of all patient data in accordance with recommended guidance.
- The practice had introduced an appropriate method of recording fridge temperatures, cleaning activity and safeguards against the risk of legionella to ensure that the practice was accountable and auditable.
- Cleaning checks were recorded daily.
- The practice continued to address issues raised in the national patient survey and explore ways to gather up to date patient feedback to assure themselves that improvements were implemented, reviewed and sustained. For example, from September 2017, the practice's telephone lines would be open 30 minutes earlier.
- Registration details have been updated with the Care Quality Commission to include all current GP partners in the practice.

Summary of findings

- Regular fire drills had been implemented at the branch site.
- The practice had improved the availability of copies of the business continuity plan at both sites

managed by the provider to cover eventualities such as power failure or another unforeseen eventuality. Copies were kept within the practice and off-site by GP partners and the practice manager.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

During our comprehensive inspection on 17 January 2017, we identified a breach of legal requirement. The practice did not have adequate arrangements regarding emergency equipment procedures and cleaning procedures. Additionally, risks regarding legionella and fire drills were not adequate. During our follow up focused inspection on 22 August 2017 we found that the practice had taken action to address the areas identified in the January 2017 inspection. The practice is now rated as good for providing safe services.

- Staff were aware of the location of emergency equipment to assure themselves that they all knew how to assist in the event of an emergency. We were shown evidence that demonstrated this had been discussed in staff meetings and staff had been physically shown the location.
- The practice had introduced appropriate methods of recording fridge temperatures, cleaning activity and safeguards against the risk of legionella to ensure that the practice was accountable and auditable.
- Regular fire drills had been implemented at the branch site.
- The practice had improved the availability of copies of the business continuity plan at both sites managed by the provider to cover eventualities such as power failure or another unforeseen eventuality. Copies were now kept off-site by GP partners and the practice manager.

Are services well-led?

During our comprehensive inspection on 17 January 2017, we identified a breach of legal requirement. The practice did not have adequate arrangements regarding information governance. During our follow up focused inspection on 22 August 2017 we found that the practice had taken action to address the areas identified in the January 2017 inspection. The practice is now rated as good for providing well led services.

• The practice had reviewed the information governance policy to ensure that staff undertook the recording and management of all patient data in accordance with recommended guidance.

Good

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 17 January 2017 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 17 January 2017 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 17 January 2017 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 17 January 2017 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 17 January 2017 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 17 January 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.	Good



Khattak Memorial Surgery Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector who was accompanied by a GP specialist advisor.

Background to Khattak Memorial Surgery

Khattak Memorial Surgery, 58 Benton Road, Sparkbrook, Birmingham, West Midlands, B11 1TX, provides services for 4822 patients. The provider operates from two locations, both of which were visited as part of this inspection and are situated within the Birmingham South and Central Clinical Commissioning Group. The provider delivers primary medical services under the terms of a Personal Medical Services (PMS) contract.

Services are provided within converted buildings which have been adapted to provide access for people with limited mobility. Both the main location at Sparkbrook and the branch surgery, located at 182 Mansel Road, Small Heath, Birmingham, B10 9NL are owned by the partners. The provider is located in an inner city area to the central south east of Birmingham.

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 population is mainly of South Asian ethnicity, currently 90%, with the remaining population being of east European or African ethnicity. Khattak Memorial Surgery is registered as a partnership provider and has three partner GPs (two male and one female), with two salaried GPs (both female). The practice also has a part time female practice nurse who works 28 hours a week plus a female specialist domiciliary care worker who works 17 hours a week. A locum pharmacist attends for one afternoon a week and a female health care assistant works 30 hours a week and divides her time between phlebotomy, smoking cessation advice and reception duties.

The practice manager is supported by five predominantly part time reception and administrative staff.

The practice at Benton Road is open Monday and Tuesday, 8am to 7pm, Wednesday 8am to 7.30pm, Thursday and Friday from 8am to 6.30pm. Consultations are available from Monday 9am to 1pm, 2pm to 5pm, 4pm to 7pm, Tuesday 9am to 1pm, 4pm to 7pm, Wednesday 9.30am to 12.30pm, 1.30pm to 7.30pm, Thursday 9.30am to 6.30pm, Friday 9.30am to 12.30 and 3.30pm to 6.30pm. The branch practice in Small Heath is open from 10am to 2pm, Monday to Friday and consultations are available on Monday between 10.30am to 1pm, Tuesday 11.30am to 2pm, Wednesday 11.30am to 2pm, Thursday 10am to 1pm and Friday 10am to 1pm.

When the surgery is closed patients are advised of the NHS 111 service for non –urgent medical advice and are directed to a local out of hours provider, Primecare.

Why we carried out this inspection

We undertook a comprehensive inspection of Khattak Memorial Surgery on 17 January 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires

Detailed findings

improvement. The full comprehensive report following the inspection in January 2017 can be found by selecting the 'all reports' link for Khattak Memorial Surgery Practice on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Khattak Memorial Surgery on 22 August 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

During our inspection we:

- Spoke with the lead GP partner and practice manager.
- Reviewed information provided by the practice prior to the inspection.
- Spoke with GPs, nursing, reception and administration staff.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 17 January 2017 we rated the practice as requires improvement for providing safe services. The arrangements regarding staff awareness of the location of emergency equipment, recording cleaning checks and fridge temperatures, risks regarding legionella and fire drills were not adequate.

These arrangements had improved when we undertook a follow up focused inspection on 22 August 2017, and the practice is now rated as good for providing safe services.

Overview of safety systems and processes

The practice had systems, processes and practices in place which mostly kept patients safe and safeguarded from abuse, which included:

- Cleaning checks were recorded on a daily basis.
- Staff were aware of the location of emergency equipment to assure themselves that all staff knew how to assist in the event of an emergency. We were shown evidence that demonstrated this had been discussed in staff meetings and staff had been physically shown the location.
- The practice had introduced appropriate methods of recording fridge temperatures, cleaning activity and safeguards against the risk of legionella to ensure that the practice was accountable and auditable.

Monitoring risks to patients

Risks to patients were assessed and well managed.

Arrangements to deal with emergencies and major incidents

The practice had satisfactory arrangements in place to respond to emergencies and major incidents.

- There was an instant messaging system on the computers in all the consultation and treatment rooms which alerted staff to any emergency.
- All staff received annual basic life support training and there were emergency medicines available in a secure area of the practice. M
- The practice had a defibrillator available on the premises and oxygen with adult and children's masks. A first aid kit and accident book were available.
- The practice had a comprehensive business continuity plan in place for major incidents such as power failure or building damage. The plan included emergency contact numbers for staff. The plan was saved on the computer system and on a hard drive also located off site. There were also physical copies kept off-site by GP partners and the practice manager.

Are services well-led?

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

Our findings

At our previous inspection on 17 January 2017 we rated the practice as requires improvement for providing well-led services. The arrangements regarding governance were not adequate.

These arrangements had improved when we undertook a follow up focused inspection on 22 August 2017, and the practice is now rated as good for providing well-led services.

Governance arrangements

The practice had an overarching governance framework which supported the delivery of the strategy and good quality care.

- The practice had reviewed the information governance policy to ensure that staff undertake the recording and management of all patient data in accordance with recommended guidance. All staff had the means to record their clinical activity using a personalised NHS computer access card.
- The practice had a comprehensive business continuity plan in place for major incidents such as power failure or building damage. The plan included emergency contact numbers for staff. The plan was saved on the computer system and on a hard drive also located off site. There were also physical copies kept off-site by GP partners and the practice manager.
- Regular fire drills had been implemented at the branch site and were regularly carried out at the branch site and also the main practice.