

Highley Medical Centre

Inspection report

Bridgnorth Road
Highley
Bridgnorth
WV16 6HG
Tel: 01746861572

Date of inspection visit: 4 July 2022
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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?	Requires Improvement	
Are services effective?	Requires Improvement	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Requires Improvement	

Overall summary

We previously carried out an announced comprehensive inspection at Highley Medical Centre on 15 November 2021 following changes in registration, legal entity and concerns we had received in relation to care and treatment and good governance. The practice was rated inadequate overall, placed into special measures and warning notices in relation to safe care and treatment and good governance were issued.

We carried out an announced focused inspection at Highley Medical Centre on 7 March 2022 to ensure that the issues identified in the two warning notices had been addressed. The reports for the November 2021 and March 2022 inspections can be found by selecting the 'all reports' link for Highley Medical Centre on our website at www.cqc.org.uk

We carried out an announced comprehensive inspection at Highley Medical Centre on 4 July 2022. At this inspection we followed up on improvements made and the breaches of regulations identified at the previous comprehensive inspection on 15 November 2021.

Overall, the practice is rated as Requires Improvement. We rated the key questions:

Safe: Requires improvement

Effective: Requires improvement

Caring: Good

Responsive: Good

Well-led: Requires improvement

How we carried out the inspection

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:

- Conducting staff interviews using video conferencing
- 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
- Reviewing staff feedback surveys
- A 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.

At this inspection, we found that the provider had satisfactorily addressed the issues identified in the requirement notices and improvements had been made.

We rated the practice as requires improvement for providing a safe service because:

- Although systems for monitoring the safe prescribing of high-risk medicines had improved across all high-risk medicines prescribed, further improvements were required to ensure all patients received the required monitoring.
- Further learning and improvement was required in the management of significant events and complaints to ensure they were handled in line with policy, allowed reflection and learning to improve patientcare.
- Although improved, the system to review and act on patient safety alerts was not always effective in ensuring that medicines continued to be prescribed safely.

We rated the practice as requires improvement for providing an effective service because:

- Some patients with long-term conditions had not received the required monitoring.
- Clinicians had not always worked in line with national guidance when treating patients.
- The practice uptake for cervical screening had improved but was below the national 80% target.

We rated the practice as good for providing a caring service because:

- Staff treated patients with kindness, respect and compassion.
- There were systems in place to support carers.

We rated the practice as good for providing a responsive service because:

- There had been a decline in complaints relating to access to appointments and overall, the practice was more responsive to the needs of their patients.
- The management of complaints had improved, and patients advised of the escalation process should they not be happy with the outcome of their complaints.

We rated the practice as requires improvement for providing a well-led service because:

- Governance structures, processes and systems had been developed but were not yet fully embedded into practice.
- Processes for managing risks, issues and performance had improved but not yet fully embedded into practice.

We found one breach in regulations. The provider **must:**

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

In addition, the provider **should:**

- Ensure staff prescribe in line with national guidance.
- Further develop structured medication reviews to ensure patients overdue blood monitoring is identified and acted upon.
- Further develop a programme of targeted quality improvement.

I confirm that this practice has improved sufficiently to be rated Requires Improvement overall. Therefore, I am taking this service out of special measures.

Overall summary

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

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

Background to Highley Medical Centre

Highley Medical Centre is located in Shropshire at:

Bridgnorth Road

Highley

Bridgnorth

Shropshire

WV16 6HG

The provider is registered with Care Quality Commission (CQC) as a partnership to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury and surgical procedures.

The practice is a member of the NHS Shropshire, Telford and Wrekin Integrated Care System and delivers General Medical Services (GMS) to a population of 3,292 patients. This is part of a contract held with NHS England. The practice is part of South East Shropshire Primary Care Network, a wider network of GP practices that work collaboratively to deliver primary care services.

Information published by Public Health England report deprivation within the practice population group as seven on a scale of 1 to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

According to the latest available data, the ethnic make-up of the practice area is 98.7% White and 0.7% Asian.

The practice team consists of the following part-time staff: two GP partners, a locum GP, a salaried GP, one practice nurse, a clinical pharmacist, a locum clinical pharmacist, a health care assistant, a managing partner, an assistant practice manager, six reception/administrative staff, two domestic staff and one community and care co-ordinator. A clinical pharmacist and social prescriber work part-time at the practice funded by the primary care network (PCN).

The practice is open between 8.30am and 6pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments. Out of hours services are provided by Shropshire Doctors Co-operative Ltd (Shropdoc) via NHS 111.

Further information about the practice is available via their website at: www.highleymedicalcentre.co.uk

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 Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment.</p> <p>In Particular:</p> <ul style="list-style-type: none">• Processes to act on Medicines and Healthcare products Regulatory Agency (MHRA) alerts were not fully incorporated into clinical practice.• Significant events and complaints were not always handled in line with policy to improve patient care.• Patients prescribed high risk medicines had not always received the required monitoring.