

Bellevue Medical Practice

Inspection report

6 Bellevue
Edgbaston
Birmingham
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Tel: 01217288540
www.modalitypartnership.nhs.uk

Date of inspection visit: 25 August 2022
Date of publication: 02/11/2022

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 carried out an announced comprehensive at Bellevue Medical Practice on 25 August 2022. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - requires improvement

Caring - good

Responsive - good

Well-led – requires improvement

Following our previous inspection on 22 January 2020, the practice was rated requires improvement overall and for all key questions, except for the safe, caring and well led questions where the practice was rated as good.

The full reports for previous inspections can be found by selecting the 'all reports' link for Bellevue Medical Practice on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection to follow up on the previous rating of requires improvement.

How we carried out the inspection/review

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

This included:

- Conducting clinical 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:

- During the remote review of the clinical system we found the management of patients' medicines and monitoring of some patients' conditions was not always effective.

Overall summary

- Some patients on high risk medicines had not received the appropriate monitoring.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- The practice had implemented a range of initiatives to provide care to patients who needed extra support. For example: vaccination programme for homeless people and a vulnerable patient project to ensure patients received the appropriate care.
- There was a strong emphasis on learning and sharing outcomes with the whole team to promote best practice.
- There was continuous commitment to patients and external stakeholders to share information, ideas and improvements. This included an audit programme to drive quality improvement.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- There was emphasis on staff wellbeing, and this was demonstrated through discussions with staff and evidence of appraisals.
- Risk management processes were in place and we found assessments of risks had been completed. These included fire safety and health and safety. This ensured that risks had been considered to ensure the safety of staff and patients and to mitigate any future risks

We found breaches of regulations. The provider **must**:

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

The provider **should**:

- Continue to encourage patients to attend for immunisations and cervical screening.

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 Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector 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 Bellevue Medical Practice

Bellevue Medical Practice is located in Birmingham at:

6 Bellevue

Edgbaston

Birmingham

West Midlands

B5 7LX

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

The practice is situated within the Solihull and West Birmingham Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 11,000. This is part of a contract held with NHS England.

The practice is part of the Modality Partnership, an organisation operating across Sandwell, Birmingham, Walsall, Wokingham, Hull, Airedale, Wharfedale and Craven, Lewisham and East Surrey, providing NHS services to more than 410,000 patients. The partnership holds a corporate based organisational structure consisting of a national board, an executive divisional board, operational and clinical management groups, as well as management leads within these divisions.

The practice staff includes 11 GPs, two practice nurses and two health care assistants. A third nurse had recently been recruited, however at the time of the inspection they had not started their employment. A pharmacist provided support to the clinical team. The clinical team are supported by a practice manager and a team of administration/reception staff.

Information published by Public Health England shows that deprivation within the practice population group is in the second lowest decile (two 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 42.2% White, 28% Asian, 16.5% Black, 6.6% Mixed, and 6.6% Other.

The practice is open between 8am and 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 is provided on a Wednesday evening at the practice from 6.30pm to 8pm and on Saturday appointments are available at a local practice from 9.30am to 12.30pm. Out of hours services are provided by NHS111.

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 Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <ul style="list-style-type: none">• We found that patients who were prescribed high risk medicines were not always being monitored appropriately.• Patients with long term conditions had not received regular reviews in line with national guidelines. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>