

Steppingstones Medical Practice

Inspection report

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Date of inspection visit: 12 February 2019
Date of publication: 12/04/2019

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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

We carried out an announced comprehensive inspection of Steppingstones Medical Practice on 12 February 2019 as part of our inspection programme.

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 rated this practice as good overall but requires improvement for providing well-led services and good for all population groups.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Risk management needed further strengthening to promote a proactive approach to health and safety arrangements.
- Patients received effective care and treatment that met their needs. The practice had achieved significant improvement in the outcomes for patients over the last 12 months.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs.
- The formalisation of systems was required to further promote the delivery of high-quality, person-centre care.

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

- Health and safety arrangements required strengthening to promote a pro-active approach to risk management.
- The systems for managing referrals required reviewing to ensure staff filed those referrals that had been reviewed by a GP.
- There was no structured programme for clinical audit.

The areas where the provider **must** make improvements are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(please see the specific details on action required at the end of this report)

The areas where the provider **should** make improvements are:

- Further consider formats to allow information to be accessible to all patients.
- Further explore ways to increase the uptake rates for cervical cancer screening.
- Explore ways to increase the identity of patients who also act as carers.
- Continue to review the patient satisfaction rates with telephone access.
- Consider ways to improve engagement with the patient participation group.

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

Dr Rosie Benneyworth BS BM BMedSci MRCGP

Overall summary

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Good 
Working age people (including those recently retired and students)	Good 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a shadow CQC inspector.

Background to Steppingstones Medical Practice

Steppingstones Medical Practice is a long-established practice located in the Dudley area of the West Midlands. The surgery has good transport links and there is a pharmacy (independent of the practice) within the building.

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

Steppingstones Medical Practice is situated within the Dudley Clinical Commissioning Group (CCG) and provides services to approximately 8,700 patients under the terms of a General Medical Services (GMS) contract. A GMS contract is a contract between NHS England and general practices for delivering general medical services to the local community.

The practice employs three GP partners (two female, one male, providing 19 clinical sessions each week), a long-term locum GP (male, providing four clinical

sessions each week), a clinical pharmacist (prescriber), two advanced nurse practitioners (ANPs), two practice nurses and two health care support assistants, pharmacist and pharmacy technician and a team of administrative staff covering a range of hours.

The practice area is one of high deprivation when compared with the national and local CCG area. Demographically the practice has a lower than average older patient distribution when compared with the CCG and national averages. For example, 14.9% of the practice population are 65 years and older compared with the CCG average of 20.4% and the national average of 17.3%. The general practice profile shows that the percentage of patients with a long-standing health condition is 59.4% which is slightly higher than the local CCG average of 55.5% and national average of 51.4%. National General Practice Profile describes the practice ethnicity as being 73.2% white British, 17.7% Asian, 5.5% black, 3.6% mixed ethnicities.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is 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	Regulation 17 HSCA (RA) Regulations 2014 Good governance How the regulation was not being met. <ul style="list-style-type: none">• There was no structured clinical audit programme to improve quality.• The practice did not have an effective system to identify all known vulnerable adults on their clinical system.• The practice did not have a register of identified risks or formal system in place for risk assessments.• The referral tracking system was cluttered with cancelled referrals that had been reviewed by a GP, but not filed.