

Solihull Healthcare Partnership

Inspection report

Grove Surgery
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Date of inspection visit: 11 April 2022 to 26 April 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		Good	
Are services safe?		Good	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Requires Improvement	
Are services well-led?		Good	

Overall summary

We carried out an announced inspection at Solihull Healthcare Partnership on between 11 April 2022 and 26 April 2022. Overall, the practice is rated as Good.

The ratings for each key question are as follows:

Safe - Good

Effective - Good

Caring - Good

Responsive – Requires Improvement

Well-led - Good

The practice had not previously been inspected having formed out of a merger of seven GP practices in the Solihull area.

The full reports for the inspections of the former individual practices have been archived on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection of a new provider and to follow up on potential risks relating to access.

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
- A short 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

Overall summary

- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as Good overall

We found that:

- The partnership provided care in a way that kept patients safe and protected them from avoidable harm. Staff were aware of systems and processes to follow if they had any concerns.
- Staff worked hard and had high ambitions for developing a resilient and sustainable service following the merger of seven practices in 2019, despite significant challenges with COVID-19 and local pressures on the service.
- The partnership had been open and honest about challenges they faced and worked with stakeholders in order to drive improvement. The partnership obtained external support to develop effective systems and processes for example, in bringing together and developing centralised functions.
- We found the premises were well maintained, appeared clean and tidy and had appropriate infection prevention and control arrangements in place. The partnership had made effective use of the multiple practice sites and had made adaptations to minimise the risks to patients and staff during COVID-19.
- Our clinical searches found patients medicines were safely managed. The partnership was supported by a pharmacy team who carried out regular audits to further support the safety of medicines prescribed.
- The partnership was open in learning from incidents, events and complaints and ensured learning was shared among the staff team.
- All staff had access to regular learning time events and training updates.
- Patients received effective care and treatment that met their needs. Our review of clinical records found effective systems were in place for follow up and monitoring of patients with long term conditions.
- There were plans in place to safely manage patients during pandemic pressures and help manage any backlogs in the recovery period.
- The partnership had a programme of quality improvement and development in place, which included service restructuring and systems for monitoring and improving patient care.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients reported difficulties accessing care and treatment in a timely way. However, the practice had worked with stakeholders, developed a comprehensive action plan and were making good progress to improve access for their practice population.
- As a relatively new partnership the practice was working hard in developing a single service and new multi-disciplinary team structures with strong clinical and managerial leadership.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

- Provide safeguarding vulnerable adults training at an appropriate level for all staff relevant to their role.
- Improve uptake of learning disability reviews and cervical screening uptake.
- Continue to develop centralised HR information so that it provides clear and accurate staff information for management and monitoring purposes.
- Reduce back log for summarising new patient notes.
- Raise awareness among relevant staff of support available for carers.
- Continue to implement the action plan to improve access and monitor impact of changes made.

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 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 Solihull Healthcare Partnership

Solihull Healthcare Partnership is located in Solihull and is a merger of seven practice sites. The registered address for the partnership is at:

- Grove Surgery
3 Grove Road
Solihull
B91 2AG

The branch surgeries are located at:

- Blossomfield Surgery
308 Blossomfield Road
Solihull
B91 1TF
- Dickens Heath Medical Centre
94 Old Dickens Heath Road
Shirley
Solihull
B90 1SD
- Haslucks Green Medical Centre
287 Haslucks Green Road
Shirley
Solihull
B90 2LW
- Monkspath Surgery
Farmhouse Way
Shirley
Solihull
B90 3DT
- Shirley Medical Centre
8 Union Road
Shirley
Solihull
B90 3DT
- The Jacey Practice
93 Northbrook Road
Shirley
Solihull
B90 3LX

Patients are seen across all the practice sites with some sites providing additional functions. For example:

- Shirley Medical Centre hosts the call centre and acute care team;
- Blossomfield Surgery hosts the acute care team for patients who need to be seen in person on the day;
- Haslucks Green Medical Centre hosts the womens health and immunisation centre; and

- Monkspath Surgery hosts an extended access service for cervical screening and minor surgery/procedures (plans were in place to extend this to provide a broader range of appointments) and the COVID-19 vaccination centre for the local population.

During the inspection we visited all seven practice sites.

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

Solihull Healthcare Partnership is situated within the Birmingham and Solihull Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 56,000. This is part of a contract held with NHS England.

The partnership is a primary care network (PCN) in its own right due to the size of the service. The PCN is known as Solihull Healthcare Partnership PCN. A PCN is a group of GP practices that work together to address local priorities in patient care.

Solihull Healthcare Partnership has an affluent population. Information published by Public Health England shows the practice population group as in the most affluent decile (10 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 85% White, 11% Asian and 4% Black and other minority ethnic.

Solihull Healthcare Partnership has a workforce of approximately 130 clinical and non-clinical staff. The clinical team includes 17 GP partners, 18 salaried GPs, an advanced nurse practitioner (ANP) and 3 physician associates. The nursing team consists of 13 practice nurses, 7 healthcare assistants and 3 phlebotomists. There is a team of 9 pharmacists consisting of a lead pharmacist, four clinical pharmacists and four pharmacy technicians. As part of the PCN arrangement the practice also has a social prescriber.

The non-clinical workforce includes a senior management team consisting of a Chief Executive Officer and various operational leadership roles; 19 care navigators; and a team of administrative staff.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice an appointment at one of the practice sites.

Extended access was currently provided at weekends from 9am to 1pm for minor operations and procedures and cervical screening at Monkspath Surgery. The practice was in the process of extending this to provide additional appointments for their practice population. Out of hours services were accessed via the NHS 111 service.