

Clifton Medical Centre

Inspection report

Clifton Lane
West Bromwich
West Midlands
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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

Are services safe?

Are services well-led?

Overall summary

We carried out an announced comprehensive inspection at Clifton Medical Centre on 26 September 2018. The practice was a new location registered by the provider Dr Devanna Manivasagam on September 2017, and was inspected as part of our inspection programme. The overall rating for the service was requires improvement. Breaches of legal requirements were found and we issued a requirement notice for Regulation 17: Good governance, HSCA (RA) Regulations 2014.

We carried out an announced focused inspection at Clifton Medical Centre on 22 May 2019. The purpose of the inspection was to confirm if the service had made sufficient improvements and met the requirements of the notice.

At the previous inspection we identified areas the provider should make improvements. This included having systems in place to confirm that the defibrillator was in good working order, increasing the uptake for cancer screening, exploring ways to increase the number of carers identified and protecting patient confidentiality during consultations.

During this inspection records we reviewed provided assurance that the defibrillator was in good working order. The practice had increased the number of carers identified and plans were in progress to ensure patient conversations could not be overheard in consulting rooms. The practice had taken action to promote cancer screening. However, at the time of this inspection the uptake for cancer screening remained below the national averages.

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.

Our key findings across all the areas we inspected were as follows:

- Systems and processes were in place to keep people safe.
- There were gaps and inconsistencies in systems of accountability to support good governance and management.

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.

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

- Complete formal risk assessments to ensure potential risks are assessed and managed effectively.

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

Dr Rosie Benneyworth BM BS BMedSci MRCP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Our inspection team

Our inspection team was led by a CQC lead inspector.
The team included a practice manager specialist advisor.

Background to Clifton Medical Centre

Clifton Medical Centre is located in an area of the Black Country. The practice has a General Medical Services contract (GMS) with NHS England. A GMS contract ensures practices provide essential services for people who are sick as well as, for example, chronic disease management such as diabetes and end of life care. The practice also provides some directed enhanced services such as minor surgery (joint injections only), childhood vaccination and immunisation schemes. Enhanced services require an enhanced level of service provision above what is normally required under the core GP contract.

The practice has an approximate list size of 5720 patients. The practice provides GP services commissioned by NHS Sandwell and West Birmingham Clinical Commissioning Group (CCG). A CCG is an organisation that brings together local GPs and experienced health professionals to take on commissioning responsibilities for local health services.

We reviewed the most recent data available to us from Public Health England which showed that the practice is located in an area of high deprivation compared to other practices nationally. The age distribution of the practice population broadly follows that of the local and national average.

Clifton Medical Centre is the main site of the practice and is based at Clifton Lane, West Bromwich West Midlands, B71 3AS. The practice also has a branch site named Victoria Health Centre and is based at 5 Suffrage Street, Smethwick, West Midlands, B66 3PZ. We did not visit the branch practice as part of this inspection.

The provider is an individual GP and employs two salaried GPs (one male, one female) and two long term locum GPs. They are supported by two practice nurses and a team of administrative and clerical staff. There is a practice manager in post who works between Clifton Medical Centre and another practice belonging to the provider.

The opening times for Clifton Medical Centre and Victoria Health Centre are 8.30am to 6.30pm Monday to Fridays with appointments available during these times. Extended hours opening is 6.30pm to 8pm Mondays to Fridays, 9am to 12pm Saturdays and 9am to 11.30am Sundays as part of the local GP federation extended hours opening initiative.

The practice has opted out of providing out-of-hours services to their own patients. This service is provided by an external out-of-hours service provider when closed.

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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided was not fully effective</p> <p>In particular:</p> <ul style="list-style-type: none">• The complaints system was not comprehensive to ensure improvements were made to the service as a result of patient feedback.• Structures, processes and systems to support good governance were not fully effective. Team meeting were infrequent, not all meetings were minuted to provide assurance of discussions and information shared. Systems to monitor staff training were not effective.• Leaders could not demonstrate that they had the capacity to consistently deliver high quality sustainable care. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>