

Tower Hill Partnership

Inspection report

433 Walsall Road
Perry Barr
Birmingham
B42 1BT
Tel: 01214110487
towerhillpartnershipmedicalpractice.nhs.uk

Date of inspection visit: 10 August 2021
Date of publication: 09/09/2021

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?	Requires Improvement	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced inspection at Tower Hill Partnership on 10 August 2021. Overall, the practice is rated as Good.

The ratings for each key question are as follows:

Safe - Good

Effective – Requires Improvement

Caring - Good

Responsive - Good

Well-led - Good

Following our previous inspection on 24 February 2020, the practice was rated Requires Improvement overall and for the key questions, effective, responsive and well led, but inadequate for providing safe services and good for providing caring services.

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

Why we carried out this inspection

This inspection was a comprehensive review of information which included a site visit to follow up on:

- A breach in Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment.
- A breach in Regulation 17 HSCA (RA) Regulations 2014 Good governance.
- Areas we identified the provider should make improvements.

How we carried out the inspection/review

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
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Requesting evidence from the provider
- A short site visit

Overall summary

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 have rated this practice as Good overall and for all population groups except for families, children and young people and working age people which we have rated as requires improvement.

We found that:

- Systems had been strengthened to ensure safeguarding registers were monitored effectively. Regular reviews of the registers were carried out to ensure all the relevant information had been recorded appropriately and safeguarding arrangements protected patients from avoidable harm.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. This included individual risk assessments for staff, the use of personal protective equipment (PPE) and enhanced infection control procedures.
- Governance arrangements had been strengthened to ensure risks to patients were considered, managed and mitigated appropriately.
- Effective procedures for the management of medicines had been strengthened to ensure patients received the appropriate reviews. This included the appropriate monitoring of patients on high risk medicines.
- Action plans were in place to review quality indicators and regular audits were completed to improve patient outcomes.
- Risk management processes were in place and we found assessments of risks had been completed. These included fire safety, health and safety, and infection control. This ensured that risks had been considered to ensure the safety of staff and patients and to mitigate any future risks.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Continuous monitoring of practice procedures, clinical outcomes and clinical registers was in place to ensure improvements were maintained.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.

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

- Continue to encourage patients to attend cervical screening appointments.
- Encourage patients to attend childhood immunisation appointments.
- Continue to strengthen processes for the reviewing and actioning of safety alerts.

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

Population group ratings

Older people	Good 
People with long-term conditions	Good 
Families, children and young people	Requires Improvement 
Working age people (including those recently retired and students)	Requires Improvement 
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 who 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 Tower Hill Partnership

Tower Hill Partnership is located at:

433 Walsall Road

Perry Barr

Birmingham

West Midlands

B42 1BT

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

The practice is situated within the Black Country and West Birmingham Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 18,000 patients. This is part of a contract held with NHS England.

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.

The male life expectancy for the area is 79 years which is similar to the national average but higher than the CCG average of 76. The female life expectancy for the area is 85 years compared with the CCG average of 82 years and the national average of 83 years.

There is a team of six GP partners (four male and two female) and three salaried GPs (one male and two female). The practice has a nursing team led by a nurse manager, with eight practice nurses and two health care assistants. There are two physician associates and a clinical pharmacist. The GPs are supported by a business manager, IT manager and team of reception/administration staff. The practice is a designated training practice for trainee GPs.

These are qualified doctors who are learning the role of a GP.

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 an appointment.

Extended access is provided at the practice Monday to Thursday until 8pm. The practice also offers appointments on Saturdays and Sundays from 9am until 12.30pm through HUB working arrangements. When the practice is closed patients are directed to the out of hours provider via the NHS 111 service.