

# Holbrooks Health Team





## Inspection report

71-77 Wheelwright Lane  
Holbrooks  
Coventry  
CV6 4HN  
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Date of inspection visit: 18 August 2021  
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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	Requires Improvement	
Are services safe?	Requires Improvement	
Are services effective?	Requires Improvement	
Are services well-led?	Inadequate	

# Overall summary

We carried out an announced inspection at Holbrooks Health Team on 18 August 2021.

The key questions are rated as:

Safe - Requires Improvement

Effective – Requires Improvement

Well-led - Inadequate

Following our previous inspection on 5 January 2016, the practice was rated Good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Holbrooks Health Team on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## **Why we carried out this inspection**

This inspection was a focused inspection to follow up on the information of concern we had received into the Commission.

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

# Overall summary

**We have rated this practice as Requires Improvement overall and Good for the population groups Older People, People whose circumstances make them vulnerable and People experiencing poor mental health. The population groups People with Long-term Conditions, Families, children and young people and Working age people have been rated as Requires Improvement.**

We found that:

- One medicine safety alert had not been acted upon which put patients at risk.
- The premises was not being adequately monitored and maintained.
- There were ineffective governance arrangements in place which resulted in risks within the practice not being identified and managed.
- Improvement was needed in relation to staff support and communication with staff within the practice.
- Patients with diabetes and Chronic obstructive pulmonary disease (COPD) had not always had their reviews in an effective way.
- Good infection prevention and control processes were in place and these were adequately overseen to ensure patient safety.
- The practice had improved the management structure and staff felt supported in their roles.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Since the new partner joined the service in April 2021, there were newly embedded systems in place to ensure that significant events and incidents were recorded, and that learning was shared as a result of these.
- There were good systems in place to safeguard vulnerable patients.

We found two breaches of regulations. The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

- Review COPD and diabetes patients in order that they have appropriate and timely reviews of their care and treatment at the practice.

**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

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

## Our inspection team

Our inspection team was carried out by a CQC lead inspector and a second inspector, who spoke with staff and undertook a site visit. The team included a GP specialist advisor who spoke with the provider using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Holbrooks Health Team

Holbrooks Health Team is located in Coventry at 71-77 Wheelwright Lane, Holbrooks, Coventry, CV6 4HN. This site was visited as part of this inspection activity.

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

The practice is situated within the Coventry and Rugby Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) a patient population of about 12,800. 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 fourth lowest decile (four 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 17% Asian, 73% White, 4% Black, 3% Mixed, and 3% Other.

Holbrooks Health Team has two partner GPs. There is a team of four salaried GPs and one regular locum GP. The practice has a team of one practice nurse and an Advance Nurse Practitioner who oversees the care and treatment of patient residing in residential care. The GPs are supported at the practice by a team of reception and administration staff. The current practice manager was not working at the practice at the time of our inspection. One of the GP partners was managing the practice.

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 of either the main GP location or the branch surgery. The practice were considering how appointments would be arranged going forward.

The practice opening hours are Monday to Friday 7am until 6.30pm. When the practice is closed, patients can access out-of-hours provided for emergencies by NHS 111.

Standard appointments are 10 minutes long and patients are able to book appointments and order prescriptions online. Home visits are available for patients whose health condition prevents them from attending the surgery.

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 Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <p>The premises was not being adequately maintained and health and safety checks were not being regularly completed.</p> <p>Staff supervision and support was not being delivered as required.</p> <p>There was a lack of management structure and staff were unclear on roles and responsibilities.</p> <p>Quality monitoring systems were ineffective.</p>
Diagnostic and screening procedures Family planning services Treatment of disease, disorder or injury Surgical procedures Maternity and midwifery services	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider did not have a safe system in place to ensure that MHRA and other medicine safety alerts received into the practice were seen and acted upon by relevant clinicians.</p> <p>High risk medicine monitoring was not being carried out in line with national guidance.</p> <p>Diabetes test results were not being safely acted upon.</p>

This section is primarily information for the provider

## Requirement notices

This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.