

OHP - Sutton Coldfield Group Practice (SCGP)

Inspection report

Ashfurlong Medical Centre 233 Tamworth Road Sutton Coldfield West Midlands B75 6DX Tel: 01213233235 www.tudorpractice.co.uk

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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 G	iood	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led? Outstan	ding	☆

Overall summary

We carried out an announced comprehensive inspection at OHP-Sutton Coldfield Group Practice (SCGP) on 15, 16, 22 and 23 July 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 have rated this practice outstanding for providing well led services and for the older people population group.

- The practice had undergone significant redesign bringing together six practices and developing centralised systems and processes. The practice had strong leadership and a committed team to deliver a comprehensive and ambitious service redesign programme. The staff team were motivated, were receptive to new ideas and innovation and responsive to their populations needs. There was a clear emphasis on delivering high-quality person-centred care. Leaders had a proven track record in successfully delivering service improvement including supporting inadequate practices and delivering the innovative admissions avoidance scheme.
- The practice had a clear collective vision and plans to support an effective, efficient and sustainable service that met patients' needs.
- The practice was proactive in supporting its most frail elderly patients. The practice had continued to develop and expand their successful self-funded scheme to help reduce avoidable admissions among frail elderly patients. The practice employed three senior matrons who organised safe early discharge through working with secondary care clinicians and a range of local services within the health, social care and the third sector. Analysis of the scheme estimated in the last year that a significant number of hospital bed days had been saved; along with associated costs. The practice advised that the project nurses had undertaken on average 36 admission avoidance interventions per month and 30 discharge reviews per month preventing a number of

readmissions. The practice had developed strong relationship with local hospital consultants in supporting their admissions avoidance programme over the last four years.

We have rated this practice as good for providing safe, effective, caring and responsive services.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Safety was central to the service redesign. The practice had implemented various safety netting processes to ensure patients received safe care including, safeguarding arrangements, clinical template redesign and systematic reports to ensure patients received appropriate follow up and care.
- Learning from incidents and safety alerts were well embedded and shared with staff locally and nationally.
- Patients received effective care and treatment that met their needs. Patient outcome data showed performance was in line with local and national averages. The practice demonstrated strong performance in relation to uptake of childhood immunisations across most of the practice sites.
- Staff were well supported in their roles and responsibilities. There was a strong learning culture within the practice and support for innovation.
- We saw innovative approaches to providing integrated person-centred care including admission avoidance scheme and in relation to promoting healthy lifestyles.
- 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 practice recognised that access was an area for improvement and had taken a comprehensive and holistic approach to redesigning the staff structure and appointment system to meet the needs of patient care and provide future sustainability. The new appointment system had been successfully piloted with recognised benefits identified.

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

• Review health and safety risk assessments across sites to ensure issues relating to individual practices are not missed.

Overall summary

- Improve systems and processes for undertaking infection control audit and follow up of actions.
- Review practices at each site to ensure consistent approach is used in checking emergency medicines.
- Review areas where there is higher than average exception reporting to identify if this may be further reduced.
- Continue to review patient access by telephone to ensure actions taken to improve access are working.

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	Outstanding	
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. On the 15 July 2019 the inspection team included a GP

specialist advisor, a practice nurse specialist advisor and a practice manager specialist advisor to CQC. On the 16, 22 and 23 July 2019 the inspection team included a GP specialist advisor to CQC and a second CQC inspector.

Background to OHP - Sutton Coldfield Group Practice (SCGP)

OHP- Sutton Coldfield Group Practice (SCGP) is a merger of six practices situated in the Sutton Coldfield area of the West Midlands, incorporating:

Falcon Medical Centre, 93 Carhampton Road, Sutton Coldfield B75 7PG

Four Oaks Medical Centre, Carlton House, 18 Mere Green Road, Sutton Coldfield B75 5BS

Ley Hill Surgery, 228 Lichfield Road, Sutton Coldfield B74 2UE

Sutton Park Surgery, 34 Chester Road North, Sutton Coldfield B73 6SP

Tudor Practice, Ashfurlong Medical Centre, 233 Tamworth Road, Sutton Coldfield B75 6DX

Vesey Practice, 61 Holland Road, Sutton Coldfield B72 1RL

The practice formed in June 2017 and underwent a full IT merger in June 2018. All the practice sites are supported by centralised administrative teams. We visited all the practice sites as part of this inspection.

The practice is also part of a provider at scale organisation, Our Health Partnership (OHP), which consists of over 40 practices across the West Midlands region. The provider organisation has a centralised team to provide support to member practices in terms of quality, finance, workforce, business planning, contracts and general management, whilst retaining autonomy for service delivery at individual practice level.

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. These are delivered from both sites.

SCGP is situated within the Birmingham and Solihull Commissioning Group (CCG) and provides services to approximately 51,000 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. They are also part of the Sutton Coldfield Group Primary Care Network (PCN).

All the practice sites offered a range of pre-bookable, same day face to face consultations and telephone consultations with a health care professional. The service also offered home visits to patients whose health needs required this. All sites were open Monday to Friday 8am to 6.30pm with the exception of Falcon Medical Centre which is closed on Wednesday afternoons. However, the Falcon Medical Centre phones are transferred to the Tudor Practice and patients may be seen there. Evening and weekend appointments were available at Ley Hill Surgery as part of the extended access arrangements, 6.30pm to 8pm Monday to Friday and 8.30am to 12.30pm Saturday and Sunday.

When the practice was closed patients could access out of hours primary medical health services through the NHS 111 service.

The practice has 21 GP partners and 19 salaried GPs across the six sites. The nursing team consists of Advance Nurse Practitioners, Practice Nurses and Health Care Assistants. The management of the practice is led by a Business Manager and Central Operations Manager. At each practice site there is a Site Manager supported by a reception and administrative team.

SCGP is a teaching and training practice for medical students and qualified doctors training to become a GP.

The practice has a higher than average number of older patients for example, 10.6% of the practice population was over 75 years compared with the CCG average of 6.3% and national average of 7.8%. The National General Practice Profile states that 90% of the practice population is white and 10% from Asian, black, mixed or other non-white ethnic groups.

Sutton Coldfield is largely an affluent areas and information published by Public Health England, rates the level of deprivation within the practice population group as nine, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. However, Falcon Medical Practice is situated in a more deprived area with deprivation levels below the national average.

Male life expectancy is 81 years compared to the national average of 79 years. Female life expectancy is 85 years compared to the national average of 83 years.