

Cranes Park Road Surgery

Quality Report

25 Cranes Park Road
Birmingham
B26 3SE

Tel: 0121 7430218

Website: www.cranesparkroadsurgery.nhs.uk

Date of inspection visit: 28 July 2017

Date of publication: 14/09/2017

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 service

Good



Are services effective?

Good



Summary of findings

Contents

Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	4
The six population groups and what we found	5

Detailed findings from this inspection

Our inspection team	7
Background to Cranes Park Road Surgery	7
Why we carried out this inspection	7
How we carried out this inspection	7

Overall summary

Letter from the Chief Inspector of General Practice

We previously carried out an announced comprehensive inspection at Cranes Park Road Surgery on 25 May 2016. The overall rating for the practice was good but rated as requires improvement for providing effective services.

The full comprehensive report on the May 2016 inspection can be found by selecting the 'all reports' link for Cranes Park Road Surgery on our website at www.cqc.org.uk.

On 28 July 2017 we carried out a desk-based focused review to confirm that the practice had carried out their plan to address the areas we identified as requiring improvement at our previous inspection on 25 May 2016. This report covers our findings in relation to those requirements.

Our key findings were as follows:

- The practice had implemented a logging system for prescriptions. Patient records were updated when medicines were changed, and there was a system for repeat prescriptions which included reviews of patients' medicines.

- The practice provided evidence of a programme of continuous audit. There was evidence of improved outcomes for patients, for example increased vaccinations for patients with chronic lung disease.
- The practice had implemented a more comprehensive recall system for patients with long-term conditions. The practice had worked with the local Clinical Commissioning Group (CCG) information technology team to make changes to the recall process.
- The practice had taken action to review the process for increasing the uptake of childhood immunisations. This included reviewing patient notes where immunisations were not carried out, a detailed check of practice data, contacting parents or guardians of children not attending for their immunisations, and implementing improved data handling and sharing procedures.
- Child immunisation rates had improved. The practice had vaccinated 99% of children aged up to two years compared with the national average of 91%. 83% of children aged five years had received vaccinations which was the same as the CCG average of 83%.
- The practice had reviewed confidentiality in the reception area and had implemented some changes.

Summary of findings

This included providing staff training on confidentiality, providing access to a private room, introducing online appointments booking and prescription ordering, and transferring telephone calls to an office away from the reception area.

The practice is now rated as good for providing effective services.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services effective?

The practice is now rated as good for providing effective services.

- The practice provided evidence of a programme of continuous audit. There was evidence of improved outcomes for patients, for example increased vaccinations patients with chronic lung disease.
- The practice had implemented a more comprehensive recall system for patients with long-term conditions. The practice had worked with the local Clinical Commissioning Group (CCG) information technology team to make changes to the recall process.
- The practice had taken action to review the process for increasing the uptake of childhood immunisations. This included reviewing patient notes where immunisations were not carried out, a detailed check of practice data, contacting parents or guardians of children not attending for their immunisations, and implementing improved data handling and sharing procedures.
- Child immunisation rates had improved. The practice had vaccinated 99% of children aged up to two years compared with the national average of 91%. 83% of children aged five years had received vaccinations which was the same as the CCG average of 83%.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

Following our comprehensive inspection on 25 May 2016, we rated the practice as good for this population group. We did not review any evidence during our desk based review to alter this rating.

Good



People with long term conditions

Following our comprehensive inspection on 25 May 2016, we rated the practice as good for this population group. We did not review any evidence during our desk based review to alter this rating.

Good



Families, children and young people

Following our comprehensive inspection on 25 May 2016, we rated the practice as requires improvement for this population group. This was because immunisation rates were lower than local and national averages for all standard childhood immunisations. For example, published data from 2014-15 showed:

- Childhood immunisation rates for the vaccinations given to under two year olds ranged from 53% to 93% compared with the CCG average of 80% to 95%.
- Childhood immunisation rates for the vaccinations given to five year olds ranged from 79% to 95% compared with the CCG average of 86% to 96%.

At our follow-up inspection on 28 July 2017 we found these arrangements and outcomes had significantly improved. The most recent published data, from 2015-16, showed:

- The practice had vaccinated 99% of children aged up to two years compared with the national average of 91%.
- 83% of children aged five years had received vaccinations compared with the CCG average also of 83%.

The practice provided evidence of what actions they had taken to review the process for increasing the uptake of childhood immunisations. This included reviewing patient notes where immunisations were not carried out, a detailed check of practice data, contacting parents or guardians of children not attending for their immunisations, and implementing improved data handling and sharing procedures.

The practice had also recruited an additional nurse in June 2016, which meant that additional nurse sessions helped them to improve the provision of childhood immunisations.

The practice is now rated as good for this population group.

Good



Summary of findings

Working age people (including those recently retired and students)

Following our comprehensive inspection on 25 May 2016, we rated the practice as good for this population group. We did not review any evidence during our desk based review to alter this rating.

Good 

People whose circumstances may make them vulnerable

Following our comprehensive inspection on 25 May 2016, we rated the practice as good for this population group. We did not review any evidence during our desk based review to alter this rating.

Good 

People experiencing poor mental health (including people with dementia)

Following our comprehensive inspection on 25 May 2016, we rated the practice as good for this population group. We did not review any evidence during our desk based review to alter this rating.

Good 

Cranes Park Road Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

The desk based follow up review was carried out by a CQC Inspector.

Background to Cranes Park Road Surgery

Cranes Park Road Surgery is situated in Sheldon in South Birmingham. The practice has a list size of approximately 2,000 patients. The patient population age range is broadly in line with the national average, and there is a moderate level of social deprivation. The practice holds a General Medical Services (GMS) contract with NHS England.

The clinical team consists of one GP and two practice nurses. The clinical team are supported by a practice manager and a team of reception and administrative staff.

The practice has a Patient Participation Group (PPG), a group of patients registered with a practice who work with the practice team to improve services and the quality of care.

The practice is open between 9am and 6.30pm Monday to Friday with appointments being offered during these times, except for Thursdays when the surgery is closed in the afternoon.

The practice does not provide out-of-hours services. Out of hours services are provided by Primecare. Information about this service is available at the practice, on the practice's website and on an answerphone message.

Why we carried out this inspection

We undertook a comprehensive inspection of Cranes Park Road Surgery on 25 May 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good, with requires improvement for services being well-led. The full comprehensive report following the inspection in May 2016 can be found by selecting the 'all reports' link for Cranes Park Road Surgery on our website at www.cqc.org.uk.

We undertook a follow up, desk based focused review of Cranes Park Road Surgery on 28 July 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care.

How we carried out this inspection

When carrying out the desk based focused inspection of Cranes Park Road Surgery we reviewed evidence to confirm that the practice had:

- Implemented a programme of continuous audit to complete audit cycles and to gauge the effectiveness of the improvements it makes.
- Taken action to review the process and implement improvements for recalling patients who have long-term conditions, to ensure all patients are included and that any refusal is followed up and documented.
- Taken action to review the process and implement improvements for increasing the uptake of childhood immunisations.

Are services effective?

(for example, treatment is effective)

Our findings

Following our previous inspection on 25 May 2016, we rated the practice as requires improvement for providing effective services. This was because:

- The practice had carried out limited audit activity, and there was no evidence of sustained improved outcomes for patients as a result of this activity.
- The practice did not have a formal recall system in place to effectively manage the needs of patients with long-term conditions.
- The practice was significantly below local and national averages for childhood immunisations.

The follow up inspection showed that improvements had been made:

- The practice provided evidence of a programme of continuous audit. Three completed, two-cycle audits had been carried out during the last 12 months and a further audit was planned. There was evidence of improved outcomes for patients, for example increased vaccinations for patients with chronic lung disease.
- The practice had implemented a more comprehensive recall system for patients with long-term conditions.

This was supported by the effective use of the practice's clinical computer system to help ensure patients were contacted at the appropriate time. The practice had worked with the local Clinical Commissioning Group (CCG) information technology team to make changes to the recall process. All patients who did not attend a follow-up were asked to sign a document to certify they did not wish to attend. The practice contacted patients (by letter and telephone) who did not attend for screening programmes.

- The practice provided evidence of what actions they had taken to review the process for increasing the uptake of childhood immunisations. This included reviewing patient notes where immunisations were not carried out, a detailed check of practice data, contacting parents or guardians of children not attending for their immunisations, and implementing improved data handling and sharing procedures.
- Child immunisation rates had improved. The practice had vaccinated 99% of children aged up to two years compared with the national average of 91%. 83% of children aged five years had received vaccinations compared with the CCG average also of 83%.

The practice is now rated as good for providing effective services.