

# Manor House Lane Surgery

## Quality Report

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Date of inspection visit: 20 December 2016

Date of publication: 19/04/2017

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

Are services safe?

**Good**



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection visit of Manor House Lane Surgery, on 23 June 2016. As a result of our comprehensive inspection a breach of legal requirement was found and the practice was rated as requires improvements for providing safe services.

This was a focussed desk based review of Manor House Lane Surgery carried out on 20 December 2016 to check that the provider had made improvements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Manor House Lane Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk). The practice is now rated as Good for providing safe services.

Our key findings across the area we inspected was as follows:

- The practice had made improvements in the assessment of risks to patients, visitors and staff. For example, since our comprehensive inspection took place on June 2016, the practice had completed risk assessments for health and safety, fire, gas safety and legionella. (Legionella is a term for a particular bacterium which can contaminate water systems in

buildings).The practice had commissioned an assessment of the premises to ensure the premise was accessible for patients with a disability and any risks were appropriately assessed and managed.

- Since our comprehensive inspection in June 2016, the practice had applied for disclosure and barring (DBS) checks for non-clinical staff members who chaperoned. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). The practice policy on chaperoning had been updated with the recognised national guidelines and staff doing this role had received the appropriate training.
- At the previous inspection in June 2016 we found the practice had a low number of carers on the carers register. At the time of the inspection there were 68 carers on the register, which represented 0.6% of the practice list. The practice had reviewed the list and had actively encouraged patients to identify themselves if they were carers and the latest data provided by the practice showed an increase to the register, with 117 carers currently listed

# Summary of findings

- The practice had introduced a formal meeting schedule to ensure all staff received effective communication.
- The practice had actively encouraged patients to join a patient participation group (PPG) and we saw evidence to confirm that meetings had been held.

**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 safe?**

The practice is rated as good for providing safe services.

- There were disclosure and barring (DBS) checks in place for non-clinical staff members who chaperoned and staff who carried out the role of chaperoning had received the relevant training. The practice policy on chaperoning had been updated with the recognised national guidelines.
- At the comprehensive inspection in June 2016, the practice as tenants of the premises had not assured themselves that the necessary safety checks had been completed. We have now received evidence to confirm that health and safety, fire and legionella risk assessments had been completed, including a gas safety review.

**Good**



# Manor House Lane Surgery

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk top review was carried out by a CQC Lead Inspector.

## Background to Manor House Lane Surgery

Manor House Lane surgery is based in the South Yardley area of the West Midlands. There are two surgery locations that form the practice; these consist of the main practice at Manor House Lane Surgery and a branch practice at Marston Green Surgery. There are approximately 10250

patients of various ages registered and cared for across the practice and as the practice has one patient list, patients can be seen by staff at both surgery sites. Systems and processes are shared across both sites. 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 and end of life care. The practice also provides some enhanced services such as minor surgery, childhood vaccination and immunisation schemes. The practice runs an anti-coagulation clinic for the practice patients.

There are two male GP partners and three salaried GPs (one male and two female). The nursing team consists of two nurse practitioners, three nurses and one health care assistant. The non-clinical team consists of a practice manager, administrative and reception staff. The clinical staff and some of the reception staff worked across both sites.

The practice serves a higher than average population of people aged 45-54 years. Based on data available from Public Health England, the levels of deprivation (Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial) in the area served by Manor House Lane surgery is higher than the national average, ranked four out

of ten, with ten being the least deprived. The practice is open to patients between 8.30am and

6.30pm Monday, Tuesday, Thursday and Friday and 8.30am to 1.30pm on Wednesday. Extended hours appointments are offered 6.30pm to 8pm on Tuesday at Manor House Lane surgery and 6.30pm to 8pm on Monday at Marston Green surgery. Emergency appointments are available daily. Telephone consultations are also available and home visits for patients who are unable to attend the surgery. The out of hours service (including weekdays from 6.30pm to 8.30am) is provided by Badger Out of Hours Service and the NHS 111 service. Information about these services are available on the practice website.

The practice is part of NHS Solihull Clinical Commissioning Group (CCG) which has 38 member practices. The CCG serve communities across the borough, covering a population of approximately 238,000 people. A CCG is an NHS Organisation that brings together local GPs and experienced health care professionals to take on commissioning responsibilities for local health services.

## Why we carried out this inspection

We undertook a comprehensive inspection of Manor House Lane Surgery on 23 June 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement.

# Detailed findings

We undertook a focused desk based review of Manor House Lane Surgery on 20 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This review was carried out to assess in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

## How we carried out this inspection

We carried out a focused desk based review on 20 December 2016. This involved the review of relevant documentation we had asked the practice to submit to ensure improvements were made.

# Are services safe?

## Our findings

At our previous inspection on 23 June 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of risk assessments and chaperone procedures were not adequate.

We saw evidence that these arrangements had improved when we undertook a desk based review on 20 December 2016. The practice is now rated as good for providing safe services.

### Overview of safety systems and process

When we inspected the practice during June 2016 we found that the practice had not formally assessed the risks in the absence of disclosure and barring (DBS) checks for non-clinical members of staff who chaperoned. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles

where they may have contact with children or adults who may be vulnerable). As part of our desk based review the practice provided evidence to demonstrate that DBS checks had since been completed for all non-clinical members of staff who chaperoned. . We also received confirmation that all staff had completed relevant training for chaperoning and the practice policy on chaperoning had been updated with the recognised national guidelines.

We saw records to demonstrate that risk assessments had been completed. to ensure that risks to patients who used services and others were assessed and managed appropriately. The practice had arranged for risk assessments to be carried out in areas of health and safety, fire and legionella, this also included a review of the gas supply to the building. An assessment had also been commissioned to ensure the premises was accessible for patients with a disability.