

The Laurie Pike Health Centre

Inspection report

2 Fentham Road
Aston
Birmingham
West Midlands
B6 6BB
Tel: 01212500370
www.modalitypartnership.nhs.uk

Date of inspection visit: 4 March 2020
Date of publication: 20/04/2020

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 caring?

Good



Are services responsive?

Requires improvement



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at The Laurie Pike Health Centre on 4 March 2020 as part of our inspection programme. As part of our inspection we also visited the practices branch surgery, Shanklin House Surgery.

The practice's last comprehensive inspection took place on the 27 February 2019 and received a rating of requires improvement overall. Specifically, the practice was rated as requires improvement for providing safe, responsive and well-led services. The practice also had a focussed inspection on 6 February 2020 where we looked at effective services for people with long term conditions only, this was a responsive inspection where we did not rate this area of care however all areas have been rated for this inspection under our comprehensive methodology. At this inspection we also followed up on breaches of regulations identified at the previous comprehensive inspection on 27 February 2019.

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 requires improvement overall and requires improvement for all population groups.

We rated the practice as **requires improvement** for providing safe, effective, responsive and well-led services.

- The practice did not always operate effective processes for identifying, managing and mitigating risks, we noted ongoing gaps in evidence to support this, at this inspection.
- At our last inspection we found that the practices governance arrangements were not effective in supporting adequate infection prevention and control. At this inspection we noted some improvements however there were ongoing gaps in record keeping to support good infection control practices.

- We noted a decline in patient satisfaction rates across areas, particularly with regards to accessing the practice by phone.
- The practice could not demonstrate improved uptake for childhood immunisations and cervical screening amongst the families, children and young people and working age population groups.

Difficulties in accessing the practice by telephone affected all population groups therefore the ratings for all population groups were **requires improvement**.

We rated the practice as **good** for providing caring services.

- Patients received effective care and treatment that met their needs.
- Although results from the January/March 2019 national GP patient survey showed a decline in satisfaction rates regarding care and treatment, internal surveys carried out by the practice since this time showed improvements.
- The practice continued to focus on supporting their carers and patients with dementia, ensuring that support was in place and care needs were met.

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

- 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:

- Explore ways of delivering further improvements in response to areas where patients satisfaction remains low.
- Continue to explore ways of improving uptake rates for childhood immunisations and cervical screening.
- Continue to engage patients in reviews and further reduce exception reporting rates.

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	Requires improvement 
People with long-term conditions	Requires improvement 
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	Requires improvement 
People experiencing poor mental health (including people with dementia)	Requires improvement 

Our inspection team

Our inspection team was led by a CQC lead inspector.
The team included a GP specialist advisor and a second CQC inspector.

Background to The Laurie Pike Health Centre

The Laurie Pike Health Centre is situated in a purpose-built health centre in the Aston area of Birmingham. The health centre has a branch practice approximately one mile away, based at Shanklin House Surgery also in the Aston area of Birmingham. Shanklin House Surgery is situated in a converted house.

Public Health England data ranks the levels of deprivation in the area as one out of 10, with 10 being the least and one being the most deprived. Approximately 17,270 patients are registered with the practice. Patients can be seen at both practice sites.

The service is registered to provide the regulated activities of Diagnostic and screening procedures, Maternity and midwifery services, Surgical procedures, Family Planning and the Treatment of disease, disorder or injury. Our inspection was led from at the Laurie Pike Health Centre and a member of the inspection team visited the branch at Shanklin House Surgery as part of the inspection.

The practice is part of the Modality Partnership, an organisation operating across Sandwell, Birmingham, Walsall, Wokingham, Hull, Airedale, Wharfedale and Craven, Lewisham and East Surrey, providing NHS services to more than 410,000 patients. The partnership

holds a corporate based organisational structure consisting of a national board, an executive divisional board, operational and clinical management groups, as well as management leads within these divisions.

The practice is led by a team of nine GP partners (male and female). There are also nine salaried GPs (male and female) at the practice. The clinical team also includes two nurse practitioners, four practice nurses and four healthcare assistants, the nursing team were all female. In addition, the practice had a pharmacist and a musculoskeletal (MSK) practitioner as part of their team. The practice is also a training practice providing training and teaching opportunities to trainee GPs and medical students.

The practice management is undertaken by a patient services manager who is overseen by an area manager from the Modality Partnership. The practice team includes a team of administrative staff who cover admin and reception duties.

The practice is open between 8am and 6.30pm on Tuesdays, Thursdays and Fridays. On Mondays the later appointments can be accessed at Shanklin House Surgery until 8.30pm and at The Laurie Pike Health Centre on Wednesdays, also until 8.30pm. On Saturdays patients can access appointments at Enki Medical Practice through the Modality Partnership's extended

access service. These appointments are available from 9am to 1pm. When the practice is closed patients are diverted to the GP out of hours service provided by the Malling Health. Patients can also access advice through the NHS 111 service.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is 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>How the regulation was not being met:</p> <p>The registered person had systems or processes in place that were operating ineffectively in that they failed to effectively to assess, monitor and improve the quality and safety of the services being provided. In particular, there were continued gaps in the records to support adequate infection prevention and control.</p> <p>This included no evidence of cleaning schedules and spill kits for the branch practice, Shanklin House Surgery and no evidence of completed cleaning records for both practice sites and records of cleaning of medical equipment.</p> <p>Infection prevention and control audits highlighted some repeated issues with no indication to demonstrate or assure that infection control risk had been mitigated or managed.</p>