

New Invention Health Centre

Inspection report

66 Cannock Road
Willenhall
WV12 5RZ
Tel: 01922927290

Date of inspection visit: 17 November 2022
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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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at New Invention Health Centre on 17 November 2022. Overall, the practice is rated as Good.

We rated each key question as follows:

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Why we carried out this inspection

We carried out an announced comprehensive inspection at New Invention Health Centre as part of our inspection programme and to provide a rating for the service, as it had not been inspected before.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- 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.

We found that:

- There were effective systems and processes in place to ensure risks were assessed and managed.
- The practice had comprehensive systems in place for the appropriate and safe use of medicines, this included regular monitoring arrangements for patients on high risk medicines.

Overall summary

- There was a structured and coordinated approach to the management of patients care and treatment including those with long term conditions with effective clinical oversight.
- There were some gaps in the information documented in patients records such as clinical data to support advice and treatment decisions and children and adults in the same household with safeguarding concerns were not always cross referenced in the appropriate records.
- The practice was below the minimum requirements for the uptake of childhood immunisation and cervical cancer screening. The practice was taking action to improve uptake.
- Staff were provided opportunities for training and development with access to appraisals and supervision. There were assurance systems in place to demonstrate the competency of staff undertaking extended roles.
- Staff dealt with patients with kindness and respect. The national GP survey results showed the practice was mostly in line with the local and national average with questions relating to caring.
- The national GP survey results showed the practice was similar to the local average for areas relating to access such as overall experience of making an appointment, appointment times and appointments offered. However, patients experience of accessing care and treatment in a timely way was not consistent as it was not always easy to get through to someone at the practice on the phone. The practice was taking action to improve.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.
- There was compassionate, inclusive and effective leadership at all levels. Leaders continue to develop capacity and skills with a commitment to delivering high quality, sustainable care.
- There was clear and effective accountability and oversight to support good governance.

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

- Implement effective systems to monitor and review information documented in patients records including clinical data and the cross-referencing of records of children and adults in the same household with safeguarding concerns.
- Continue to monitor and take action to improve the uptake of cancer screening and childhood immunisation.
- Continue to monitor and take action to improve telephone access to enhance patients experience of the service.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

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

Background to New Invention Health Centre

New Invention Health Centre at:

66 Cannock Road

Willenhall

West Midlands

WV12 5RZ

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.

New Invention Health Centre is commissioned by NHS Black Country Integrated Care Board (ICB) which is part of the Black Country Integrated Care System (ICS) and delivers Alternative Provider Medical Services (APMS) to a patient population of 6,646. This is part of a contract held with NHS England.

The practice is part of Modality Partnership which is a GP partnership that operates primary health care and community services nationally. New Invention Health Centre is one of nine practices within the Walsall Modality division. The practice is also part of a wider network of GP practices (PCN) which enables local health services to work together to deliver services to the local population.

Information published by the Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth decile (one 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 89% White, 6% Asian with the remaining patients of Black, Mixed, and Other ethnicity. The age distribution of the practice population shows a higher younger practice population and lower older practice population compared with the local and national averages, with broadly similar numbers of male and female patients across the age groups. Average life expectancy is 75 years for men and 80 years for women compared to the national average of 79 and 83 years respectively.

The staffing consists of a team of three GP partners and one salaried GP (three male and one female), each working between four and eight sessions a week. The clinical team includes one practice nurse and two nurse practitioners, and one advance care practitioner. The administrative team includes a practice manager, secretaries, a senior patient services assistant and a team of patient services assistants.

When the practice is closed patients are directed to the out of hours provider via the NHS 111 service. Patients also have access to the Extended GP Access Service between 6.30pm and 7.45pm on weekdays, 9am to 4.45pm on weekends.