

Claverley Medical Practice

Inspection report

Spicers Close Claverley Wolverhampton WV5 7BY Tel: 01746710223 www.claverleymedicalpractice.co.uk

Date of inspection visit: 05 June 2023 Date of publication: 12/07/2023

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 to people's needs?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced follow up comprehensive inspection at Claverley Medical Practice on 5 June 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - requires improvement

Caring - good

Responsive - good

Well-led - good

Following our previous inspection on 6 April 2022, the practice was rated requires improvement overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Claverley Medical Practice on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection to follow up breaches of regulation from a previous inspection.

Our focus included:

- Safe, effective, caring responsive and well led key questions.
- A follow up of breaches of regulations and 'shoulds' identified in previous inspection.

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 and in person on site.
- 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 site visit.
- An interview with a member of the Patient Participation Group.
- Staff questionnaires.
- Feedback from external stakeholders.

Our findings

We based our judgement of the quality of care at this service on a combination of:

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Overall summary

- 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:

Although improvements had been made in a number of areas we identified ongoing concerns in relation to people receiving safe and effective care.

We rated the provider as requires improvement for providing safe services because:

- The system to review and act on patient safety alerts continued not to be effective.
- Some high-risk medicines were not being monitored and prescribed safely in accordance with national good guidance.
- Dispensing incidents were logged. However, there was no proper investigation or actions implemented to mitigate the risk from reoccurring. The recording was basic and often only involved one person, reporting, recording and documenting outcomes from any one incident.
- Standard Operating Procedures covered standard practices including all aspects of the dispensary. However, checks were not made to ensure they were being followed.
- Dispensary staff had received training to carry out their roles effectively and safely. However, there was no assurances or records of competency checks for longstanding dispensary staff.

We rated the provider as requires improvement for providing effective services because:

- The routine monitoring of some patients with long-term conditions had not been carried out in line with guidance potentially putting patients at avoidable risk.
- The quality of medicine reviews undertaken varied.
- Quality improvement activity required further development to demonstrate improved outcomes for patients.

We rated the provider as good for providing caring services because:

- Although the practice results in the National GP Patient Survey 2022 did not reflect significant improvement, the practice had received complimentary feedback from a range of sources about people's experiences of their care. In addition, they had also carried out 2 in-house patient surveys which were positive regarding providing caring services.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

We rated the provider as good for providing responsive services because:

- Although the practice results in the National GP Patient Survey 2022 did not reflect improvement, feedback received from a range of sources showed the practice was more responsive to the needs of their patients.
- Patients could access care and treatment in a timely way.
- Complaints were managed in line with policy.

We rated the provider as good for providing well-led services because:

- Governance structures were becoming embedded into practice.
- Improvements had been made to the accuracy and effectiveness of policies and these were kept under review and updated.
- Improvements in relation to the oversight and management of complaints and significant events had been implemented to drive improvement.
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Overall summary

We found a breach of regulations. The provider **must**:

• Ensure care and treatment is provided in a safe way to patients.

The provider **should**:

• Take action to ensure all staff are provided with training to support autistic people and people with a learning disability.

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 Healthcare

Our inspection team

Our inspection team was led by a CQC lead inspector and two members of the CQC's medicine optimisation team who spoke with staff and undertook a site visit. The team also 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 Claverley Medical Practice

Claverley Medical Practice is located in Wolverhampton at:

Spicers Close

Claverley

Wolverhampton

WV5 7BY

The provider is a partnership registered with CQC to deliver the regulated activities; diagnostic and screening procedures, maternity and midwifery services, family planning, surgical procedures and treatment of disease, disorder or injury.

The practice is situated within the NHS Staffordshire and Stoke-on Trent Integrated Care Board (ICB) and delivers General Medical Services (GMS) to a patient population of approximately 3,334 people. This is part of a contract held with NHS England. The practice is part of the Seisdon Primary Care Network (PCN), a wider network of GP practices that work collaboratively to deliver primary care services.

Information published by Public Health England reports the deprivation ranking within the practice population group is in the eighth decile (eight out of 10). The higher the decile, the less deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is predominantly white at 97.4% of the registered patients, with estimates of 0.9% mixed, 0.9% Asian and 0.4% black and 0.2% other.

The practice is authorised to dispense medicines to patients who wish to receive them in this way.

The team consists of 1 GP, an advanced clinical practitioner (a non-medical prescriber), a practice nurse, a healthcare assistant and 4 dispensing staff. The clinical staff are supported by a managing partner, an assistant practice manager and a team of reception and administrative staff.

The practice is open between 8.30am and 6pm Monday to Friday. The practice is closed between 1pm and 2pm for lunch and on the fourth Wednesday of each month at 1pm for staff training. Enhanced access is provided locally where late evening and weekend appointments are available. Appointments can be made by telephone or in person. Requests for home visits are triaged by a GP. Out of hours services are provided by Vocare via NHS 111.

Further information about the practice is available via their website at: www.claverleymedicalpractice.co.uk

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury Surgical procedures Family planning services Maternity and midwifery services	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular: • The provider had not ensured proper governance arrangements in the dispensary were implemented to ensure policies and correct procedures were followed. • The provider had not ensured all blood monitoring for medicines was carried out in line with national clinical guidance and that the medicines were linked to diagnosed medical conditions. • The provider had not ensured medicine reviews were effective to ensure they identified patients who were overdue their monitoring. • The provider had not acted on all safety alerts and ensured the appropriate action was taken for new and existing prescribing. This included a search of patients already prescribed the medicines for which a safety alert had been issued for.
	This was in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.