

Stonydelph Health Centre

Inspection report

Ellerbeck
Stoney Delph
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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?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out this announced inspection at Stonydelph Health Centre on 12 November 2019 as part of our inspection programme.

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 good overall.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice had reviewed and re-organised the way in which services were delivered to meet patients' needs. Patients could access care and treatment in a timely way.
- The culture of the practice and the way it was led and managed drove the delivery and improvement of high-quality, person-centred care.
- There was a strong focus on continuous learning and improvement at all levels of the organisation.

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

- There were gaps found in the recruitment records for some staff including their vaccination and immunity histories.
- The practice training matrix demonstrated some gaps in staff training, including equality and diversity, mental capacity act, infection prevention and control and safeguarding.
- There were areas noted for improvement for infection prevention and control.

- There was no documented risk assessment for one of the suggested emergency medicines not held at the Wilnecote branch site.
- There was a lack of contingency planning for practice nurse hours.

We rated the population groups as good with the exception of families, children and young people which we rated as requires improvement. The practice needed to improve the uptake of childhood immunisation programmes and cervical cytology screening.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- Ensure specified information is available regarding each person employed.
- Ensure risks are mitigated, including staff training updates, infection prevention and control and risk assessments are completed for suggested emergency medicines not held at the branch site.

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

- Introduce systems that confirm that key environment and health and safety risk assessments have been completed by the landlord and these are available for the practice to review including any derived action plans.
- Continue to review and improve the uptake of cervical cytology screening and the childhood immunisation programmes.
- Implement a documented system for clinical supervision.

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	Good	
People with long-term conditions	Good	
Families, children and young people	Requires improvement	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

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

Background to Stonydelph Health Centre

Stonydelph Health Centre is located at Ellerbeck, Tamworth, Staffordshire and the practice branch location is located at Wilnecote. The consulting and treatment rooms at both sites are on the ground floor with level access to the buildings and automated doors to the reception areas and disabled toilet facilities.

The practice is registered with the Care Quality Commission (CQC) as a partnership provider since November 2018. Trinity Surgery is the provider name for Stonydelph Health Centre and its branch location at Wilnecote. The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and family planning.

Stonydelph Health Centre is a member of the NHS South East Staffordshire and Seisdon Peninsula Clinical Commissioning Group (CCG) and provides services to approximately 4,600 patients. The provider partnership consists of one male and one female GP partner and

employs one male and one female salaried GP. The GPs provide a total of 2.5 whole time equivalent hours, based on eight sessions as full time. The clinical team includes a part time practice nurse providing 0.53 whole time equivalent hours across both sites. The practice has a practice nurse vacancy. The clinical team are supported by a practice manager and two assistant practice managers, and an administration and reception team.

The Stonydelph Health Centre Ellerbeck site is open between 8am and 6.30pm Monday to Friday and the Wilnecote branch site opens from 8am to 6.30pm except for Wednesday and Thursday when they close at 1pm. As part of a government initiative the practice participates in the extended hours service from 6.30pm to 8pm weekdays, a weekend service which includes an on line digital service on Sunday mornings where appointments will be offered with a GP via the Q Doctor App.

Further information can be found on the practice website: stonydelphmedicalpractice.co.uk

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 Treatment of disease, disorder or injury	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p>How the regulation was not being met.</p> <p>The registered person had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed in particular:</p> <ul style="list-style-type: none">• We saw gaps in the recruitment records of staff including records of staff vaccination, references and immunity histories.• A contracted staff members record did not contain information on their immunity, training or Disclosure and Barring Check or a risk assessment. <p>The registered person had not ensured that there were appropriate processes for assessing and checking that people have the competence, skills and experience required to undertake the role.in particular:</p> <ul style="list-style-type: none">• There was a lack of oversight on the staff training matrix and some staff had not been in receipt of training or refresher training in safeguarding, infection prevention and control, equality and diversity and the Mental Capacity Act.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met.</p> <p>The registered person had not done all that is reasonably practicable to mitigate risks in particular:</p>

This section is primarily information for the provider

Requirement notices

- There were areas noted for improvement for infection prevention and control, fabric tear on the patient couch, a break in the fabric of a treatment worktop.
- There was no documented risk assessment for one of the suggested emergency medicines not held at the Wilnecote branch site.

There was a lack of contingency planning for practice nurse hours.