

Lordswood House Group

Quality Report

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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 service	Good	
Are services safe?	Good	

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out focussed inspection at Lordswood House Group on 29 June 2016. The practice had previously been inspected in September 2015 and was rated as requires improvement for providing safe services. The practice was found to be in breach of regulation 19 and schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Recruitment records seen did not demonstrate that appropriate checks had been undertaken to ensure fit and proper persons were employed at the practice. Following the inspection the practice sent us an action plan detailing the action they were going to take to improve.

We returned to the practice to consider whether improvements had been made in response to the breach in regulations. We found the practice had made improvements and is now rated as good for providing safe services. This report should be read in conjunction with our previous inspection report for the practice.

Our findings were as follows:

- Appropriate pre-employment checks were carried out to ensure new staff were suitable to carry out regulated activities and work with vulnerable persons in order to keep patients safe

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 now rated as good for providing safe services. The practice was able to demonstrate that they had made sufficient changes to improve.

Specifically:

- The practice had systems in place to check that fit and proper persons were employed to carry out regulated activities and work with vulnerable people to keep patients safe.

Good



Lordswood House Group

Detailed findings

Our inspection team

Our inspection team was led by:

This focussed inspection was carried out by a CQC Lead Inspector.

Background to Lordswood House Group

Lordswood House Group is part of the NHS Birmingham Cross City Clinical Commissioning Group (CCG). CCGs are groups of general practices that work together to plan and design local health services in England. They do this by 'commissioning' or buying health and care services.

Lordswood House Group is registered with the Care Quality Commission to provide primary medical services. It is one of three practice locations registered with CQC under the provider Lordswood House Group Medical Practice. The other two being Quinton Family Practice and Quinborne Medical Practice. Collectively the practices have approximately 25,000 patients, approximately 16,000 were registered with this practice. The three registered locations operate under a single general medical service (GMS) contract with NHS England. Under the GMS contract the practice is required to provide essential services to patients who are ill and includes chronic disease management and end of life care.

The practice is located in a purpose built health centre which it shares with another community health services. Based on data available from Public Health England, deprivation in the area served by the three practices is slightly higher than the national average.

The practice is open for appointments on:

Monday 8.30am – 7pm

Tuesday 7.30am – 6.30pm

Wednesday 7.30am – 6pm

Thursday 7.30am – 7pm

Friday 7.30am – 6.30pm

The practice's extended opening hours are between 7.30am and 8am Tuesday to Friday, 6.30pm to 7pm on Monday and Thursday and Saturday mornings 8am to 11am.

When the practice is closed during the out of hours period (6.30pm to 8am) patients receive primary medical services through an out of hours provider (BADGER).

The practice has ten GP partners (both male and female) and three salaried GPs. Other practice staff consist of a team of six nurses and three healthcare assistants, a practice manager and a team of administrative staff. Some of the administrative functions are shared with the provider's other locations. The practice is also a training practice for doctors who were training to be qualified as GPs and a teaching practice for medical students.

Why we carried out this inspection

We carried out a focussed inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider had made improvements identified during the comprehensive inspection carried out in September 2015 and is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

Detailed findings

How we carried out this inspection

We undertook a visit to the practice to carry out this focussed inspection. The visit was announced and took place on the 29 June 2016.

During our visit we:

- Spoke with a GP partner and the practice manager.

Reviewed recruitment records and relevant documentation.

Are services safe?

Our findings

Overview of safety systems and processes

During our visit to the practice in September 2015 we were not assured appropriate recruitment checks were undertaken to ensure only fit and proper persons were employed. Recruitment files seen did not demonstrate appropriate recruitment checks had been completed.

- We found recruitment checks on new staff were incomplete and systems and processes for completing these checks were not robust. We reviewed four recruitment files for two clinical and two administrative members of staff that had been recruited in the previous 12 months. Checks such as proof of identity, evidence of conduct in previous employment, satisfactory information about physical and mental health conditions and appropriate criminal records checks through the Disclosure and Barring Service were not consistently available.

During our visit in June 2016 we found that the practice had made improvements to keep patients safe.

- We reviewed the personnel files for five members of staff (three clinical and two non-clinical) and found appropriate recruitment checks had been undertaken prior to employment for these members of staff. This included proof of identification, references, qualifications, registration with the appropriate professional body and the appropriate checks through the Disclosure and Barring Service.
- The practice had developed systems to ensure appropriate checks were carried out. They also informed us that they were in the processes of developing recruitment processes within the newly formed 'Our Health Partnership'. Our Health Partnership is a partnership between 32 practices within the local area working together to help respond to the changing demands faced by GP practices. Within this partnership central functions will be shared between the member practices.