

Washwood Heath Centre

Quality Report

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Date of inspection visit: 18 December 2018

Website: www.washwoodheathurgentcarecentre.nhs.uk Date of publication: 09/01/2019

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 effective?

Good



Key findings

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Letter from the Chief Inspector of General Practice

This service is rated as Good overall. (Previous inspection March 2018 – Good)

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We previously carried out a comprehensive inspection at Washwood Heath Centre on 1 March 2018. The overall rating for the service was good with a requires improvement rating for the provision of effective services. The full comprehensive report for the March 2018 inspection can be found by selecting the 'all reports' link for Washwood Heath Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 18 December 2018. It was undertaken to confirm that the service had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 1 March 2018. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Our key findings are as follows:

- We found that the provider had taken effective action to address the issues raised in our previous inspection report.
- A comprehensive clinical audit programme had been developed and was underway to support service improvement and learning.
- The implementation of additional staffing had helped improve waiting times for patients attending the service.
- The processes for checking that emergency medicines and equipment was present and in date had been improved. We found records for monitoring this were complete.
- Patient information was available in languages alternative to English for common complaints seen at the service. This included the main local language spoken in the community.
- Staff advised that complaints had been reviewed for themes or trends however, there were relatively few and no specific themes identified.

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

- Review differences in waiting times between the providers two services to identify potential reasons for this and any further action that could be taken to improve.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice

Washwood Heath Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC lead inspector.

Background to Washwood Heath Centre

Washwood Heath Centre is run by Virgin Care Vertis LLP. It provides nurse led NHS walk-in facilities for members of the public who require treatment for minor illnesses and injuries. The service was originally commissioned in 2011 and current commissioning arrangements are held with Birmingham and Solihull Clinical Commissioning Group.

Washwood Heath Centre is located within the Washwood Heath Health and Wellbeing Centre which it shares with a GP practice, community health teams and a pharmacy. The building is purpose built and managed by NHS properties. It is situated within a residential area with links to public transport. There is car parking available for patients using the Health and Wellbeing Centre.

Patients do not need to be registered or need to make an appointment to use the service. The service is open 9am to 9pm daily, including weekends and bank holidays (with the exception of Christmas Day). Patients access the service in person and wait to be seen.

Approximately 30,000 consultations take place in the walk-in centre per year. The service is located in an area with higher than the national average levels of deprivation and has an ethnically diverse population. The provider estimates that over 40% of the population do not speak English as a first language. The population is younger than both the CCG and national average.

The service has close links with the provider's other walk-in centre, Warren Farm Urgent Care Centre located in Kingstanding, Birmingham. The two services share the same contract with the CCG and some staff including the service manager and clinical manager.

The service is currently staffed with a minimum two Advanced Nurse Practitioners with an additional member of staff at busy periods. The clinical staff are supported by a team of administrative / reception staff.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 1 March 2018, we rated the service as requires improvement for providing effective services. We found the arrangements in respect of quality improvement activity such as through clinical audit was in need of improvement.

These arrangements had significantly improved when we undertook a follow up inspection on 18 December 2018. The service is now rated as good for providing effective services.

Monitoring care and treatment

The service had introduced a comprehensive programme of quality improvement activity which enabled them to routinely review the effectiveness and appropriateness of the care provided. The current programme included seven clinical audits. Each member of the clinical team had been given responsibility to undertake a clinical audit which was focussed on the management of commonly presenting conditions against evidence based guidance. For example, urinary tract infections, chest pain, asthma, genito-urinary medicine and diarrhoea and vomiting caused by gastroenteritis in under five year olds. Two of these were full cycle audits where the improvements made were implemented and monitored, the remainder of audits were scheduled for a re-audit during 2019. Results of clinical audits were shared and discussed at the Clinical Governance meetings which all clinical staff, including regular locum staff, were invited to attend. The minutes of these meetings were also available within the walk-in centre and emailed to staff. This enabled staff to learn and reflect on their practice and support improvement.

Other audits undertaken included an antibiotic prescribing audit and a review of the effectiveness of the provider's 'red flag' triage process which is undertaken when patients arrive at the service to be seen.

The service had a locally agreed target set by their commissioner of seeing patients within four hours, this was monitored on a daily basis and reported monthly. Data from the provider for November 2018 showed the service had achieved the four hour target in 99% of cases. The provider had also set its own internal target of seeing patients within two hours. Data for November 2018 showed this had been achieved in 91% of cases.

At our previous inspection we saw that waiting times were longer for patients attending the Washwood Health Centre compared to the provider's other service, Warren Farm Urgent Care Centre. Although waiting times still remained longer at Washwood Heath Centre the latest data available for November 2018 showed improvement within the service. For example, 61% of patients were seen within one hour compared to 48% in February 2018 and 30% waited between one and two hours compared to 27% in February 2018. The provider advised that the differences in waiting times between the two services may be due to the different population groups for example, language was a more significant barrier at this site. Senior staff told us that they regularly monitored activity through the daily activity reports which enabled them to review capacity and demand for the service which helped identify staffing requirements.

The provider undertook consultation audits of all clinical staff including locum staff which included a review of clinical decision making and non-medical prescribing. These were carried out every six months by the clinical lead who received protected time for this. The consultation audits enabled the provider to assure themselves of the competence of staff employed in advanced roles.