

Fiveways Health Centre

Inspection 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 location

Inadequate



Are services well-led?

Inadequate



Overall summary

We carried out an announced focused inspection at Fiveways Health Centre on 8 November 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations we identified in our previous inspections in January 2018, June 2018 and September 2018 where breaches of the Health and Social Care Act 2008 were identified. You can read the report from our last focused inspection on 20 and 25 September 2017; by selecting the 'all reports' link for Fiveways Health Centre on our website at www.cqc.org.uk. Our inspection team was led by a CQC inspector and included a GP specialist advisor and a second CQC inspector.

The breaches of regulations identified at previous inspections were as follows:

A comprehensive inspection was carried out on 9 January 2018. Significant failings were identified in the care and treatment of patients and the practice was rated as inadequate overall and placed into special measures. Under Section 29 of the Health and Social Care Act 2008 two warning notices were issued in respect of the following regulated activities: Treatment of Disease, Disorder or Injury and Diagnostic and Screening Procedures. The provider was required to submit an action plan of planned improvements to mitigate the risks identified. A Section 64 letter was also issued, where the provider was required to provide the Care Quality Commission with specified information and documentation under Section 64 of the Health and Social Care Act 2008.

A focused unannounced inspection was carried out on 6 June 2018 to review the actions the practice had taken and to check whether the provider had implemented their action plan. Following this inspection, we found further significant failings in the management of patient care and treatment and urgent action was taken to protect the safety and welfare of people using this service. Under Section 31 of the Health and Social Care Act 2008 a temporary suspension of four months was imposed on the registration of the provider and registered manager in respect of the following regulated activities: Diagnostic and screening procedures, Treatment of disease, disorder or injury, Family planning, Maternity and midwifery services and Surgical procedures. The suspension took effect from Friday 8 June 2018 until 8 October 2018.

A focused announced inspection was carried out on the 20 and 25 September 2018 to review the actions the practice

had taken during the suspension to ensure all failings and associated risks had been mitigated and processes had been implemented for the safe care and management of patients. Findings from the inspection showed the provider had failed to address the issues we had highlighted as being necessary for the suspension to be lifted. In addition, we found additional failings that will or may expose any person to the risk of harm. An extended suspension took effect from Monday 8 October 2018 for a period of 28 days.

At this inspection on 8 November 2018 we found some improvements had been made, but failings in the management of safety alerts and patients with safeguarding concerns still had not been addressed effectively to ensure the safe care and treatment of patients. Following this inspection, the suspension finished on 12 November 2018 and we served a Notice of Decision under Section 31 of the Health and Social Care Act 2008 to impose urgent conditions on the registration of the service provider in relation to the regulated activities as we believe a person will or may be exposed to the risk of harm if we do not do so.

Our judgement of the quality of care at this service is based 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.

The practice remains inadequate overall.

We concluded that:

- People were not adequately protected from avoidable harm and abuse.
- The delivery of high quality care was not assured by the leadership, governance and culture of the practice.
- Systems and processes in place did not mitigate risk to patients.

We rated the practice as inadequate for providing well-led services because:

- While some improvements had been made since our previous inspection on 20 and 25 September 2018 in that the provider had addressed the breaches in relation to the monitoring and recording of significant events, however at this inspection we continued to identify concerns that put patients at risk. This included a clear and effective process for the management of safety alerts.

Overall summary

- Due to a change in the management of the practice, the provider was unable to demonstrate they had considered the impact this would have on the overall leadership and governance arrangements
- The practice did not have clear systems, practices and processes to keep people safe and safeguarded from abuse.
- The practice did not always act on appropriate and accurate information. Furthermore, we found that the practices overall approach to service improvement was reactive rather than proactive.
- There was little evidence of systems and processes for learning, continuous improvement and innovation.

The areas where the provider **must** continue to make improvements are:

- Ensure that care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Insufficient improvements have been made such that there remains a rating of inadequate overall. With the suspension period completed, we have taken urgent action to impose conditions on the registration of the service provider under

Section 31 of the Health and Social Care Act 2008 in respect of the following regulated activities: Diagnostic and screening procedures, Treatment of disease, disorder or injury, Family planning, Maternity and midwifery services and Surgical procedures. We have taken this urgent action as we believe a person will or may be exposed to the risk of harm if we do not do so.

We are taking action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration if they do not improve. The service will be kept under review and if needed could be escalated to further urgent enforcement action.

We have shared our findings with the Clinical Commissioning Group (CCG) and the CQC and CCG are working together to address the concerns identified.

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

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Our inspection team

Our inspection team was led by CQC lead inspector. The team included a GP specialist adviser and a second inspector.

Background to Fiveways Health Centre

Fiveways Health Centre is located in Ladywood Middleway, Birmingham. The surgery operates out of purpose-built premises. There are good transport links. The practice is not currently part of any wider network of GP practices.

The practice provides NHS services through a General Medical Services (GMS) contract to 4,500 patients. The practice is part of Sandwell & West Birmingham Clinical Commissioning Group (CCG). The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, treatment of disease, disorder or injury, surgical procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury. The patient profile for the practice has a lower than national average percentage of patients aged over 65 years, currently 8% of its registered population is in this age group in comparison to the national average of 17%. The locality has a higher than average deprivation level. Based on data available from Public Health England, Five Ways Health Centre is located in an area with high levels of deprivation compared to the national average. For example, the practice is ranked one out of 10, with 10 being the least deprived. The practice population is made

up of 59% of people from black and minority ethnic (BME) groups. Patients currently registered with the practice are being cared for by a caretaking practice during the suspension period.

The practice's clinical team has two GPs (both male). The practice is currently in the process of recruiting a practice nurse and a female GP has confirmed they will be providing two clinical sessions per week when the suspension has finished. The non clinical team consists of a duty manager who is training to be a practice manager and a small team of reception/administration staff.

The practice is open between 8am to 8pm Mondays to Fridays and 10am to 12 midday Saturday and Sunday. Appointments are from 9.30am to 12.30pm and 4pm to 6.30pm Monday to Friday. Extended hours appointments are available Monday to Friday between 6.30pm to 7pm and 10am to 11.30am Saturday and Sunday. Telephone consultations are available if patients requested them; home visits are also available for patients who are unable to attend the surgery if they lived within the practice boundaries. When the practice is closed, out of hours service is provided by NHS 111 service.