

# Heathfield Family 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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services caring?

Requires improvement



Are services responsive?

Requires improvement



Are services well-led?

Requires improvement



# Overall summary

We carried out an announced comprehensive inspection at Heathfield Family Centre on 12 February 2020 following our annual review of the information available to us.

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 requires improvement overall and requires improvement for providing safe, effective, caring, responsive and well-led services and for all population groups.**

## **We found that:**

- The practice had implemented systems and processes to keep patients safe, however not all systems were effective or well embedded.
- Published data for cervical cancer screening and children's immunisation uptake showed that the practice was not achieving the minimum targets.
- During the inspection we found that staff dealt with patients with kindness and respect, however published data showed that patient satisfaction was below local and national averages in regards to how well patients felt listened to or how well they felt they had been treated with care and concern. The practice was not yet able to demonstrate that patient satisfaction in these areas had improved despite actions they had taken.

- The practice had made changes to how they organised and delivered services to meet patients' needs. However, the practice could not demonstrate these changes had resulted in improved patient satisfaction.
- We found that the management team were aware of the challenges they faced and had implemented some actions to try and improve patient experience and quality of services. However, at the time of the inspection, they were not able to demonstrate that actions had been effective.

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

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care

(Please see the specific details on action required at the end of this report).

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

- Improve the arrangements for embedding learning following incidents.
- Continue to explore alternatives to increase uptake with children's immunisations and cancer screening.
- Improve systems to monitor patient satisfaction information and take appropriate action to be responsive to patients' needs.

**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

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

## Our inspection team

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

## Background to Heathfield Family Centre

Heathfield Family Centre is located in Handsworth, an area of the West Midlands. The premises are purpose built and patient services are all available on the ground level of the building.

The provider, also called Heathfield Family Centre is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services and treatment of disease, disorder or injury.

The practice has a General Medical Services contract (GMS) with NHS England. A GMS contract ensures practices provide essential services for people who are sick as well as, for example, chronic disease management and end of life care and is a nationally agreed contract. The practice also provides some enhanced services such as childhood vaccination and immunisation schemes.

The clinical team comprises of three GP partners (male), and one salaried GP (male). They are supported by two practice nurses, a healthcare assistant, a practice manager and a team of administrative and reception staff. The practice also have access to a clinical pharmacist one day each week, who is employed by the primary care network.

The registered manager for this practice is also the registered manager for two other GP practices that are

registered with CQC. The practice manager told us that if patients wanted an appointment with a female GP this could be arranged with a GP from one of the other practices.

The practice provides primary medical services to approximately 8,000 patients in the local community. The practice is situated in an area with high levels of deprivation. Data available from Public Health England, showed the practice is situated in an area ranked as one out of 10, with one being the most deprived.

The practice reception is open from 8am to 6.30pm Monday to Friday. GP appointments times are set out in the evidence tables. Telephone consultations are available if patients request them; home visits are also available for patients who are unable to attend the surgery.

The practice is part of the i3 primary care network (PCN). As part of the PCN arrangements patients can access appointments between 6.30pm to 8pm Monday to Friday and 9am till 1pm on Saturdays and 9am till 12pm on Sundays. These appointments can be booked in advance by the surgery or directly by patients.

When the practice is closed, patients are advised to call the NHS 111 service.

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 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p> <p><b>How the regulation was not being met:</b></p> <p>The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk.</p> <p>In particular, we found gaps in recruitment checks and staff files did not contain all relevant documentation. Including one non-clinical staff member did not have a risk assessment completed in the absence of a DBS check.</p> <p>The practice did not have an effective system to manage patient specific directions.</p> <p>This was in breach of Regulation 17(1)(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>