

Streets Corner Surgery

Quality Report

79-81 Lichfield Road Walsall Wood WS9 9NP Tel: 01543 377 285

Website: www.streetscornersurgery.nhs.uk/

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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	

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Streets Corner Surgery on 31 October 2016. There are two surgery sites that form the practice; these consist of the main surgery at Lichfield Road and the branch surgery, Stonnall Surgery located at Main Street, Stonnall where the practice operates a dispensary. Systems and processes are shared across both sites. During the inspection we visited the main site at Lichfield Road and the branch, Stonnall Surgery. The overall rating for the practice was good. The full comprehensive report on the October 2016 inspection can be found by selecting the 'all reports' link for Streets Corner Surgery on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 25 July 2017 to confirm that the practice 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 31 October 2016. During the inspection we only visited the main site at Lichfield Road. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice continues to be rated as good.

Our key findings were as follows:

- Arrangements to respond to emergencies and major incidents had been reviewed since our last inspection and additional arrangements were in place. The practice carried out risk assessments to mitigate any identified risks.
- Staff we spoke with explained that the failsafe system for managing cervical samples sent and received had been reviewed. We saw evidence of an effective system being operated. Unverified data provided by the practice showed an increase in the uptake of cervical screening and a significant reduction in exception reporting.
- The practice operated an effective system for monitoring and ensuring staff received appropriate training and continual professional development to enable them to fulfil the requirements' of their role.
 We saw documentation which evidenced the completion of training.
- A system to monitor and review staff competencies' during and after induction had been established. We saw that policies and procedures governed the induction process.

- Since our previous inspection, the practice continued exploring and establishing effective methods to identify carers in order to provide further support where needed. Data provided by the practice showed an increase in identified carers. Staff explained that 83 carers were invited to attend a six week programme run by a local organisation that provides self care management programmes called looking after me for carers. Data provided by the practice showed that 11% contacted the practice and showed an interest and 8% completed the six week programme.
- Evidence of joint working regarding the management patients in receipt of interventions for substance and alcohol dependency had improved since our previous inspection. We saw records of comprehensive joint care plans and completed health care reviews.

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

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

At our previous inspection, on 31 October 2016, we rated the practice as requires improvement for providing safe services as some areas relating to safe care needed improving. For example, risks in the absence of some emergency medicines and equipment had not been identified and training such as safeguarding, basic life support and infection prevention and control had not been completed by some clinical staff. These arrangements had significantly improved when we undertook a follow up inspection on 25 July 2017. For example:

- Records we viewed as part of this inspection showed that staff completed the appropriate level of training to enable them to carry out their responsibilities.
- Arrangements to respond to medical emergencies and major incidents had been reviewed since our last inspection and additional arrangements were now in place. The practice carried out risk assessments to mitigate any identified risks.

Good



The six population groups and what we found

We always inspect the quality of care for these six population groups.

Families, children and young people

The provider had resolved the concerns for safety and well-led identified at our inspection on 25 July 2017 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good





Streets Corner Surgery

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a Care Quality Commission (CQC), Lead Inspector. The team included a GP specialist adviser.

Background to Streets Corner Surgery

Streets Corner Surgery is located in Walsall, West Midlands situated in a purpose built building owned by the GP partners, providing NHS services to the local community. Streets Corner Surgery is part of a practice group which consists of a main surgery at Lichfield Road and a branch surgery, Stonnall Surgery located at Main Street, Stonnall.

Based on data available from Public Health England, the levels of deprivation in the area served by Streets Corner Surgery are above the national average, ranked at six out of 10, with 10 being the least deprived. Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial. The practice serves a higher than average patient population aged 65 plus, and below average for ages zero to 18 and 85 plus. Based on data available from public health the ethnicity estimate is 2% mixed, 2% Asian and 1% other non-white ethnic groups.

The patient list is 5,553 of various ages registered and cared for at the practice. Services to patients are provided under a General Medical Services (GMS) contract with the Clinical Commissioning Group (CCG). GMS is a contract between general practices and the CCG for delivering primary care services to local communities.

The surgery has expanded its contracted obligations to provide enhanced services to patients. An enhanced service is above the contractual requirement of the practice and is commissioned to improve the range of services available to patients.

Limited on-site parking is available with designated spaces for cyclists and patients who display a disabled blue badge. The surgery has automatic entrance doors and is accessible to patients using a wheelchair.

The practice staffing comprises of two GP partners, one female and one male, one specialist nurse prescriber, one practice nurse, one health care assistant, one prescription manager, one practice manager and a team of administrative staff.

The practice is open between 8.15am and 6.30pm on Mondays, Tuesdays and Fridays. Wednesday opening times are from 7.30am to 6.30pm, Thursdays the practice is open between 7.30am and 1pm. Reception and surgery hours are served by Stonnall surgery on Mondays from 6.30pm to 7.10pm, Wednesdays and Fridays from 6.30pm to 7pm.

GP consulting hours are from 9am to 12 noon and 4pm to 6pm on Mondays, Tuesdays Wednesdays and Fridays.

Consulting hours on Thursdays are from 9am to 1pm.

Regular locum GP sessions are available on Mondays from 11pm to 2pm and Wednesdays from 2pm to 5pm. Extended access to health care assistant appointments are available on Wednesdays and Thursdays from 7.30am. The practice has opted out of providing cover to patients in their out of hours period. During this time services are provided by Primecare through the NHS 111 service. Between the hours of 8am and 8.15 and 1pm to 6.30pm on Thursdays services are provided by WALDOC (Walsall doctors on call).

Detailed findings

The practice operated a dispensary at Stonnall surgery. The dispensary is open between 9am to 11.30am and 5pm to 7pm on Mondays, Tuesdays Wednesdays and Fridays. Thursday's opening times are between 9am and 11.30am.

Why we carried out this inspection

We undertook a comprehensive inspection of Streets Corner Surgery on 31 October 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated overall good; however, rated as requires improvement for providing safe care. The full comprehensive report following the inspection in October 2016 can be found by selecting the 'all reports' link for Streets Corner Surgery on our website at www.cqc.org.uk.

We undertook a follow up focused inspection of Streets Corner Surgery on 25 July 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

We carried out a focused inspection of Streets Corner Surgery on 25 July 2017. This involved reviewing evidence that:

- Relevant staff had now completed their required safeguarding children training, infection control and basic life support training.
- Risks had been reviewed and assessments carried out.
- Arrangements for dealing with medical emergencies had improved.

'During our visit we:

- Spoke with a GP and a practice manager.
- Reviewed an anonymised sample of treatment records of patients.
- Looked at information and data the practice used to monitor patient safety and performance.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.



Are services safe?

Our findings

At our previous inspection on 31 October 2016, we rated the practice as requires improvement for providing safe services as risks were not formally assessed and mitigated in the absence of specific emergency medicines and emergency equipment. Training such as safeguarding, basic life support, Infection Prevention and Control (IPC) had not been completed.

These arrangements had significantly improved when we undertook a follow up inspection on 25 July 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and process

During our October 2016 inspection, staff we spoke with explained that training had been scheduled as part of

clinical staffs' role specific induction. During this inspection, we saw training certificates which showed that training such as safeguarding, basic life support and Infection Prevention Control had been completed since our previous inspection.

Arrangements to deal with emergencies and major incidents

Arrangements to respond to emergencies and major incidents had been reviewed since our last inspection and additional arrangements were in place. For example:

- As part of this inspection, we saw that the practice had reviewed risks and had access to adequate medicines.
- The practice purchased a second defibrillator which was available at the branch site. Oxygen with adult and children's masks was also kept at both locations.