

# OHP-Handsworth Medical Practice

### **Inspection report**

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Date of inspection visit: 11 May 2021 Date of publication: 07/06/2021

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	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

# Overall summary

We carried out an announced focused inspection at OHP-Handsworth Medical Practice on 11 May 2021. Overall, the practice is rated as Good.

The ratings for each key question are as follows:

Safe - Good

Effective - Good

Caring – Good (rating carried forward from the March 2019 inspection)

Responsive – Good (rating carried forward from the March 2019 inspection)

Well-led - Good

At our previous inspection on 7 March 2021, the practice was rated as Requires Improvement overall and in two key questions (Safe and Effective).

The full reports for previous inspections can be found by selecting the 'all reports' link for OHP-Handsworth Medical Practice on our website at www.cqc.org.uk

### Why we carried out this inspection

This inspection was a focused inspection of the Safe, Effective and Well-Led key questions and to follow up on any breaches of regulations and 'shoulds' identified in the previous inspection.

### How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

#### This included:

- Conducting staff interviews using video conferencing or telephone.
- Completing clinical searches on the practice's patient records system and discussing findings with the provider.
- · Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit.

### **Our findings**

We based our judgement of the quality of care at this service on a combination of:

2 OHP-Handsworth Medical Practice Inspection report 07/06/2021

# Overall summary

- 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 good overall and good for all population groups.

#### We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm. This included safeguarding arrangements, recruitment processes, medicines management.
- The practice undertook effective risk management in relation to the premises with effective infection control process in place to ensure the safety of staff and patients.
- Patients received effective care and treatment that met their needs.
- The practice performed well against national patient outcome measures and there was good uptake of the child immunisation programme.
- The practice had made improvements in the provision of supervision and support to staff in extended roles.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.

Whilst we found no breaches of regulations, the provider **should**:

- Review patients on high risk medicines whose monitoring had been delayed and risk assessed at the earliest opportunity.
- Identify opportunities for learning from internal incidents to support service improvements.
- Ensure medicine risks identified from MHRA alerts are discussed with all patients as appropriate and documented.
- Review clinical improvement activity to ensure it supports clear outcomes for improvement.
- Review the recording of telephone consultations to ensure patients are made aware until the situation is resolved and recordings ceased.
- Consider the re-introduction of whole staff meetings so that staff have the opportunity to formally contribute and discuss issues arising in the practice.

### 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

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

# Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

# Background to OHP-Handsworth Medical Practice

OHP-Handsworth Medical Practice is located in a purpose built health centre in the Handsworth area of Birmingham.

The practice is part of Our Health Partnership (OHP), a provider at scale. OHP currently consists of 176 GP partners from across 37 practices in the West Midlands area. OHP has a centralised team to support member practices in their administrative and managerial functions, whilst retaining autonomy for service delivery at individual practice level.

The provider (OHP) has registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury and at this location.

The practice is situated within the Sandwell and West Birmingham Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of approximately 4,000. This is part of a contract held with NHS England.

The practice team consists of a principal GP and an Advanced Nurse Practitioner (ANP)

The practice team consists of the principal GP, an Advanced Nurse Practitioner (ANP), two Health Care Assistants (HCA) (one of the HCAs has a dual role as the practice manager). Non-clinical staff consist of a practice manager supported by a team of four admin/reception staff.

Information published by Public Health England ranks the practice at 516 out of 6900 for deprivation (lower numbers represent the most deprived practices).

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

Extended access is provided on a rotational basis between practices within the Primary Care Network in the evening and weekends. Patients can access out-of hours services by calling NHS 111.