

Highley Medical Centre

Inspection report

Bridgnorth Road
Highley
Bridgnorth
WV16 6HG
Tel: 01746861572

Date of inspection visit: 7 March 2022
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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	Inspected but not rated	
Are services safe?	Inspected but not rated	
Are services well-led?	Inspected but not rated	

Overall summary

We previously carried out an announced comprehensive inspection at Highley Medical Centre on 15 November 2021 following changes in registration, legal entity and concerns we had received in relation to care and treatment and good governance. The practice was rated inadequate overall, placed into special measures and warning notices in relation to safe care and treatment and good governance were issued. The full comprehensive report on the November 2021 inspection can be found by selecting the 'all reports' link for Highley Medical Centre on our website at www.cqc.org.uk

We carried out an announced focused inspection at Highley Medical Centre on 7 March 2022 to ensure that the issues identified in the warning notices had been addressed. **This report only covers our findings in relation to the warning notices.**

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
- 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:

- 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.

At this inspection, we found that the provider had satisfactorily addressed most of the issues identified in the warning notices. We specifically found that:

- Improvements had been made around safeguarding children and vulnerable adults. All staff had received training in safeguarding appropriate to their role and policies had been updated.
- The practice had reviewed their recruitment practices and obtained Disclosure and Barring Service (DBS) checks and the documents required by law for staff employed.
- Health and safety checks had been undertaken to mitigate risks to patients and staff.
- The practice had developed an electronic tracker to record staff training. Staff had completed essential training in safe working practices and induction packs had been developed for new staff covering all job roles.
- The practice had obtained all the suggested emergency medicines and equipment and enhanced checks had been implemented.

Overall summary

- Processes for monitoring patients prescribed high risk medicines had improved in addition to reviewing patients with long term conditions. The practice had set a timescale for completing outstanding reviews.
- The practice had commissioned the professional services of an external healthcare consultancy to review and improve their structures, processes and systems to support good governance including adopting and standardising policies and procedures. However, changes implemented needed to be fully embedded within the practice to ensure governance arrangements were effective.
- Practice, clinical and multidisciplinary meetings had been reinstated to disseminate information and improve communication. Standing agenda items had been implemented including significant events and complaints.
- The practice had implemented a software risk management system for recording and producing reports including significant events and complaints.
- Processes for managing risks, issues and performance had improved and were being embedded.

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

- Ensure all medication reviews are structured and detail a summary of the findings, the action taken and proposed follow up actions.
- Develop a written protocol for patients who fail to attend for monitoring.
- Further embed processes to act on national patient safety alerts including historical alerts to ensure that medicines continue to be prescribed safely.
- Further develop the competency recording process of staff working in advanced roles.
- Continue to embed structures, processes and systems to support good governance.

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

Our inspection team

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

Background to Highley Medical Centre

Highley Medical Centre is located in Shropshire at:

Bridgnorth Road

Highley

Bridgnorth

Shropshire

WV16 6HG

The provider is registered with Care Quality Commission (CQC) as a partnership to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning and treatment of disease, disorder or injury and surgical procedures.

The practice is a member of the NHS Shropshire, Telford and Wrekin Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a population of 3,291 patients. This is part of a contract held with NHS England. The practice is part of South East Shropshire Primary Care Network, a wider network of GP practices that work collaboratively to deliver primary care services.

Information published by Public Health England report deprivation within the practice population group as seven on a scale of 1 to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

According to the latest available data, the ethnic make-up of the practice area is 98.7% White and 0.7% Asian.

The team consists of the following part-time staff: Two GP partners, a locum GP, a salaried GP, two practice nurses, a clinical pharmacist, a locum clinical pharmacist, a health care assistant, a managing partner, an assistant practice manager, five reception/administrative staff, two domestic staff and one community and care co-ordinator.

Due to the enhanced infection prevention and control measures put in place in line with the national guidance all appointments were triaged during the height of the Covid-19 pandemic and telephone and video calls were mainly offered. From 1 October 2021 the practice reverted to offering face-to-face appointments, unless a patient requested otherwise. Any requests for a home visit are entered on a triage list for a GP to make a clinical decision as to whether a home visit is necessary.

The practice is part of a network of practices working together to offer patients extended access to pre-bookable appointments in the evenings and weekends. This service had paused during the Covid-19 pandemic. We were told this service was aiming to recommence shortly.

Out of hours services are provided by Shropshire Doctors Co-operative Ltd (Shropdoc).

Further information about the practice is available via their website at: www.highleymedicalcentre.co.uk