

# Westwood Medical Health Centre

## Inspection report

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Date of inspection visit: 20 Nov 2019

Date of publication: 28/01/2019

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 well-led?

Good



# Overall summary

We previously carried out an announced comprehensive inspection at Westwood Medical Health Centre on 15 November 2016. The overall rating for the practice was good, with a requires improvement rating for providing well-led services.

We subsequently carried out an announced focused inspection on 25 October 2017 where we found evidence of some improvements. However, we found the provider had still not ensured that there were effective governance and assurance processes to monitor the service in all areas of the practice. Consequently, the practice remained rated as requires improvement for providing well-led services, and was rated good overall.

The full comprehensive report for the November 2016 inspection and the focused report for the October 2017 inspection can be found by selecting the 'all reports' link for Westwood Medical Health Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on 20 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 during November 2016 and October 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The practice had established effective systems and processes to ensure good governance in accordance with the fundamental standards of care. Specifically, the practice had implemented an effective process to monitor and respond to Medicines and Healthcare products Regulatory Agency (MHRA) alerts consistently. This included carrying out the appropriate actions to ensure patients were not affected by the alerts.
- The practice had reviewed and implemented a revised procedure for transporting oxygen safely in an emergency.
- The practice had implemented a process to consistently record the content of discussions, decisions and proposed actions at all meetings.

**Professor Steve Field** CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

## Population group ratings

## Our inspection team

This follow up focused inspection was carried out by a CQC Lead Inspector.

## Background to Westwood Medical Health Centre

Westwood Medical Health Centre is located in Tile Hill, Coventry. It is part of the NHS Coventry and Rugby Clinical Commissioning Group (CCG). The practice has a branch surgery based at Mayors Croft, Coventry. The practice has a General Medical Services (GMS) contract with NHS England. The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities. At the time of the November 2018 inspection, Westwood Medical Health Centre was providing care for 4,915 patients.

The practice has some patient areas on the first floor, accessible by lift or stairs. A ramped front entrance and disabled facilities are available. The practice pays for car parking facilities for its patients based at the rear of the building and has limited car parking to the front.

The main practice is open Monday to Friday from 8.30am to 7.30pm (excluding bank holidays) except for Thursdays when the practice closes at 1pm. Appointments are available during these times. Mayors Croft, the practice branch surgery, is open during the week from 8.30am to 12.15pm and from 3pm to 4.30pm, apart from Thursday afternoons when the practice closes. Appointments at the branch surgery are available during the mornings only. Both the main practice and the branch surgery are closed at weekends. There is an answerphone message on

Thursday afternoons; patients can be put through to the duty GP if they cannot wait until the practice re-opens in

the morning. The practice offers pre-bookable appointments that can be booked up to four weeks in advance, same day appointments and telephone consultations. Urgent appointments are also available for patients who need them.

The practice does not provide an out-of-hours service but has alternative arrangements for patients to be seen when the practice is closed through NHS 111, the out-of-hours service provider. The practice telephone lines are closed between 8am and 8.30am; calls to the service are taken by the out of hours provider. Patients can also access GP and nurse appointments at one of the three hubs in the local area. This service is provided by the Coventry and Rugby

GP Alliance and is open from 8.30am until 9pm during the week and from 9am until mid-day on Saturdays (10am until 1pm on Sundays at the City of Coventry Health Centre only).

There are three GP partners, a business partner, two office managers, two practice nurses and reception and administrative staff. The practice provides a range of services, for example, long term condition management including asthma, diabetes and high blood pressure. The practice offers NHS health checks and smoking cessation advice and support.

The practice's website can be viewed at [www.westwoodmedicalcentre.nhs.uk](http://www.westwoodmedicalcentre.nhs.uk).

## Are services well-led?

**At our previous inspection on 15 November 2016, we rated the practice as requires improvement for providing well-led services as there was no overarching governance structure.**

**We issued a requirement notice in respect of these issues. We found that although some arrangements had improved, not all areas had been addressed when we undertook a follow up inspection of the service on 25 October 2017. The practice remained rated as requires improvement for providing well-led services.**

**We issued a further requirement notice in respect of these issues and found arrangements had significantly improved when we undertook a follow up inspection of the service on 20 November 2018. The practice is now rated as good for being well-led.**

### Governance arrangements

The practice had implemented an effective process to monitor and respond to Medicines and Healthcare products Regulatory Agency (MHRA) alerts consistently. This included carrying out the appropriate actions to ensure patients were not affected by the alerts. We saw evidence of the following:

- The Practice Manager had subscribed to MHRA updates and alerts which were also forwarded to practice staff.
- In November 2017 the practice had implemented and maintained an up-to-date log of all MHRA alerts. This included summaries of the alerts and any actions taken.
- The practice checked all MHRA alerts received against the Drug Safety Update Monthly Newsletter on an ongoing basis. These newsletters and the results of the checks were actioned and filed.
- Staff from the Coventry and Rugby Clinical Commissioning Group (CCG) Medicines Management

Team attended the practice every week to assist with carrying out patient searches and check for appropriate actions relating to MHRA alerts. Any searches or actions carried out by CCG staff were signed, dated and then filed.

- Staff had access to the expertise of a Clinical Pharmacist who visited the practice twice weekly.
- Any required actions relating to MHRA alerts were discussed as part of full practice meetings.

We saw evidence that the practice had completed an audit into MHRA alerts and actions at the end of October 2018, as part of monitoring ongoing improvements. This audit reviewed the period from November 2017 to October 2018, and found all necessary actions had been taken and documented. Practice staff told us they planned to repeat the audit every 12 months, or sooner if needed (for example if there were any concerns identified).

The practice had reviewed and implemented a revised procedure for transporting oxygen safely in an emergency. We saw evidence that the practice had purchased a suitable protective bag for storing and if necessary transporting an oxygen cylinder. This would enable the practice to transport oxygen safely.

The practice had implemented a process to consistently record the content of discussions, decisions and proposed actions during all meetings. We saw evidence of meetings held from November 2017 to October 2018, which included safeguarding meetings, GP Alliance meetings, full practice meetings, staff meetings, and Patient Participation Group (PPG) meetings. The practice had carried out an audit of these meetings at the end of October 2018, in order to identify and monitor decisions and learning outcomes.