

OHP-Handsworth Medical Practice

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?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced comprehensive inspection at OHP- Handsworth Medical Practice on 7 March 2019 as part of our inspection programme.

At the last inspection in December 2015 we rated the practice as Good overall. At this inspection we rated the practice requires improvement overall.

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.

We rated the practice as **requires improvement** for providing safe and effective services because:

- The provider was unable to demonstrate that all clinical staff had suitable indemnity arrangements in place.
- Risks associated with the absence of some emergency medicines were not assessed and managed effectively.
- The practice was unable to demonstrate a comprehensive quality assurance system, including appropriate training and formal supervision for staff undertaking extended roles to ensure competency was reviewed and maintained.

We rated the practice as **good** for providing caring, responsive and well led services because:

• Staff dealt with patients with kindness and respect and involved them in decisions about their care.

- Patients were able to access timely care and treatment.
- There were evidence of systems and processes for learning and continuous improvement.

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

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out the duties.

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

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

- Ensure staff receive the appropriate training relevant to their role including safeguarding and chaperoning.
- Follow up on the actions from the risk assessments in place for staff who do not have vaccinations relevant to their role and in line with current Public Health England (PHE) guidance.
- Consider how to increase the uptake for cervical and bowel cancer screening.
- Ensure audit cycles are completed where appropriate.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Professor Steve Field CBE FRCP FFPH FRCGPChief Inspector of General Practice

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a second CQC inspector and a GP specialist adviser.

Background to OHP-Handsworth Medical Practice

OHP- Handsworth Medical Practice is part of the provider at scale organisation Our Health Partnership (OHP). Our Health Partnership (OHP) currently consists of 189 partners across 37 practices providing care and treatment to approximately 359,000 patients. The provider has a centralised team to provide support to member practices in terms of quality, finance, workforce, business planning, contracts and general management, whilst retaining autonomy for service delivery at individual practices. OHP also provides a mechanism by which practices can develop ideas to support the sustainability of primary medical services and provide a collective voice to influence change in the delivery of services locally and nationally. OHP- Handsworth Medical Practice was added as a location to the providers Care Quality Commission (CQC) registration in August 2017.

The practice is registered with the CQC to carry out the following regulated activities diagnostic and screening procedures, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The practice is part of the NHS Sandwell and West Birmingham Clinical Commissioning Group (CCG). The practice provides NHS services through a General Medical Services (GMS) contract to approximately 3,900 patients. 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 vaccinations. The practice is located in an inner city area of Birmingham with high levels of deprivation. The premises are purpose built for providing primary medical services.

The practice is a partnership between the GP (male) and the practice manager. The GP is supported by a practice nurse an advance nurse practitioner and three health care assistants all of whom work part time. The non-clinical team consists of reception staff and the practice manager.

The practice is open in the mornings between 9am and 11am Monday, Tuesday, Wednesday and Friday. On a Thursday morning opening times are 9am to 10.30am then 11am to12.30pm. The afternoon opening times are from 4pm to 5.30pm on a Monday, Tuesday and Friday except on a Wednesday afternoon when the practice is closed. On a Thursday the practice is open from 4pm to 6pm with extended hours opening from 6pm to 8pm. There is an extended care service as part of a GP network and commissioned by the CCG which allows patients to access to GP services from 6.30pm to 8pm Monday to Friday and 9am to 12pm Saturday and Sunday. Appointments are booked by patients through their GP practice.

When the practice is closed during core hours the GP was on call. The practice has opted out of providing an out-of-hours service. Patients can access the out of hours service provider by calling NHS 111.

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 Regulation 17 HSCA (RA) Regulations 2014 Good governance Maternity and midwifery services There were a lack of effective systems or processes that Surgical procedures enabled the registered person to assess, monitor and Treatment of disease, disorder or injury mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk In particular we found: • The provider was unable to demonstrate that all clinical staff had suitable indemnity arrangements in place. • The risk assessment in place in the absence of some emergency medicines was not comprehensive. This was in breach of Regulation 17 (1b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity

Diagnostic and screening procedures

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

Regulation

Regulation 18 HSCA (RA) Regulations 2014 Staffing

Persons employed by the service provider in the provision of a regulated activity did not receive such appropriate support, training, professional development, supervision as is necessary to enable them to carry out the duties they are employed to perform.

In particular we found:

 The practice was unable to demonstrate a comprehensive quality assurance system, including appropriate training and formal supervision for staff undertaking extended roles to ensure competency was reviewed and maintained.

This was in breach of Regulation 18 (2a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.