

OHP-The Dove 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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Requires improvement 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at OHP-The Dove Medical Practice on 20 February 2019.

At the last inspection in May 2018 we rated the practice as requires improvement for providing safe, responsive and well led services. The practice was rated good for providing effective and caring services. At this inspection the practice had made improvements in a number of areas however, patients ability to access the service in a timely manner required further improvement.

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 good overall.

We rated the practice as requires improvement for providing effective care to population group working age people (including those recently retired and students) because:

- The practice did not have an effective system in place to follow up patients who did not attend for further investigation of their cervical screening test result.

We rated the practice as requires improvement for providing responsive services overall and across all population groups because:

- Patients were not always able to access timely care and treatment.

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

- The practice had adequate systems to manage most risks so that safety incidents were less likely to happen. When incidents did happen, the practice learned from them and improved their processes.

- Care and treatment was delivered according to evidence based guidelines.

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

- There was a strong focus on continuous learning and improvement. Systems and processes were in place to support good governance.

The areas where the provider should make improvements are:

- Have appropriate risk assessments in place for staff who are unable to provide documentary evidence of vaccinations relevant to their role and in line with current Public Health England (PHE) guidance.
- Ensure comprehensive risk assessments are in place for the storage of hazardous substances for example, liquid nitrogen and chemicals used for cleaning.
- Ensure staff are trained on the use of the emergency fire evacuation chair.
- Have an effective in place to follow up patients who do not attend for further investigation of their cervical screening test result.
- Review how care and treatment for patients with a learning disability may be improved.
- Consider a formal process to evidence in house training and supervision for staff in advance roles.
- Continue to explore ways to improve access for patients.

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

Professor Steve Field CBE FRCP FFPH FRCGP

Chief 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, a GP specialist advisor and a practice nurse specialist advisor.

Background to OHP-The Dove Medical Practice

OHP-The Dove 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-The Dove 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, treatment of disease, disorder or injury, maternity and midwifery services, Family planning and Surgical procedures.

The practice is part of the NHS Birmingham and Solihull Clinical Commissioning Group (CCG). The practice provides NHS services through a General Medical Services (GMS) contract to approximately 10,000 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 urban area of Birmingham with high levels of deprivation (within the most deprived 10% in the country). The premises are purpose built for providing primary medical services and shared with other community health teams. The practice registered list size is approximately 10,000 patients.

The practice currently has four GP partners (two female and two male), three salaried GPs (two female and one male). There is a team of nursing staff consisting of two nurse practitioners and two practice nurses. There are also two health care assistants. Other practice staff include a practice manager, IT manager, an operations manager and a team of administrative / reception staff who support the daily running of the practice. The practice is a training practice for qualified doctors (registrars) training to become a GP. At the time of the inspection there were two GP registrars.

The practice is open between 8am and 6.30pm Monday to Friday. The CCG has commissioned an extended hours service. The extended hours service operates between 6.30pm and 8pm Monday to Friday, 9am to 1pm Saturday and 10am to 1pm on a Sunday. The service is available at



a local GP practice which is part of a GP “Hub”. This involves working with a local practice within a wider



Primary Care Network. Appointments are made through the practice. 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.