

Dr Clifford Ojukwu

Quality Report

Birmingham Heartlands Surgery
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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 service

Good



Are services safe?

Good



Are services caring?

Good



Are services responsive to people's needs?

Requires improvement



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out a focused inspection of Dr C Ojukwu on 20 October 2016 to check that action had been taken since our previous inspection on 15 September 2015. At the inspection in September 2015 the practice was rated as requires improvement overall. The practice was rated good for effective and well led services, but rated requires improvement for safe, caring and responsive.

In September 2015 we found that the practice required improvement in the safe domain due to a breach of regulations relating to safe care and treatment. This was because:

- the nurse treatment room was not adequately maintained so that the risk of infection could be managed effectively for the safety of patients and staff.

Additional improvements were required because:

- The provider had not taken action to show how they intended to address the results shown in the National GP Patient Surveys for 2014/2015.

- The health and safety of staff was not assured when using computer equipment situated in the nurse's treatment room.
- The provider needed to take action to improve the availability of non-urgent appointments.

We inspected the practice on 20 October 2016 to check that they had followed their action plan and to confirm that they now met legal requirements. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection. You can read the report from our last comprehensive inspection of Dr C Ojukwu on our website at www.cqc.org.uk.

Our key findings for this inspection were as follows:

The provider had made improvements:

- An extension to the practice building had been completed to provide additional treatment rooms. All existing consulting/treatment rooms had been refurbished as part of the restructuring which meant effective management of infection control could be maintained in the nurses room and throughout the building.

Summary of findings

- The provider had developed a plan of action plan to show how the practice aimed to address the results shown in the National GP Patient Surveys and the action they had taken. This included annual practice patient surveys, compilation of surveys in alternative languages to reach non-English speaking patients to gain their views of the practice, installation of an upgraded telephone system to improve telephone access for patients and the planned trial of an earlier opening time from 9am with effect from 2 January 2017.
- Appropriate display screen assessments had been completed for the use of computer equipment in the nurses room. Records confirmed that health and safety guidelines were being followed.

- The provider had made suitable arrangements to improve the availability of non-urgent appointments. Cover was provided by Badger Medical for daytime hours when the practice was closed.

However there was an area where the provider should make improvements:

- Continue to ensure continued improvements to patient satisfaction are made in response to feedback from the National GP Patient Survey information.

The practice was rated good for safe and caring services and requires improvement for responsive. The practice is now rated **good** overall.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

The practice is rated as good for providing safe services.

Good



- The practice had completed a Display Screen Equipment (DSE) assessment. The work station had also been re-sited to the new nurses room and had been assessed as compliant through the DSE assessment.
- An extension to the practice building had been completed to provide additional treatment rooms. All existing consulting/ treatment rooms had been refurbished as part of the restructuring which meant effective management of infection control could be maintained in the nurses room and throughout the building.

Are services caring?

The practice is rated as good for providing caring services.

Good



- A formal action plan had been put in place to show how the practice intended to address patient feedback from the National GP Patient Survey results, identify improvements needed and monitor the effectiveness of the improvements made. Action taken included completion of annual practice surveys to monitor patient feedback and the compilation of surveys in alternative languages to reach non-English speaking patients to gain their views of the practice.
- Although results for the National GP Patient Survey for 2014/ 2015 were generally lower than local and national averages in most areas, there had been some improvement on the survey results for 2015/2016. For example, average scores for GPs listening to patients had improved by 16% on the previous year; GPs giving patients enough time had increased by 2%; patients who had confidence and trust in the last GP they saw had increased by 7%; and the last GP patients had seen was good at explaining tests and treatments had increased by 15%. However, improvement was still needed regarding patient experiences of services received.

Are services responsive to people's needs?

The practice is rated as requires improvement for providing responsive services.

Requires improvement



Summary of findings

- The provider had taken action to improve the availability of non-urgent appointments. Cover was provided by Badger Medical Group (contracted) for daytime hours when the practice was closed.
- The practice opened from 6.30pm to 8pm on Thursdays for extended hours appointments with the GP which was useful to patients with work or study commitments. There were however, no early morning appointments available, particularly for those patients who worked. The practice planned to trial earlier opening time of 9am with effect from 2 January 2017.
- Although results remained lower than local and national averages, there had been some improvements in patient feedback about access to care and treatment through the National GP Patient Survey for 2015/2016.
- The telephone system had been upgraded to improve telephone access for patients and patient feedback had been positive.

We acknowledge the action the practice has taken to improve patient satisfaction and that it is improving. However, the data remains considerably below Clinical Commissioning Group (CCG) and national averages and the plans put in place require more time to evidence the improvement required.

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The provider had resolved the concerns for safety, caring and responsive identified at our inspection on 15 September 2015 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for safety, caring and responsive identified at our inspection on 15 September 2015 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for safety, caring and responsive identified at our inspection on 15 September 2015 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety, caring and responsive identified at our inspection on 15 September 2015 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety, caring and responsive identified at our inspection on 15 September 2015 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety, caring and responsive identified at our inspection on 15 September 2015 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- Continue to ensure continued improvements to patient satisfaction are made in response to feedback from the National GP Patient Survey information.

Dr Clifford Ojukwu

Detailed findings

Our inspection team

Our inspection team was led by:

a CQC inspector.

Background to Dr Clifford Ojukwu

Dr C Ojukwu's practice, known locally as Birmingham Heartlands Surgery, is an inner city practice in Birmingham that provides primary medical services to patients. The practice is a single handed GP practice that is supported by regular locum GPs, a practice manager, a practice nurse, a health care assistant and reception staff. There were 3169 patients registered with the practice at the time of the inspection.

The practice is located in an area of high deprivation with black, minority ethnic (BME) community groups making up over 60% of the practice population group. The practice has high numbers of children, young patients and vulnerable groups within the practice population.

The practice is open from 9am to 6.30pm Mondays, Tuesdays, Thursdays and Fridays and from 9.30 to 1.30pm on Wednesday with appointments available within these times. The practice is closed at weekends. When the practice is closed during daytime hours contracted cover is provided by Badger Medical Group. Home visits are available for patients who are too ill to attend the practice for appointments. There is also an online service which allows patients to order repeat prescriptions and book appointments. The practice opens from 6.30pm to 8pm on Thursdays for extended hours appointments with the GP.

The practice does not provide an out-of-hours service but has alternative arrangements in place for patients to be seen when the practice is closed. If patients call the practice when it is closed, an answerphone message gives the telephone number they should ring depending on the circumstances. Information on the out-of-hours service (provided by Badger) is provided to patients and is available on the practice's website and in the patient leaflet.

The practice treats patients of all ages and provides a range of medical services. This includes specialist clinics for diabetes and chronic obstructive pulmonary disease (COPD) (lung disease). It also offers childhood immunisations, family planning, travel health vaccines, smoking cessation and a minor surgery service.

Birmingham Heartlands Surgery has a General Medical Services (GMS) contract. The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities. The practice has completed the extension to the building since our last inspection and this is beneficial to patients and staff.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr C Ojukwu on 15 September 2015 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection in September 2015 can be found by selecting the 'all reports' link for Dr C Ojukwu on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up focused inspection of Dr C Ojukwu on 20 October 2016. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

During our inspection we:

- Spoke with the practice manager and the practice nurse.
- Viewed the treatment and consulting rooms in the practice building.
- Looked at information the practice used to deliver care and treatment plans.
- Reviewed information provided by the practice prior to the inspection.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 15 September 2015 we rated the practice as requires improvement for providing safe services. The arrangements in respect to health and safety and infection control were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 20 October 2016.

Overview of safety systems and process

At the previous inspection we found that:

- Risks to patients were assessed and well-managed, although the practice had not ensured that the nurse treatment room was adequately maintained so that infection control could be managed effectively. We saw that wall tiles above the work surface were not fully sealed and some tiles were cracked. There was a crack in the wall from ceiling to work surface. The nurse carried out immunisations and dressings in this treatment room. Remedial repair work was needed to ensure that infection control was effectively managed.
- The health and safety of staff had not been assured when using computer equipment situated in the nurse's treatment room as it did not follow health and safety guidelines.

The follow up inspection showed that improvements had been made:

- We found that the building work had almost been completed and an extension to the building had provided additional clinical rooms. Some interior redecoration to the administration areas of the practice were being completed at the time of the inspection. All clinical rooms were well equipped and fully met the requirements to enable the effective management of infection control.
- We found that a Display Screen Equipment (DSE) assessment had been completed for the use of computer equipment. The work station had also been re-sited to the new nurses room and equipment had been assessed as compliant through the DSE assessment.

Are services caring?

Our findings

At our previous inspection on 15 September 2015 we rated the practice as requires improvement for providing caring services. National GP Patient Surveys for 2014/2015 showed that the practice scored below average results and the practice was unable to demonstrate action taken to address these results.

We saw improvements had been made when we undertook a follow up inspection on 20 October 2016.

Care planning and involvement in decisions about care and treatment

At the previous inspection we found that:

- The provider did not have a plan of action to show how the practice aimed to improve patients experience as reported in the National GP Patient Surveys for 2014/2015. Survey results showed that the practice scored below average results in relation to patients' experience of the practice, the satisfaction scores on consultations with GPs and nurses and with involvement in the planning and making decisions about their care.

The follow up inspection showed that improvements had been made:

- We saw that a formal action plan had been put in place to show how the practice intended to address patient feedback, identify improvements needed and monitor the effectiveness of the improvements made. Action taken to improve patients experience of the practice included completion of annual practice surveys to monitor patient feedback; compilation of surveys in alternative languages to reach non-English speaking patients to gain their views of the practice; encourage more patient interaction through the Patient Participation Group (PPG), to engage with patients to encourage participation in future National GP Patient Surveys as patients had told the practice they had not understood the questions and they were not available in alternative formats.

Although results for the National GP Patient Survey for 2015/2016 were generally lower than local and national averages in most areas, there had been some improvement on the results for 2014/2015. For example:

- 2014/2015 results showed that 68% said the GP was good at listening to them compared to the Clinical Commissioning Group (CCG) average of 88% and national average of 89%. 2015/2016 results showed this had increased by 16% to 84%.
- 2014/2015 results showed that 71% said the GP gave them enough time compared to the CCG average of 85% and national average of 87%. 2015/2016 results showed this had increased by 2% to 73%.
- 2014/2015 results showed that 84% said they had confidence and trust in the last GP they saw compared to the CCG average of 95% and national average of 95%. 2015/2016 results showed this had increased by 7% to 91%.
- 2014/2015 results showed that 67% said the last GP they spoke to was good at treating them with care and concern compared to the CCG average of 84% and national average of 85%. 2015/2016 results showed this had increased by 13% to 73%.
- 2014/2015 results showed that 50% said the last nurse they spoke to was good at treating them with care and concern compared to the CCG average of 90% and national average of 92%. 2015/2016 results showed this had increased by 9% to 59%.
- 2014/2015 results showed that 57% of patients said they found the receptionists at the practice helpful compared to the CCG average of 85% and national average of 87%. 2015/2016 results showed this had increased by 8% to 65%.

The practice told us that they continued to work towards improved experiences for patients and survey results. They saw this as work in progress.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 15 September 2015 we rated the practice as requires improvement for providing responsive services. Improvements were needed to the availability of non-urgent appointments.

We saw that improvements had been made when we undertook a follow up inspection on 20 October 2016.

Access to the service

At the previous inspection we found that:

- The practice was open for appointments from 9am to 6.30pm Mondays, Tuesdays, Wednesdays and Fridays, and from 9.30am to 1.30pm on Thursdays. The practice opened for extended hours from 3pm on Thursday each week with late evening pre-bookable appointments with the GP until 8pm.
- Results from the National GP Patient Survey for 2014/2015 showed that patient's satisfaction with how they could access care and treatment was below local and national averages.

The follow up inspection carried out on 20 October 2016 showed that improvements had been made:

- Changes had been made to the appointment times. The practice opened from 9.30am to 6.30pm Mondays, Tuesdays, Thursdays and Fridays and from 9.30 to 1pm on Wednesday with appointments available within these times. The practice was closed at weekends. When the practice was closed during daytime hours contracted cover was provided by Badger Medical Group. There was also an online service which allowed patients to order repeat prescriptions and book new appointments without having to telephone the practice.
- The practice opened from 6.30pm to 8pm on Thursdays for extended hours appointments with the GP which was useful to patients with work or study commitments. There were however, no early morning appointments available, particularly for those patients who worked. The practice had taken the decision to remove the early morning extended hours appointments following a review of the appointments. There had been a low take up and failed attendance for appointments. The practice had planned however, to trial an earlier opening time of 9am with effect from 2 January 2017.

- The provider demonstrated that they fulfilled their contractual obligations in providing appointments for the core 40 hours per week (with additional 1.5 uncontracted hours per week) with the cover provided by Badger Medical Group which they had contracted.

There had been some improvements in patient feedback about access to care and treatment through the National GP Patient Survey for 2015/2016, although results remained lower than local and national averages. For example:

- 2014/2015 results showed that 49% of patients were satisfied with the practice's opening hours, which was below the Clinical Commissioning Group (CCG) average of 74% and the national average of 76%. This had increased to 55% in the 2015/2016 results.
- 2014/2015 results showed that 31% of patients said they could get through easily to the surgery by telephone which was below the CCG average of 71% and the national average of 72%. This had remained at 31% in the 2015/2016 results. The practice's own survey results showed that 82% of patients had found it easy to get through by telephone in the three months prior to the inspection.
- 2014/2015 results showed that 26% of patients described their experience of making an appointment as good which was below the CCG average of 71% and the national average of 74%. This had increased to 32% in the 2015/2016 results. The practice's own survey results showed that 91% of patients found it easy to make an appointment in the three months prior to the inspection.
- 2014/2015 results showed that 17% of patients said they usually waited 15 minutes or less after their appointment time which was below the CCG average of 57% and the national average of 65%. This had increased to 26% in the 2015/2016 results.

The practice had taken action to make improvements, including:

- Engagement with a local GP Resilience initiative to support GP practices to become more resilient with the future challenges for their services. Meetings had been scheduled to explore options available to the practice.

Are services responsive to people's needs? (for example, to feedback?)

- Upgrade of the telephone system to improve telephone access for patients. The practice manager told us they had gathered patient feedback on telephone access in their last survey which had demonstrated improvements.
- The practice planned to trial an earlier opening time of 9am with effect from 2 January 2017.

We acknowledge the action the practice has taken to improve patient satisfaction and that it is improving. However, the data remains considerably below CCG and national averages and the plans put in place require more time to evidence the improvement required.