

Meadowbrook Surgery

Inspection report

4, Meadowbrook Road
Halesowen
B63 1AB
Tel: 01215501034
www.meadowbrooksurgey.nhs.uk

Date of inspection visit: 14 September 2023
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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 to people's needs?

Good



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced comprehensive inspection at Meadowbrook Surgery on 14 September 2023. Overall, the practice is rated as requires improvement.

Safe – requires improvement

Effective - requires improvement

Caring - good

Responsive - good

Well-led - requires improvement

Following our previous inspection on 17 August 2015, the practice was rated good overall and for all key questions. The full reports for previous inspections can be found by selecting the ‘all reports’ link for Meadowbrook Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities.

This was a comprehensive inspection to review the following domains:

- Safe
- Effective
- Caring
- Responsive
- Well-led

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice’s patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- 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:

Overall summary

- 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 found that:

- Patients' needs were assessed; however, care and treatment was not always delivered in line with current standards and evidence-based guidance. For example, we identified concerns in relation to medicines management, the diagnosis of conditions, and monitoring and follow-up of patients with long-term conditions.
- Medicines and Healthcare products Regulatory Agency alerts were not always promptly actioned.
- The practice learned from incidents, events and complaints and ensured learning was shared amongst the staff team.
- We found the premises were well maintained, appeared clean and tidy and had appropriate infection prevention and control arrangements in place.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- There were governance systems in place, however they did not always work effectively, in particular the oversight of medicines management and the coding of patients with diagnosis or long term conditions.

We found a breach of regulations. The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

Whilst we found a breach of regulation, the provider **should**:

- Take steps to ensure all risk assessments are carried out for all staff where a disclosure and barring check has not been required.
- Take action to complete mandatory training for staff employed at the practice.
- Take action to ensure safeguarding registers are reviewed and accurate.
- Take action to complete sepsis training.
- Take action to record the day of the week for patients prescribed Methotrexate in line with best practice.
- Take action to review patients in a timely way where a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) decision is in place.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

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

Background to Meadowbrook Surgery

Meadowbrook Surgery is located in Halesowen:

4 Meadowbrook Road

Halesowen

West Midlands

B63 1AB

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury and surgical procedures.

The practice is situated within the Black Country Integrated Care Board (ICB) and delivers General Medical Services (GMS) to a patient population of about 6,700. This is part of a contract held with NHS England.

The practice is not part of a Primary Care Network (PCN) but has access to services within the locality.

Information published by Public Health England shows that deprivation within the practice population group is ranked as level eight, with one being the most deprived and 10 being the least deprived. According to the latest available data, the ethnic make-up of the practice area is 93% White, 7% Black, Asian, Mixed and Other.

The practice is run by three GP partners (male) and the clinical team includes two part time nurses. The clinicians are supported by a practice manager and a team of reception/administration staff.

The practice is open between 8.30am to 6pm Monday, Tuesday, Wednesday, Friday and from 8.30am until 12pm on Thursdays. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments. The practice commissions an out of hours provider when the practice is closed: Monday to Friday between 8am and 8.30am and 6pm and 6.30pm and Thursday's 12pm-6.30pm. Out of hours services are provided by NHS111.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider was unable to demonstrate that there were effective governance processes in place to ensure areas of risk was regularly reviewed and monitored. In particular:</p> <ul style="list-style-type: none">• Medicines management processes had not been effectively implemented, and some patients had not received the required level of monitoring or review.• Long term condition reviews were not always completed in line with national guidance.• Patients had not been correctly diagnosed with long-term conditions when required.• Medicines safety alerts had not been fully actioned.• The provider was unable to demonstrate that some clinical staff maintained an accurate, complete and contemporaneous record in respect of each service user, including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>