

OHP-Bartley Green 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?

Good



Are services caring?

Good



Are services responsive?

Requires improvement



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at OHP – Bartley Green Medical practice on 17 January 2019 as part of our inspection programme.

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 services because:

- The practice demonstrated that systems were in place to ensure that patients were appropriately safeguarded. However, the practice was unable to demonstrate that safety systems and processes in place to manage risk throughout the practice were always fully effective, or being appropriately monitored. We found gaps where risks had not been considered, monitored and where actions identified had not been completed. Following the inspection, the practice demonstrated that it had taken action to address these concerns.

We rated the practice as **Requires Improvement** for providing responsive services because:

- Patients were not always satisfied with access to care and treatment, including telephone access and access to appointments. The practice demonstrated that they had and would continue to take actions to try and address this. However, they were unable to demonstrate that patient satisfaction had yet improved as a result of their actions.

We rated the practice as **Requires Improvement** for providing well-led services because:

- The practice showed leadership and appropriate governance in relation to succession planning and

development. However, the practice was unable to demonstrate that governance systems and processes that were in place were always effective. Particularly in relation to recruitment and risk management.

We rated the practice as **Good** for providing effective and caring services because:

- Quality outlook framework (QoF) performance was in line with local and national averages in many areas, together with lower than average overall exception reporting.
- Cancer screening was in line with local and national averages for cervical, bowel and breast cancer.
- Patient feedback we received from patients relating to involvement in care and treatment was in line with local and national averages.

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

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

- Continue to ensure that records relating to staff training are maintained in a comprehensive format.
- Review systems for identifying and supporting carers to ensure that proactive measures are taken.
- Continue to take action to improve childhood immunisation uptake.
- Continue to work to improve levels of patient satisfaction particularly in relation to access.

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 GP specialist advisor and a second CQC inspector.

Background to OHP-Bartley Green Medical Practice

OHP – Bartley Green 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 added Bartley Green Medical Practice as a location to their registration in August 2017.

OHP – Bartley Green Medical Practice is situated in the Bartley Green area of Birmingham, within a purpose built medical practice. The practice population is approximately 6100 patients and has a practice population that is in line with local and national averages in terms of age. Approximately 16% of the practice population identify as Black, Minority, Ethnic (BME).

The level of deprivation in the area according to the deprivation decile is two out of ten (The Index of Multiple Deprivation 2015 is the official measure of relative deprivation for small areas (or neighbourhoods) in England).

OHP – Bartley Green Medical Practice is led by four GP partners (two female and one male) who are supported by one salaried GPs and three practice nurses (all female) and a female Health Care Assistant (HCA). The practice manager is supported by an IT manager, an office manager and a team of administration and reception staff.

The practice's opening hours are Monday to Friday 8.15am until 6.15pm except Wednesday when the practice closed at 1.15pm for the day. Patients can access extended hours appointments on weekday evenings from 6.30pm until 8pm and at weekends between 9am and 1pm at another practice locally through the extended access hub arrangement.

Appointments are available throughout the day from 9am until 6pm on Mondays to Fridays, except Wednesdays when the practice closes at 1.15pm. The practice's out of hours service is provided by Birmingham and District General Emergency Rooms (BADGER). Telephone lines

are covered by SouthDoc when the practice is closed within normal working hours and calls are automatically diverted to the out of hours service outside of these times.

The practice provides NHS primary health care services for patients registered with the practice and holds a General Medical Service (GMS) contract with the local Clinical Commissioning Group (CCG).

OHP – Bartley Green Medical Practice is registered with CQC to provide five regulated activities associated with primary medical services, which are: treatment of disease, disorder and injury; family planning; maternity and midwifery; diagnostic and screening procedures and surgical procedures.

This section is primarily information for the provider

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance How the regulation was not being met... The registered person had a system or process in place that was operating ineffectively in that they failed to enable to registered person to assess, monitor and 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 practice could not demonstrate that they had always assured themselves of all relevant information prior to employing some staff. This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.