

Queslett Medical Centre

Quality 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 service

Good



Are services safe?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Queslett Medical Centre on 19 September 2016. The overall rating for the practice was good. The full comprehensive report on the September 2016 inspection can be found by selecting the 'all reports' link for Queslett Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced desk-based review carried out on 11 May 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 19 September 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice continues to be rated as good.

Our key findings were as follows:

- The practice operated effective systems for reporting and recording significant events. Significant event logs showed that the practice had responded and learned from safety incidents.
- Effective systems were in place to receive, act on and disseminate alerts from the Medical and Healthcare

products Regulatory Agency (MHRA). Members of the management team provided documentation which showed that appropriate actions had been taken and outcomes shared within the practice.

- When we carried out our September 2016 comprehensive inspection data we viewed showed that the practice uptake for national screening programmes such as bowel and breast cancer was below local and national average. As part of this desk-based review members of the management team we spoke with explained that the practice continued working closely with the health promotion team to encourage uptake. For example, we were told that staff actively monitored attendance and actively contacted patients who failed to attend their screening appointments. The practice provided evidence of posters which they placed in the reception area advising patients of future screening dates.
- The practice provided unverified data from 2015/17 screening round which showed that 32 patients were invited for breast screening, 45% attended; 47% were allocated a second appointment and 13% opted out.

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?

At our previous inspection on 19 September 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of responding to patient safety alerts such as Medicines and Healthcare products Regulatory Agency (MHRA) and maximising learning from significant event were not adequate. These arrangements had significantly improved when we undertook a follow up inspection on 11 May 2017. For example:

- Staff understood and fulfilled their responsibilities to raise concerns and report incidents and near misses.
- Documentations we viewed showed effective systems for reporting and recording significant events. We saw that lessons were shared to help improve safety in the practice and when things went wrong patients were informed.
- The practice operated an effective system for managing and disseminating patient safety alerts. Members of the management team provided evidence which demonstrated actions taken to ensure compliance with safety alerts.

Good



Queslett Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a Care Quality Commission (CQC), Lead Inspector.

Background to Queslett Medical Centre

Queslett Medical Centre is located in Great Barr West Midlands situated in a purpose built single level building, providing NHS services to the local community. Based on data available from Public Health England, the levels of deprivation (Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial) in the area served by Queslett Medical Centre are comparable to the national average, ranked at six out of 10, with 10 being the least deprived. The practice serves a higher than average patient population aged between 20 to 34 and 45 to 94, below average for ages five to 19 and 35 to 44.

The patient list is approximately 1,445 of various ages registered and cared for at the practice. Services to patients are provided under a General Medical Service (GMS) contract with NHS England. GMS is a contract with the Clinical Commissioning Group (CCG). GMS is a contract between general practices and the CCG for delivering primary care services to local communities.

The surgery has expanded its contracted obligations to provide enhanced services to patients. An enhanced service is above the contractual requirement of the practice and is commissioned to improve the range of services available to patients.

Parking is available for cyclists and patients who display a disabled blue badge. The surgery has manual operated entrance doors, step free access and is accessible to patients using a wheelchair.

The practice staffing comprises of one male and one female GP partner, one Practice Nurse, one health care assistant, one practice manager and two administrators.

The practice is open between 9.30am to 1pm and 4.30pm to 7pm on Mondays, 9.30am to 1pm and 4.30pm to 6.30pm Tuesdays, Thursdays and Fridays. Wednesday opening hours are from 9.30am to 1pm.

GP consulting hours are from 9.30am to 12 noon and 5pm to 7pm on Mondays, 9.30am to 12 noon and 5pm to 6.30pm Tuesdays, Thursdays and Fridays. Wednesday surgery times are from 9.30am to 12 noon. Between the hours of 6pm and 8pm Mondays to Fridays and 10am to 1pm on Saturdays patients are able to access GP services via Burbury Medical Centre as part of a Hub arrangement. During in-service closure times, the practice has arrangements with another provider (WALDOC) to cover calls. The practice has opted out of providing cover to patients in their out of hours period. During this time services are provided by NHS 111.

Why we carried out this inspection

We undertook a comprehensive inspection of Queslett Medical Centre on 19 September 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report following the inspection on September 2016 can be found by selecting the 'all reports' link for Queslett Medical Centre on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up desk-based focused inspection of Queslett Medical Centre on 11 May 2017. 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

We carried out a desk-based focused inspection of Queslett Medical Centre on 11 May 2017. This involved reviewing evidence that:

- The practice had established a systematic approach for acting on patient safety alerts such as Medicines and Healthcare products Regulatory Agency (MHRA).
- Incident reporting process enabled the practice to maximise learning opportunities.
- The practice continued to encourage the uptake of national screening programs such as cervical, bowel and breast cancer screening.

Are services safe?

Our findings

At our previous inspection on 19 September 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of responding to patient safety alerts such as Medicines and Healthcare products Regulatory Agency (MHRA) and maximising learning from significant event were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 11 May 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

When we carried out the September 2016 inspection we saw a system was in place for reporting and recording significant events; however, incident records we viewed did not demonstrate where learning opportunities had been maximised and the practice did not establish a systematic approach for responding to safety alerts. Members of the management team we spoke with as part of this inspection explained that processes had been strengthened. For example:

- Five significant events were documented since the previous inspection. Members of the management team provided records which we looked at and found that actions were taken to improve processes and prevent the same thing happening again. We saw evidence that lessons were shared internally and with external stakeholders and actions taken to improve safety in the practice. For example, we saw communication with the Clinical Commissioning Group informing them of issues which caused referrals to other health care providers being rejected.
- Staff we spoke with as part of this inspection explained that the system for managing MHRA alerts had been strengthened. As a result, documentation provided by the practice showed that appropriate actions to ensure compliance with safety alerts had been taken. For example, we saw evidence which demonstrated actions had been taken to ensure medicines used to ease pain and swelling in conditions such as arthritis were managed appropriately. Members of the management team explained that clinicians monitored safety alerts and all patient searches were placed on auto scheduling to ensure ongoing monitoring.