

OHP-Dr Eamon McQuillan (Bloomsbury Medical Centre)

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?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at OHP-Dr Eamon McQuillan (Bloomsbury Medical Centre) on 28 November 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 and well-led services and for the families, children and young people population group because:

- The practice was not consistently able to demonstrate that the systems they had in place to keep patients safe and protected them from avoidable harm were always well embedded.
- The practice was unable to clearly demonstrate that the systems and processes in place to support the governance of the practice were well embedded, to maintain effective oversight of the service and to deliver service improvements.
- The practice was significantly below national targets for the childhood MMR vaccines.

We rated the practice as good for providing effective, caring and responsive services because:

- Patients received effective care and treatment that met their needs.

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

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

- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.
- 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:

- Ensure a record is maintained of results from anticoagulation clinics.
- Continue to review action taken to improve the uptake of the MMR vaccine and national cancer screening programmes.
- Review systems for engaging with patients to ensure their experiences support service improvements.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Requires improvement	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team consisted of a CQC lead inspector and a GP specialist advisor to CQC.

Background to OHP-Dr Eamon McQuillan (Bloomsbury Medical Centre)

OHP-Dr Eamon McQuillan (Bloomsbury Medical Centre) is located in Nechells close to Birmingham city centre. The premises have been adapted for providing primary medical services, There is limited parking available at the practice however, parking is permitted on the street.

OHP-Dr Eamon McQuillan (Bloomsbury Medical Centre) sits within Birmingham and Solihull Clinical Commissioning Group (CCG) and provides services to approximately 1,800 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. The practice is part of the Kingstanding, Erdington and Nechells Primary Care Network (PCN). PCNs are groups of practices working together to improve and develop services locally.

The practice is also part of Our Health Partnership (OHP), provider at scale. OHP currently consists of 189 partners across 37 practices providing care and treatment to approximately 359,000 patients. OHP 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 practice level.

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

The practice is a single handed GP practice with one GP (male) supported by a long term GP (male), one practice nurse (female), a practice manager and two admin / reception staff.

The practice opening times are 9am to 6.30pm on a Monday to Friday. Extended access appointments are available at another practice (The Oaks Medical Centre) Monday to Friday between 6.30pm and 8pm and on a Saturday and Sunday between 10am and 1pm. During the out of hours period, patients can access primary medical services through the NHS 111 telephone number. The out of hours provider for the practice is BADGER.

The area served by the practice has above average levels of deprivation. Information published by Public Health England rates the level of deprivation within the practice population as one on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The practice population age distribution is slightly younger than the CCG and national averages. For example, 27% of the practice population is under 18 years or more compared to the CCG average of 25% and the national average of 21%. The practice population is diverse and is made up of patients from a white (35%), black (29%), Asian (25%), mixed or other non-white ethnic groups (10%) (source: Public Health England and 2011 Census).

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <p>There was a lack of effective systems for monitoring:</p> <ul style="list-style-type: none">• staff training to ensure it was kept up to date.• staff immunisation in line with recommended guidelines was not available for all staff• there was a lack of oversight of cleaning arrangements, including the use of cleaning equipment.• Not all incidents were recorded to ensure mitigating action and learning took place.• There was a lack of clear programme for quality improvement activity such as clinical audit.• There was a lack of clarity about what minor surgery was undertaken at the practice and availability of recommended emergency medicines. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p>How the regulation was not being met</p>

This section is primarily information for the provider

Requirement notices

The registered person had not ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed. In particular:

- Appropriate recruitment checks were not always fully completed at time of starting employment with the practice.
- Risk assessments seen in the absence of full recruitment checks did not fully consider risks.

This was in breach of Regulation 19(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.