

Yardley 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

Good



Are services safe?

Good



Overall summary

Drs Pattni & Ahmad are the registered provider of Yardley Medical Centre. The partnership registered with CQC on 9 March 2018. The practice was previously inspected on 27 March 2018. The overall rating was good with a requires improvement rating for providing safe services.

Following our inspection on 5 June 2018, this practice is still rated as Good overall.

The key question Safe is rated as:

Are services safe? – Good

We carried out an announced focused inspection at Yardley Medical Centre on 5 June 2018 to follow up on breaches of regulations we found during our March 2018 inspection. During this inspection in June 2018, we inspected the Safe key question and followed up on any Musts and Shoulds that were identified in our March 2018 inspection.

At this inspection we found:

The provider had taken the necessary action to improve their governance processes.

- We saw the practice provided non-medical prescribers with appropriate support and clinical supervision and kept records to demonstrate this.
- The practice ensured staff received appropriate induction and they collected appropriate staff immunisation status information to keep people safe.

- The practice had improved their security and monitoring processes for prescription stationery and assured us they would be able to effectively monitor all prescription stationery.
- The practice had also improved their process for using patient specific directions to ensure a GP gave clear authorisation to a healthcare assistant before they could administer a vaccine.
- The provider had also begun to collect patient feedback to assess how patients were responding to recent changes, and to identify further areas of improvement. The provider demonstrated they acted promptly to patient feedback and had made changes to their appointments system in response to feedback received.
- The practice provided us with data that showed they had received 42 responses from patients since May 2018. Of the 42 responses, 39 were positive and showed patient satisfaction had improved in areas where previously patients had expressed dissatisfaction. Patients commented staff were friendly, helpful and patients felt listened to, and their overall experience of the practice had improved. The practice informed us they were monitoring trends in the feedback, although had not yet started to keep formal records of the results of patient feedback.

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser.

Background to Yardley Medical Centre

Drs Pattni & Ahmad are the registered provider of Yardley Medical Centre. This partnership registered with CQC on 9 March 2018 to provide the following regulated activities:

- Diagnostic and screening procedures
- Maternity and midwifery services
- Treatment of disease disorder or injury.

Yardley Medical Centre is located at 1222 Coventry Road, Yardley, Birmingham, B25 8BY. More information about Yardley Medical Centre can be found on their website .

Dr Ahmad is also the registered manager for another nearby GP practice, Coventry Road Medical Centre (CRMC).

Parking is restricted and available only in a side street adjoining the practice. The practice occupies two floors, with all clinical services being offered on the ground floor. Disabled facilities are provided. The practice provides services to approximately 1300 patients.

There are two male part time GPs working at the practice. The practice employs a part time: nurse, health care assistant and locum clinical pharmacist prescriber. The nurse and health care assistant are employed to work at both practices. The clinical staff are supported by a practice manager (who also works at CRMC), a business manager and reception staff.

The practice is located in a deprived area. Deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial. The practice serves a higher than average patient population aged above 75 years, and has a below average practice population aged 14 to 18 years.

The practice is open between 8.30am and 1pm and between 2.30pm and 6.30 pm on Monday, Tuesday, Thursday and Friday. On Wednesday, the practice is open in the morning between 8.30 and 1pm. Whenever the practice is closed and during out of hours cover is provided by Badger GP out of hours service.

Appointments are from 9.20am to 11.20am and 4.30pm to 6.30pm on Monday, Tuesday, Thursday and Friday and from 9.20am to 11.20am on Wednesday.

We carried out a focussed inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider had made improvements following our inspection in March 2018 and was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

Are services safe?

At our previous inspection on 27 March 2018, we rated the practice as requires improvement for providing safe services as the arrangements in respect of staff induction, collection of staff information including immunisation and medical indemnity were not adequate and not all policies, including clinical supervision of non-medical prescribers were fully embedded.

These arrangements had improved when we undertook a follow up inspection on 5 June 2018. The practice is now rated as good for providing safe services.

Safety systems and processes

The practice had made improvements to systems to ensure people were safe and safeguarded from abuse.

- The practice ensured staff received safety information as part of formal Induction.
- The practice ensured staff had appropriate medical indemnity in place.
- The practice had collected necessary staff immunisation information in line with Public Health England guidance.

Risks to patients

The practice had improved their systems to assess, monitor and manage risks to patient safety.

- During our inspection in March 2018, the provider informed us they stocked some emergency medicines, and they had a written agreement with the pharmacy next door (within the same building) to obtain other emergency medicines if they were needed. During this

inspection, we found the provider stocked most emergency medicines and had completed a risk assessment for the ones they had decided not to stock. They also still maintained an agreement with the pharmacy to obtain medicines if needed. The pharmacy confirmed this agreement was in place. We saw the practice had improved their system to manage emergency medicines, it was clearer to staff which medicines were available in the practice and which ones were available from the pharmacy. We saw the pharmacy was easily accessible and open the same hours as the GP practice.

- We saw the lead GP supervised non-medical prescribers and supported them appropriately to ensure patient's medical needs were being assessed and responded to safely.

Appropriate and safe use of medicines

The practice had made improvements to their systems for the appropriate and safe handling of medicines.

- The practice ensured prescription stationery was kept secure at all times and had amended their protocol for prescription security to ensure prescription stationery was monitored more effectively.
- Following our March 2018 inspection, the practice had amended their policy for patient specific directions (PSDs) to ensure the GP checked and recorded that it was appropriate for patients to receive a vaccine before the healthcare assistant administered it.

Please refer to the Evidence Tables for further information.