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

<table>
<thead>
<tr>
<th>Overall rating for this service</th>
<th>Good</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are services safe?</td>
<td>Good</td>
</tr>
</tbody>
</table>
Letter from the Chief Inspector of General Practice

This practice is rated as Good overall. (Previous inspection 14 October 2016 – Good)

The key questions are rated as:

Are services safe? – Good

We carried out an announced comprehensive inspection at Eden Court Medical Practice on 14 October 2016. The overall rating for the practice was good; however, the practice was rated as requires improvement for providing safe services. The full comprehensive report on the October 2016 inspection can be found by selecting the ‘all reports’ link for Eden Court Medical Practice on our website at www.cqc.org.uk.

Following our October 2016 inspection, we asked the practice to send us a report that says what actions they were going to take to meet legal requirements. This inspection was a focused inspection carried out on 18 April 2018 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 14 October 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

At this inspection we found:

The practice had addressed all concerns that were identified at our previous inspections.

• The practice had clear systems to manage risk so that safety incidents were less likely to happen. When incidents did happen, the practice learned from them and improved their processes.

• The practice routinely reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence based guidelines.

• There was a strong focus on continuous learning and improvement at all levels of the organisation.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice
The six population groups and what we found

We always inspect the quality of care for these six population groups.

<table>
<thead>
<tr>
<th>Population Group</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older people</td>
<td>Good</td>
</tr>
<tr>
<td>People with long term conditions</td>
<td>Good</td>
</tr>
<tr>
<td>Families, children and young people</td>
<td>Good</td>
</tr>
<tr>
<td>Working age people (including those recently retired and students)</td>
<td>Good</td>
</tr>
<tr>
<td>People whose circumstances may make them vulnerable</td>
<td>Good</td>
</tr>
<tr>
<td>People experiencing poor mental health (including people with dementia)</td>
<td>Good</td>
</tr>
</tbody>
</table>
Background to Eden Court Medical Practice

Dr Naresh Kumar Aggarwal, Dr Patricia Beighton, Dr Perminderjit Dhahan and Dr Richard Edwards are the registered providers of Eden Court Medical Practice, which is located at 200 Tangmere Drive, Castle Vale, Birmingham, West Midlands, B35 6EE. The practice is situated in a Health Centre which is a multipurpose modern built building providing NHS services to the local community. Further information about Eden Court Medical Practice can be found by accessing the practice website at www.edencourt.org.uk

Based on data available from Public Health England, the area served by Eden Court Medical Practice has higher levels of deprivation than the national average, ranked at one out of 10, with 10 being the least deprived. (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 from five to 34; 45 to 50 and 70 to 85 and over. Patients aged between 30 to 44 are below local and national average.

Based on data available from Public Health England, the ethnicity estimate is 6% Mixed, 3% Asian and 6% Black.

The patient list is 7,800 of various ages registered and cared for at the practice. Services to patients are provided under a General Medical Services (GMS) 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.

On-site parking is available with designated parking for cyclists and patients who display a disabled blue badge. The surgery has automatic entrance doors and is accessible to patients using a wheelchair and pushchairs.

Practice staff consists of four partners (one female and three male), one female salaried GP, two practice nurses and a health care assistant. Management and reception staff consists of a practice manager who is supported by a team of receptionists, secretaries and administrators.

Eden Court Medical Practice is an approved training practice and provides training to medical students. At the time of our inspection there were two male and two female GP registrars (GPs in training). They are all fully qualified doctors who have worked in hospitals and other surgeries, and are completing some of their training at Eden Court.

The practice is open from 8.30am to 6.30pm Monday to Friday, except Wednesday when the practice closes at 1.30pm.

Appointment times are between 8.30am to 11.30am and between 3pm and 5pm. Patients were seen after morning and afternoon sessions based on a triage assessment. Later appointments can be arranged by speaking to the duty doctor. When the practice is closed (including during core hours) services are provided by Birmingham and District General Practitioner Emergency Rooms (BADGER) medical services.
Dr Naresh Kumar Aggarwal, Dr Patricia Beighton, Dr Perminderjit Dhahan and Dr Richard Edwards is registered to provide surgical procedures, maternity and midwifery services, treatment of disease, family planning, diagnostic and screening procedures. The practice was previously inspected in October 2016 and rated overall good.
Are services safe?

Our findings

At our previous inspection on 14 October 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of identifying and managing risks were not adequate. The practice did not operate a clear system for ensuring learning from safety incidents were shared amongst practice staff.

These arrangements had improved when we undertook a follow up inspection on 18 April 2018. The practice is now rated as good for providing safe services.

Safety systems and processes

The practice had clear systems to keep patients safe.

• The practice had arrangements to ensure that facilities and equipment were safe and in good working order. For example, the practice had arrangements in place for yearly electrical testing of portable appliances carried out by an external contractor.

• The practice carried out staff checks, including checks of professional registration where relevant, on recruitment and on an on-going basis. Disclosure and Barring Service (DBS) checks were undertaken for all staff members. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable. Where required, risk assessments had been carried out to mitigate identified risks.

Risks to patients

Systems to assess, monitor and manage risks to patient safety had improved since our previous inspection.

• Staff understood their responsibilities to manage emergencies on the premises and to recognise those in need of urgent medical attention. Staff maintained logs which demonstrated routine checks of emergency equipment such as the practice defibrillator and oxygen cylinders.

Appropriate and safe use of medicines

Since our previous inspection, the practice improved systems and processes to ensure appropriate and safe handling of medicines.

• Following our previous inspection, the practice provided us with a copy of a revised prescription stationery protocol which set out monitoring arrangements to improve prescription security. During our April 2018 we reviewed the practice progress in embedding this protocol. Staff we spoke with demonstrated how the practice kept prescription stationery secure and monitored its use. For example, hand written prescription pads and those used for prescribing medicines to treat drug dependency were monitored with a clear audit trail of their use.

• Staff prescribed medicines to patients and gave advice in line with legal requirements and current national guidance.

• The practice implemented systems to support effective monitoring of patients’ health to ensure medicines were being used safely and followed up on appropriately. The practice involved patients in regular reviews of their medicines. From the anonymised sample of records we viewed; we saw that medicines were being prescribed and monitored in line with national prescribing guidelines.

• Staff explained that test results were viewed by GPs to ensure results were satisfactory before reauthorisation of medicine.

Track record on safety

The practice had improved their management of risks to ensure good safety records were maintained.

• There were comprehensive risk assessments in relation to safety issues. For example, since our previous inspection, the practice arranged for a fire risk assessment to be completed.

• Members of the management team monitored and reviewed activity. This helped them to understand risks and gave a clear, accurate and current picture that led to safety improvements. For example, actions identified following risk assessments such as securing contracts for electrical testing and maintenance contract for emergency lighting.
• The practice had a variety of other risk assessments in place to monitor safety of the premises such as control of substances hazardous to health (COSHH) and legionella (Legionella is a term for a particular bacterium which can contaminate water systems in buildings). We saw evidence of effective control measures to ensure on-going safety such as completed COSHH data sheets and regular testing of water temperatures.

**Lessons learned and improvements made**

The practice had reviewed and improved systems for reporting and recording significant events to ensure a consistent approach when following up on incidents. Since our previous inspection, the practice had recorded 21 incidents.

• Staff understood their duty to raise concerns and report incidents and near misses. Leaders and managers supported them when they did so.

• There were systems for reviewing and investigating when things went wrong. The practice learned and shared lessons during monthly clinical and administration meetings.

• From the recorded events we viewed, we saw that the practice had identified themes and took action to improve safety in the practice.

• The practice acted on and learned from external safety events as well as patient and medicine safety alerts.

Please refer to the Evidence Tables for further information.