

# Cape Hill 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

Outstanding 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Outstanding 

Are services responsive?

Good 

Are services well-led?

Outstanding 

# Overall summary

We carried out an announced focussed inspection at Cape Hill Medical Centre on 2 October 2019 as part of our inspection programme.

We carried out an inspection of this service following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a significant change to the quality of care provided since the last inspection.

This inspection focused on the following key questions: Effective, Caring, Responsive and Well-led.

Because of the assurance received from our review of information we carried forward the rating for the following key questions: Safe.

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 Outstanding overall and Outstanding for older people and people whose circumstances make them vulnerable. We rated working age people as requires improvement.

We rated the practice as **outstanding** for the population group older people because:

- The clinical staff carried out weekly ward rounds at three local nursing homes and two care homes. Due to the demand for home visits and an increase in A&E attendances, the practice implemented the ward rounds at all of the homes to ensure patients were receiving regular reviews and appropriate care. To further support the nursing/care home staff working in the homes, the practice had implemented an education programme to support them in their role.
- The advanced nurse practitioners offered housebound clinics. A total of six sessions were carried out each week to support patients who could not attend the practice.
- The practice had achieved the Gold Standards Framework Royal College of General Practitioners (RCGP) Quality Hallmark award in end of life care. There were 139 patients on the practice's Gold Standards

Framework register and a single clinical lead was in place that examined all clinical notes and co-ordinated care for patients as a whole team approach with ongoing education and regular clinical meetings.

We rated the practice as **outstanding** for the population group vulnerable people because:

- The practice had a wellbeing hub on-site and had employed a support team to provide high quality care and guidance to patients. The hub had a link worker to offer advice on local support groups and advice, a chaplain and counsellor and a work coach to support patients to return to work. Also vulnerable patients were able to access the 'Thrive to Work' programme which the practice had implemented in September 2018. Data provided by the practice showed 39 patients had attended the work programme.
- The practice had identified some patients were attending the practice frequently. To ensure all of the patients' needs were being met, the in-house social prescriber contacted each patient to offer support and advice of local services.

We rated the practice as **outstanding** for providing caring and well-led services because:

- Services were tailored to meet the needs of individual patients. They were delivered in a flexible way that ensured choice and continuity of care. The practice had identified areas where there were gaps in provision locally and had taken steps to address them.
- The practice were responsive to the needs of the local population and continually reviewed the services provided and implemented initiatives to ensure patients received appropriate care and support.
- The culture of the practice and the way it was led and managed drove the delivery and improvement of high-quality, person-centred care.
- There was a strong emphasis on learning and sharing outcomes with the whole team and external organisations to promote best practice.
- All opportunities for learning from internal and external incidents were maximised. All learning was shared with staff regularly.
- Leaders demonstrated they had the capacity and skills to deliver high quality, sustainable care.
- There was effective leadership at all levels which supported innovation, implementation of processes and the continuous monitoring of patient care.

# Overall summary

- There was continuous commitment to patients and external stakeholders to share information, ideas and improvements. This included a well being hub, steering groups to improve service provision and an audit programme to drive quality improvement.

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

- The practice formed steering groups to review the effectiveness of their services and to discuss and implement new initiatives and improvements to ensure patients were receiving appropriate care.
- There was effective leadership at all levels which supported innovation, implementation of processes and the continuous monitoring of patient care.
- There was continuous commitment to patients and external stakeholders to share information, ideas and improvements. This included supporting local practices with the delivery of services to ensure continuity of care for patients in the locality.
- The practice continually reviewed the effectiveness of their services and had a range of educational meetings and steering groups in place to monitor the effectiveness of the services provided.

- Patient feedback demonstrated patients were satisfied with the services received and felt staff were helpful and supportive.

We rated the practice as **requires improvement** for working age people because:

- Cancer screening rates were lower than the national targets.

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

- Monitor and review processes for exception reporting of patients with long term conditions.
- Continue with efforts to improve uptake of childhood immunisations.
- Continue to encourage patients to attend cervical screening appointments.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a practice nurse specialist advisor.

## Background to Cape Hill Medical Centre

Cape Hill Medical Centre is located in Smethwick, West Midlands. The practice is located in a purpose built building; there is step free access to the building with wheel chair access and car parking. The practice has good transport links and there are several pharmacies located nearby.

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.

Cape Hill Medical Centre is part of Birmingham and Solihull Clinical Commissioning Group (CCG) and provides services to 12,000 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice's clinical team is led by eight GP partners (four male and four female). The clinical team consists of three salaried GPs (one male and two female) and a nursing team, of three prescribing nurse practitioners

(three female), three practice nurses (one male and two female) and two health care assistants (one male and one female) and a phlebotomist. There is a practice manager, IT manager and a team of administration and reception staff. The practice is a teaching practice for GP registrars and medical students.

The practice opening hours are Monday to Friday 8am until 8pm. The practice is part of Caristos Federation and patients had access to appointments from 6.30pm to 8pm Monday to Friday and 8am to 10am Saturday and Sunday at the practice. When the practice is closed, out of hours cover is provided by NHS 111.

The National General Practice Profile states that 63.9% of the practice population is from a Black and Ethnic Minority Groups (BME). Information published by Public Health England, rates the level of deprivation within the practice population group as one, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.