

Greenway Community Practice

Inspection report

Greystoke Avenue
Southmead
Bristol
BS10 6AF

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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?

Outstanding 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Outstanding 

Overall summary

We carried out an announced comprehensive inspection at Greenway Community Practice on 4 December 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 (either deterioration or improvement) to the quality of care provided since the last inspection.

This inspection looked at the following key questions: Safe, Effective, Responsive, Caring and Well Led; and all six patient population groups.

We based our judgement of the quality of care at this service is 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.

At the last inspection in January 2016 we identified areas where the provider should make improvement. These included ensuring all the required checks for personnel employed were undertaken; and that protocols for the security of blank prescription stationery were maintained.

At this inspection, we found that the provider had satisfactorily addressed these areas.

We have rated this practice as Outstanding overall.

We rated the practice as Outstanding for providing safe services because people are protected by a comprehensive safety system; and a focus on openness, transparency and learning when things go wrong. For example:

- there was evidence of proactive work that resulted in the best local performance in anti-microbial prescribing;
- there were comprehensive arrangements in place for safeguarding;
- the practice had implemented an electronic communication and collaboration system. This ensured effective, open and prompt communication and easy access to information including for infection prevention and control, significant learning events and safety alerts.

We rated the practice as Outstanding for providing well-led services because the leadership, governance and culture were used to drive and improve the delivery of high-quality person-centred care. For example:

- comprehensive and successful leadership strategies are in place to ensure and sustain delivery and to develop the desired culture. Leaders have an understanding of issues, challenges and priorities in their service, and beyond.
- there is collaboration, team-working and support across all functions and a common focus on improving the quality and sustainability of care and people's experiences. This was facilitated by a comprehensive and accessible electronic communication and collaboration platform.
- governance arrangements are proactively reviewed and reflect best practice. A systematic approach is taken to working with other organisations to improve care outcomes.
- there is a demonstrated commitment to best practice performance and risk management systems and processes. The organisation reviews how they function and ensures that staff at all levels have the skills and knowledge to use those systems and processes effectively. Problems are identified and addressed quickly and openly.
- the service invests in innovative and best practice information systems and processes. The information used in reporting, performance management and delivering quality care is consistently found to be accurate, valid, reliable, timely and relevant.
- there are high levels of constructive engagement with staff and people who use services, including all equality groups.
- the service takes a leadership role in its health system to identify and proactively address challenges and meet the needs of the population.
- there is a fully embedded and systematic approach to improvement, which makes consistent use of a recognised improvement methodology. Improvement is seen as the way to deal with performance and for the organisation to learn. Improvement methods and skills are available and used across the organisation, and staff are empowered to lead and deliver change.

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

Overall summary

- 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.

We rated all patient population groups as good.

We saw several areas of outstanding practice including:

- the practice had comprehensive arrangements in place for safeguarding.
- A comprehensive electronic communication and collaboration system was in place, accessible to all staff that enabled sharing of documentation, links to and open discussion of issues.
- proactive approach to improve performance on prescribing of medicines including antibacterial and non-steroidal anti-inflammatory drugs (NSAIDs).
- effective management in place for high risk medicines, including close working with the local drug and alcohol advisory service.
- monthly 'masterclass' meetings to review the latest clinical evidence and local and national guidance, including any safety information.
- a lower than average number of patients per GP and personalised patient lists so patients received better than average continuity of care, whilst having access to other GPs and clinicians for urgent matters.
- Numerous initiatives that improved patient care including higher than average rates of flu immunisation;

chronic lower back pain clinic; effective care navigation (including for patients with a mental health condition); comprehensive diabetes and pre-diabetes care; support for carers; in house pessary clinic and same day phlebotomy service; and effective social prescribing arrangements.

- comprehensive staff appraisal scheme, linked to performance and competencies, that included an innovative 'talent matrix', staff support and career development.
- programme of 'culture basics' staff development was in place covering agreed values and behaviours.
- positive patient feedback in the national GP patient survey results since 2018 and from CQC comment cards.
- comprehensive leadership, governance and culture that were used to drive and improve the delivery of high-quality person-centred care.

Whilst we found no breaches of regulations, the provider **should:**

- Improve uptake for patients eligible for cervical cancer screening and childhood immunisations.
- Review exception reporting rates for patients with diabetes and COPD.

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

Our inspection team

Our inspection team was led by a CQC lead inspector supported by a GP specialist advisor.

Background to Greenway Community Practice

Greenway Community practice is located in a suburban area of Bristol city and is one of 80 practices in the Bristol, North Somerset and South Gloucestershire (BNSSG) Clinical Commissioning Group (CCG) area. The practice is part of the evolving 'Affinity Medical Group' Primary Care Network (PCN) with five other GP practices. The practice provides services to 8,800 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and BNSSG CCG for delivering services to the local community.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures; and treatment of disease, disorder or injury. These are delivered from a single location:

Greenway Community Practice, Greystoke Avenue, Southmead, Bristol BS10 6AF

The provider is a partnership of four GPs (two female and two male) and employs four salaried GPs; a clinical pharmacist, four practice nurses and three health care assistants (HCAs). They are supported by a practice management and administrative team. The practice is a teaching practice for medical students. On the day of this

inspection there were there were no GP trainees present. The GPs maintain personal lists of patients so that all patients and their families or households have a named GP to facilitate continuity of care.

The practice patient age profile is in line with local and national averages for all age groups except for younger patients where there is a higher than average number of patients under the age of 18 (23.3%) than the national average (20.7%). The National General Practice Profile states that 86.3% of the practice population is from a white background with 13.7% of the population originating from Asian (6.1%), black (3.8%), mixed race (3.1%) or other (0.6%) non-white ethnic groups.

Information published by Public Health England, rates the level of deprivation within the practice population group as three, on a scale of one to ten. (Level one represents the highest levels of deprivation and level ten the lowest). Male and female life expectancy is 77.8 years and 81.5 years respectively, each of which is around one and a half years lower than the respective local and national averages.

The practice does not provide out-of-hours services to its patients and when closed patients can access the local out-of-hours service provider via NHS 111. Contact information for this service is available in the practice and on the practice website.